

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the 2002 calendar year, or tax year beginning 07/01, 2002, and ending 06/30/2003

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

C Name of organization

SOUTH OAKLAND SHELTER

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

431 N MAIN

City or town, state or country, and ZIP + 4

ROYAL OAK, MI 48067

D Employer identification number

38-2847849

E Telephone number

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 GEN

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

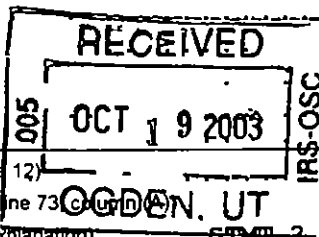
G Web site: N/A

J Organization type (check only one) ☒ 501(c)(3) (insert no.) ☐ 4947(a)(1) or ☐ 527K 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: 873,955

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

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Direct public support	1a	87,210			
	b	Indirect public support	1b				
	c	Government contributions (grants)	1c	160,743			
	d	Total (add lines 1a through 1c) (cash \$ 247,953 noncash \$)	1d	247,953			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4				
	5	Dividends and interest from securities	5	28,042			
	6a	Gross rents	6a				
6b	Less: rental expenses	6b					
6c	Net rental income or (loss) (subtract line 6b from line 6a)	6c					
7	Other investment income (describe)	7					
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	587,958	8a		
	b	Less: cost or other basis and sales expenses	633,889	8b			
	c	Gain or (loss) (attach schedule)	-45,931	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	-45,931			
	9	Special events and activities (attach schedule)					
	a	Gross revenue (not including \$ of contributions reported on line 1a)	STMT 1 9a	9,905			
	b	Less: direct expenses other than fundraising expenses	9b	4,103			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	5,802			
	10a	Gross sales of inventory, less returns and allowances	10a				
	b	Less: cost of goods sold	10b				
10c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c					
11	Other revenue (from Part VII, line 103)	11	97				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	235,963				
Net Assets	13	Program services (from line 44, column (B))	13	272,612			
	14	Management and general (from line 44, column (C))	14	101,333			
	15	Fundraising (from line 44, column (D))	15				
	16	Payments to affiliates (attach schedule)	16				
	17	Total expenses (add lines 16 and 44, column (A))	17	373,945			
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-137,982				
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,045,589				
20	Other changes in net assets or fund balances (attach explanation)	20	38,939				
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	946,546				



Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25	49,520	44,568	4,952
26	Other salaries and wages	26	122,991	74,465	48,526
27	Pension plan contributions	27			
28	Other employee benefits	28	19,006	12,977	6,029
29	Payroll taxes	29	13,744	9,621	4,123
30	Professional fundraising fees	30			
31	Accounting fees	31	7,400		7,400
32	Legal fees	32	371		371
33	Supplies	33	12,527	9,396	3,131
34	Telephone	34	9,058	8,152	906
35	Postage and shipping	35	2,118	1,270	848
36	Occupancy	36	80,428	68,363	12,065
37	Equipment rental and maintenance	37			
38	Printing and publications	38	3,412	1,774	1,638
39	Travel	39	11,496	9,197	2,299
40	Conferences, conventions, and meetings	40	2,283	982	1,301
41	Interest	41			
42	Depreciation depletion, etc. (attach schedule)	42	9,886	7,414	2,472
43	Other expenses not covered above (itemize) STMT 3	43a	29,705	24,433	5,272
b		43b			
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15.</i>	44	373,945	272,612	101,333

Joint Costs Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ (ii) the amount allocated to Program services \$ _____

(iii) the amount allocated to Management and general \$ _____ and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)What is the organization's primary exempt purpose? **STMT 4**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)

a	PROVIDE COUNSELING SERVICES TO HOMELESS WHO QUALIFY FOR THEIR PROGRAM	(Grants and allocations \$ _____)	162,488.
b	DIRECT CLIENT ASSISTANCE	(Grants and allocations \$ _____)	110,124.
c		(Grants and allocations \$ _____)	
d		(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		272,612

Part IV Balance Sheets (See page 24 of the 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		79,564	45	40,797
	46	Savings and temporary cash investments		25,208	46	8,878
	47a	Accounts receivable	47a 2,622			
	b	Less allowance for doubtful accounts	47b	6,893	47c	2,622
	48a	Pledges receivable	48a		48c	
	b	Less allowance for doubtful accounts	48b			
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		8,411	53	8,711
	54	Investments - securities (attach schedule) STMT 5 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		839,019	54	804,340
	55a	Investments - land, buildings, and equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55c	
56	Investments - other (attach schedule)			56		
57a	Land, buildings, and equipment basis STMT 7	57a 152,278				
b	Less accumulated depreciation (attach schedule)	57b 63,007	92,510	57c	89,271	
58	Other assets (describe ►)			58		
59	Total assets (add lines 45 through 58) (must equal line 74)		1,051,605	59	954,619	
Liabilities	60	Accounts payable and accrued expenses		6,016	60	8,073
	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)			64b	
	65	Other liabilities (describe ►)			65	
66	Total liabilities (add lines 60 through 65)		6,016	66	8,073	
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		1,045,589	67	946,546
	68	Temporarily restricted			68	
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72) column (A) must equal line 19, column (B) must equal line 21		1,045,589	73	946,546
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		1,051,605	74	954,619

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information (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? If "Yes," attach a conformed copy of the changes	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization: _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a Enter direct or indirect political expenditures. See line 81 instructions	81a	
b Did the organization file Form 1120-POL for this year?	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members?	85a	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c Dues, assessments, and similar amounts from members	85c	
d Section 162(e) lobbying and political expenditures	85d	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> N/A, section 4912 <input type="checkbox"/> N/A, section 4955 <input type="checkbox"/> N/A		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d Enter Amount of tax on line 89c, above, reimbursed by the organization		N/A
90 a List the states with which a copy of this return is filed <input checked="" type="checkbox"/> MICHIGAN		
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	6
91 The books are in care of <input checked="" type="checkbox"/> MONICA DUNCAN Telephone no <input checked="" type="checkbox"/> 248-546-6566		
Located at <input checked="" type="checkbox"/> 431 N MAIN, ROYAL OAK MI ZIP + 4 <input checked="" type="checkbox"/> 48067		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input checked="" type="checkbox"/> 92 N/A		

Form 990 (2002)

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	28,042	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-45,931	
101 Net income or (loss) from special events			2	5,802	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b OTHER INCOME					97
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				-12,087	97
105 Total (add line 104, columns (B), (D) and (E))					-11,990

Note Line 105 plus line 1d Part I should equal the amount on line 12 Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
103	INCOME RECEIVED PROVIDED THE FUNDS NEEDED TO CARRY OUT THE PROGRAM SERVICES

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

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

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

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

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

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

Please
Sign


Date

10/14/03

Doncom Executive Director

Date

Check if

Preparer's SSN or PTIN (See Gen. Inst. W)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

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

OMB No 1545-0047

2002

Name of the organization

SOUTH OAKLAND SHELTER

Employer identification number

38-2847849

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50 000		► NONE		

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		► NONE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule A (Form 990 or 990-EZ) 2002

JSA
ZE1210 1 000

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

Yes No

1 During the year has the organization attempted to influence national state or local legislation including any attempt to influence public opinion on a legislative matter or referendum? If Yes, enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38 Part VI-A or line 1 or Part VI-B)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking Yes, must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families or with any taxable organization with which any such person is affiliated as an officer, director trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes" attach a detailed statement explaining the transactions)

a Sale, exchange, or leasing of property?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE STATEMENT 10

2d X

e Transfer of any part of its income or assets?

2e X

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

3 X

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

4 X

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

STMT 11

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state: _____

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

12 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	304,959	295,793	251,530	292,636	1,144,918
16 Membership fees received					
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	16,635	495	210	1,231	18,571
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	33,084	46,208	47,523	49,841	176,656
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.	STMT 12	7,315	11,677	9,548	28,540
23 Total of lines 15 through 22	354,678	349,811	310,940	353,256	1,368,685
24 Line 23 minus line 17	338,043	349,316	310,730	352,025	1,350,114
25 Enter 1% of line 23	3,547	3,498	3,109	3,533	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 27,002
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					26b 70,994
c Total support for section 509(a)(1) test. Enter line 24, column (e).					26c 1,350,114
d Add: Amounts from column (e) for lines 18 176,656 19 22 28,540 26b 70,994					26d 276,190
e Public support (line 26c minus line 26d total)					26e 1,073,924
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 79.5432 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a disqualified person, prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.				
(2001) _____ (2000) _____ (1999) NOT APPLICABLE (1998) _____					
b For any amount included in line 17 that was received from each person (other than disqualified persons), prepare a list for your records to show the name of, and amount received for each year that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11 as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.					
(2001) _____ (2000) _____ (1999) _____ (1998) _____					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add: Line 27a total _____ and line 27b total _____					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e).					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h _____ %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31	

32 Does the organization maintain the following	32a	
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32b	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32c	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	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)		

33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44 you must file Form 4720**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions

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

Part VI-B Lobbying Activity by Nonelecting Public Charities**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

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
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

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

a Transfers from the reporting organization to a noncharitable exempt organization of

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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

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

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► ☐ Yes ☒ No

b If 'Yes,' complete the following schedule

[illegible]

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545 0172

2002Department of the Treasury
Internal Revenue Service

▶ See separate instructions

▶ Attach to your tax return

Attachment
Sequence No **67**

Name(s) shown on return

Identifying number

SOUTH OAKLAND SHELTER**38-2847849**

Business or activity to which this form relates

GENERAL DEPRECIATION**Part I Election To Expense Certain Tangible Property Under Section 179***Note: If you have any listed property, complete Part V before you complete Part I*

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

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7	Listed property Enter the amount from line 29	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8
9	Tentative deduction Enter the smaller of line 5 or line 8	9
10	Carryover of disallowed deduction from line 13 of your 2001 Form 4562	10
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11
12	Section 179 expense deduction Add lines 9 and 10 but do not enter more than line 11	12
13	Carryover of disallowed deduction to 2003 Add lines 9 and 10, less line 12	13

*Note: Do not use Part II or Part III below for listed property. Instead, use Part V***Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	9,886

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

17	MACRS deductions for assets placed in service in tax years beginning before 2002	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2002 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (see page 6 of the instructions)

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	9,886
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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

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

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

24a Do you have evidence to support the business/investment use claimed?		Yes	No	24b If Yes is the evidence written?		Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 7 of the instructions)							25	
26 Property used more than 50% in a qualified business use (see page 7 of the instructions)								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use (see page 7 of the instructions)								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21 page 1							28	
29 Add amounts in column (i) line 26 Enter here and on line 7 page 1								29

Section B - Information on Use of Vehicles

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

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

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

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

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

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

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2002 tax year (see page 9 of the instructions)					
43 Amortization of costs that began before your 2002 tax year					43
44 Total Add amounts in column (f) See page 9 of the instructions for where to report					44

Part IV Capital Loss Limitation

17 Enter here and enter as a (loss) on Form 1041, line 4, the smaller of

a The loss on line 16, column (3) or

b \$3,000

17 (3,000)

If the loss on line 16 column (3), is more than \$3,000 or if Form 1041 page 1 line 22, is a loss, complete the **Capital Loss Carryover Worksheet** on page 34 of the instructions to determine your capital loss carryover**Part V Tax Computation Using Maximum Capital Gains Rates** (Complete this part only if both lines 15a and 16 in column (2) are gains, and Form 1041, line 22 is more than zero)**Note** If line 15b column (2) or line 15d, column (2) is more than zero complete the worksheet on page 35 of the instructions to figure the amount to enter on lines 20 and 38 below and skip all other lines below. Otherwise go to line 18

18 Enter taxable income from Form 1041, line 22

19 Enter the smaller of line 15a or 16 in column (2)

20 If the estate or trust is filing Form 4952, enter the amount from line 4e, otherwise, enter -0-

21 Subtract line 20 from line 19. If zero or less, enter -0-

22 Subtract line 21 from line 18. If zero or less, enter -0-

23 Figure the tax on the amount on line 22. Use the 2002 Tax Rate Schedule on page 21 of the instructions

24 Enter the smaller of the amount on line 18 or \$1,850

If line 24 is greater than line 22, go to line 25. Otherwise, skip lines 25 through 31 and go to line 32

25 Enter the amount from line 22

26 Subtract line 25 from line 24. If zero or less, enter -0- and go to line 32

27 Enter the estate's or trust's allocable portion of qualified 5-year gain, if any, from line 15c, column (2)

28 Enter the smaller of line 26 or line 27

29 Multiply line 28 by 8% (.08)

30 Subtract line 28 from line 26

31 Multiply line 30 by 10% (.10)

If the amounts on lines 21 and 26 are the same, skip lines 32 through 35 and go to line 36

32 Enter the smaller of line 18 or line 21

33 Enter the amount, if any, from line 26

34 Subtract line 33 from line 32

35 Multiply line 34 by 20% (.20)

36 Add lines 23, 29, 31, and 35

37 Figure the tax on the amount on line 18. Use the 2002 Tax Rate Schedule on page 21 of the instructions

38 Tax on all taxable income (including capital gains). Enter the smaller of line 36 or line 37 here and on line 1a of Schedule G, Form 1041

Schedule D (Form 1041) 2002

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
ARTS, BEATS AND EATS PARISIANS	7,177 2,728	4,103.	3,074 2,728
TOTALS	9,905	4,103.	5,802.

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES
=====DESCRIPTION
-----AMOUNT

UNREALIZED GAIN ON INVESTMENTS

38,939

TOTAL

38,939.
=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL
COMPUTER EXPENSE	457.		457
DIRECT FINANCIAL ASSISTANCE	17,241	17,241.	
MISCELLANEOUS	7,625	3,584.	4,041
MEMBERSHIPS	548.		548
PROFESSIONAL LIABILITY INSURAN	3,268	3,268.	
SUBSCRIPTIONS	566.	340.	226
TOTALS	29,705.	24,433.	5,272

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

TO FUND, OPERATE AND MAINTAIN A PROGRAM TO SHELTER AND PROVIDE
SUPPORT SERVICES TO THE HOMELESS.

FORM 990, PART IV - INVESTMENTS - SECURITIES

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
US TREASURY NOTES - RECORDED AT FAIR MKT VALUE	462,377	
GLOBAL MARINE STOCK - RECORDED AT FAIR MKT VALUE	903	
MUTUAL FUNDS - RECORDED AT FAIR MKT VALUE	321,391	
MONEY MARKET FUNDS - RECORDED AT FAIR MKT VALUE	54,348	18,824
DEBT SECURITIES - RECORDED AT FAIR MKT VALUE		377,772.
EQUITY SECURITIES - RECORDED AT FAIR MKT VALUE		407,744
	-----	-----
TOTALS	839,019.	804,340
	=====	=====

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
FURN & FIXTURES	SL	10,606			10,606	10,606			10,606
OFFICE EQUIPMENT	SL	5,616			5,616	5,616			5,616
FURN & FIXTURES	SL	1,419			1,419	1,320	101		1,421
OFFICE EQUIPMENT	SL	500			500	463	36		499
FURN & FIXTURES	SL	535			535	380	76		456
OFFICE EQUIPMENT	SL	6,394			6,394	6,394			6,394
FURN & FIXTURES	SL	4,850			4,850	2,295	693		2,988
LEASEHOLD IMPROV	SL	108,830			108,830	24,892	7,255		32,147
FURN & FIXTURES	SL	202			202	39	29		68
FURN & FIXTURES	SL	425			425	61	61		122
LEASEHOLD IMPROV	SL	380			380	48	25		73
LEASEHOLD IMPROV	SL	1,300			1,300	87	87		174
OFFICE EQUIPMENT	SL	1,150			1,150	364	230		594
OFFICE EQUIPMENT	SL	510			510	145	102		247
OFFICE EQUIPMENT	SL	393			393	175	131		306
OFFICE EQUIPMENT	SL	150			150	54	50		104
OFFICE EQUIPMENT	SL	1,635			1,635	164	327		491
FURN & FIXTURES	SL	735			735	18	105		123

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

			FIXED ASSET DETAIL			ACCUMULATED DEPRECIATION DETAIL		
ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	ENDING BALANCE
OFFICE EQUIPMENT	SL		3,708		3,708		265	265
OFFICE EQUIPMENT	SL		2,650		2,650		265	265
OFFICE EQUIPMENT	SL		289		289		48	48
TOTALS		145,630			152,277	53,121		63,007

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

DESCRIPTION

AMOUNT

DIRECT FUNDRAISING EXPENSES

4,103

TOTAL

4,103.

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION -----	AMOUNT -----
DIRECT FUNDRAISING EXPENSES	4,103

TOTAL	4,103
	=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
=====

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SEE ATTACHED SCHEDULE	5 HRS/WK	NONE	NONE	NONE
MONICA DUNCAN 431 N. MAIN ST. ROYAL OAK MI 48067	EXECUTIVE DIRECTOR 60 HRS/WK	49,520.	NONE	NONE
GRAND TOTALS		49,520.	NONE	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

INDIVIDUALS RECEIVING DISBURSEMENTS QUALIFY BASED ON NEED AS
DETERMINED BY THE BOARD.
THE ORGANIZATION HELPS TO PROVIDE SHELTER AND SUPPORTIVE SERVICES
TO THE HOMELESS.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2001	2000	1999	1998	TOTAL
FUNDRAISING					
		7,315	11,677.	9,548.	28,540
TOTALS		7,315	11,677.	9,548.	28,540

38-2847849

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) FROM SECURITIES					
BARRON ASSET FUND - 1,654 SHARES	VAR	12/10/2002	57,518.	71,731	-14,213.
EUROPACIFIC GROWTH - 1,111 SHARES	VAR	12/10/2002	25,683.	29,019	-3,336.
FIDELITY VALUE FUND - 982 SHARES	VAR	12/10/2002	45,739.	51,940.	-6,201
HARBOR INT'L EQUITY FUND - 3,299	VAR	12/10/2002	31,046.	35,733.	-4,687
PBG EMERGING GROWTH - 831 SHARES	VAR	12/10/2002	7,348.	8,513.	-1,165
RS EMERGING GROWTH - 1,202 SHARES	VAR	12/10/2002	24,204.	27,501	-3,297.
THIRD AVENUE VALUE - 1,129 SHARES	VAR	12/10/2002	34,919.	40,398.	-5,479
VANGUARD INDEX - 619 SHARES	VAR	12/10/2002	51,873	67,648	-15,775
COMERICA BONDS	VAR	01/15/2003	308,847.	301,406.	7,441.
SANTA FE EQUITY	VAR	-01-15-2003-	781.		781.
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			587,958	633,889	-45,931
Totals			587,958.	633,889.	-45,931.

SOUTH OAKLAND SHELTER

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv	Life	ACRS class class	MA CRS class	Current-year expense	Current-year depreciation
OFFICE EQUIPMENT	06/26/2003	2,650	100.00%	-	-	2,650	-	265	SL	-	5,000	-	-	-	265
OFFICE EQUIPMENT	08/16/2002	(289)	(100.00%)	-	-	(289)	-	48	SL	-	3,000	-	-	-	48
Less Retired Assets															
Subtotals		152,277				152,277	53,121	63,007							9,886

Listed Property

Assets		Liabilities		Equity		Total	
Assets	Liabilities	Equity	Assets	Liabilities	Equity	Total	Total
Less Retired Assets							
Subtotals							
TOTALS	152,277					53,121	9,896
AMORTIZATION							

AMORTIZATION	
1995	100.00
1996	100.00
1997	100.00
1998	100.00
1999	100.00
2000	100.00
2001	100.00
2002	100.00
2003	100.00
2004	100.00
2005	100.00
2006	100.00
2007	100.00
2008	100.00
2009	100.00
2010	100.00
2011	100.00
2012	100.00
2013	100.00
2014	100.00
2015	100.00
2016	100.00
2017	100.00
2018	100.00
2019	100.00
2020	100.00
2021	100.00
2022	100.00
2023	100.00
2024	100.00
2025	100.00
2026	100.00
2027	100.00
2028	100.00
2029	100.00
2030	100.00
2031	100.00
2032	100.00
2033	100.00
2034	100.00
2035	100.00
2036	100.00
2037	100.00
2038	100.00
2039	100.00
2040	100.00
2041	100.00
2042	100.00
2043	100.00
2044	100.00
2045	100.00
2046	100.00
2047	100.00
2048	100.00
2049	100.00
2050	100.00
2051	100.00
2052	100.00
2053	100.00
2054	100.00
2055	100.00
2056	100.00
2057	100.00
2058	100.00
2059	100.00
2060	100.00
2061	100.00
2062	100.00
2063	100.00
2064	100.00
2065	100.00
2066	100.00
2067	100.00
2068	100.00
2069	100.00
2070	100.00
2071	100.00
2072	100.00
2073	100.00
2074	100.00
2075	100.00
2076	100.00
2077	100.00
2078	100.00
2079	100.00
2080	100.00
2081	100.00
2082	100.00
2083	100.00
2084	100.00
2085	100.00
2086	100.00
2087	100.00
2088	100.00
2089	100.00
2090	100.00
2091	100.00
2092	100.00
2093	100.00
2094	100.00
2095	100.00
2096	100.00
2097	100.00
2098	100.00
2099	100.00
2100	100.00
2101	100.00
2102	100.00
2103	100.00
2104	100.00
2105	100.00
2106	100.00
2107	100.00
2108	100.00
2109	100.00
2110	100.00
2111	100.00
2112	100.00
2113	100.00
2114	100.00
2115	100.00
2116	100.00
2117	100.00
2118	100.00
2119	100.00
2120	100.00
2121	100.00
2122	100.00
2123	100.00
2124	100.00
2125	100.00
2126	100.00
2127	100.00
2128	100.00
2129	100.00
2130	100.00
2131	100.00
2132	100.00
2133	100.00
2134	100.00

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending accumulated amortization	Code	Life	Current year amortization
TOTALS							

***Assets Retired**

JSA

2X9024 2 000

South Oakland Shelter 2002-2003 Board of Directors

PRESIDENT Jane Jacobsen
TREASURER Linda Spannaus

VICE PRESIDENT David Currin
SECRETARY Carol Maisels

ALL MEMBERS

Site Member
BLANCHARD, Maggie

Site Member
CARR, Bruce

Agency Member
CURRIN, David

At Large Member
DODD, George

Agency Member
DRAKE, Paul

At Large Member
GARRY, Kim

Site Member
HUNDIAK, Elizabeth

At Large Member
JACOBSEN, Jane

Agency Member
LECHNER, John

Site Member
Levine, Mary Jo

At Large Member
MAISELS, Carol

At Large Member
MASIAK, Susan

Site Member
MCINTYRE, ALICE

Agency Member
PERMALOFF, David

At Large Member
RAFTERY, Ann

Site Member
ROSS, Robin

At large Member
SPANNAUS, Linda

At Large Member
VILLA, John

At Large Member
WEBB, Judy

Executive Director
DUNCAN, Monica L.

SITES

2003 – St. Mary's of the Hills

ELIZABETH HUNDIAK

2439 Westwood Dr
Rochester Hills, MI 48306

2003 – Covenant Baptist Church

BRUCE CARR

23436 N Stockton
Farmington Hills, MI 48336

2004 – First United Methodist of Royal Oak

ROBIN ROSS

23070 Marlow
Oak Park, MI 48237

2005 – St. John Episcopal of Royal Oak

MAGGIE BLANCHARD

10725 Talbot
Huntington Woods, MI 48070

2005 – St. Hugo

ALICE MCINTYRE

2625 Plum Brook Dr
Bloomfield Hills, MI 48304

2005 – Temple Kol Ami

SALLY JO LEVINE

6215 Rose
West Bloomfield, MI 48322

2002-2003 Board of Directors

AGENCIES

2003- *Salvation Army*

Paul Drake
3015 N Main
Royal Oak, MI 48073

2003 - *Common Ground Sanctuary*

David Permaloff
1228 S Washington
Royal Oak, MI 48067

2004 - *Catholic Social Services*

David Currin
33856 Fonville
Livonia, MI 48152

2005 - *Visiting Nurses Association*

Jon Lechner
28450 Universal Dr
Warren, MI 48092

MEMBERS AT LARGE

2005 - *At Large Member*

George Dodd
63 Grosse Pines Drive
Rochester Hills, MI 48309

2005 - *At Large Member*

Linda Spannaus
3238 Ellwood
Berkley, MI 48072

2003 - *At Large Member*

Ann Raftery
34652 Beechwood
Farmington Hills, MI 48335

2003 - *At Large Member*

Kim Garry
36092 Congress
Farmington Hills, MI 48336

2003 - *At Large Member*

Jane Jacobsen
81 Illinois
Pontiac, MI 48341

2003 - *At Large Member*

John Villa
32550 Plumwood
Beverly Hills, MI 48025

2004 - *At Large Member*

Carol Maisels
1933 Lone Pine Rd.
Bloomfield Hills, MI 48302

2004 - *At Large Member*

Susan Masiak
677 Augusta Drive
Rochester Hills, MI 48309

2004 - *At Large Member*

Judy Webb
1521 Ledbury
Bloomfield Hills, MI 48304