A For the 2003 calendar year, or tax year beginning

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 50 1(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.

and ending

Open to Public Inspection

OMB No 1545-0047

	B Che	eck if	C Name of organization			D Emplo	yer ic	dentification number
		olicable	Use IRS PRESBYTERIAN HOMES & FAMILY		į			
		Address change	label or SERVICES, INC.			54	<u>-0:</u>	346118
		Name change	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite			number
		Initial	See Specific 150 LINDEN AVENUE			(4	34)384-3138
		return Final return	Instruc- City or town state or country and 7IP + 4			F Accoun	ting met	hod Cash X Accrual
		Amended				C Ot	her becify)	<u> </u>
		return Applicati pending	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts 	H and	l are not appli	cable to	o sec	tion 527 organizations.
		pending	must attach a completed Schedule A (Form 990 or 990-EZ).		s this a group re			
	c w	ahaita:	►WWW.PHFS.ORG		f "Yes," enter nui			
	U 07	cosite.	on type (check only one) ► X 501(c) (3) < (insert no) 4947(a)(1) or 527	H(c)	Are all affiliates in	ncluded'		N/A 🔲 Yes 🔲 No
	J ()	yanızat	of the organization's gross receipts are normally not more than \$25,000. The	11/45	If "No," attach a l s this a separate	list.) Traturn i	filad h	v an or-
	K UII	ieck lier	on need not file a return with the IRS; but if the organization received a Form 990 Package	H(a) (s tilis a separate janization covere	ed by a	group	ruling? Yes X No
	Org	gamzau the mai	, it should file a return without financial data. Some states require a complete return.		Group Exemption			
	- 111	the mai	, it difficults into a rotary material material control of the con					tion is not required to attach
			eipts: Add lines 6b, 8b, 9b, and 10b to line 12 9, 382, 733.		Sch. B (Form 99			
		OSS rec	Revenue, Expenses, and Changes in Net Assets or Fund Bala					
	Pa		Contributions, gifts, grants, and similar amounts received:					
		1	1 4-		2,054,7	60.	1	
			Direct public support				-	
	ł	_	indirect public support				ł	
		_	dovernment contributions (grants)		 	1	1d	2,054,760.
	- 1		Total (add lines 1a through 1c) (cash \$ 2,054,760. noncash \$ Program service revenue including government fees and contracts (from Part VII, line 93)	77.7	100		2	5,800,658.
	1	2		-	ZEIVEL		3	<u> </u>
	ļ	3	Membership dues and assessments		-	7,47	4	
		4	Interest on savings and temporary cash investments	MAY	1 9 2004	S	5	999,169.
*	Í	5	Dividends and interest from securities	1	1 9 2004	list		
8		6 a	Gross rents	CP		営		
, C)	1	b	Less: rental expenses	TI TI	W, UT		6c	
JUN 1 2 2004	- 1		Net rental income or (loss) (subtract line 6b from line 6a) Other investment income (describe SEE	CULD	TEMENT	7	7	27,403.
>	힐	7	Other investment income (desories	DIE	(B) Other	- /-		
5	Revenue	8 a	Gross amount from sales of assets other (A) Securities than inventory 304,989. 8a	-	9,8	25.		
	<u>§</u>			 	2,1			
. 0	-	b	Less, cost of other basis and sales experience	 	$\frac{2,1}{7,6}$			
DANNED	,	C	dull of (1000) (ditacil concust)	<u> </u>	STMT		8d	312,621.
₹		d			7	Ĭ		022/0220
\$		9	Special events and activities (attach schedule). If any amount is from gaming, check here					
Ò	- }	a	Gross revenue (not including \$ of contributions reported on line 1a) 9a	1				
め			Tapa. Tapa. Tapa.	+				
	ı	b	Less: direct expenses other than fundraising expenses	1			9c	
		C	Net income or (loss) from special events (subtract line 9b from line 9a)	1		ŀ	_ 30	
		10 a	Gross sales of inventory, less returns and allowances	{				
		Ь	Less: cost of goods sold	100)			10c	
		C	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line	iua)		}	11	185,929.
		11	Other revenue (from Part VII, line 103)			t	12	9,380,540.
		12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)					8,839,345.
	G	13	Program services (from line 44, column (B))			ł	13	1,001,990.
	Expenses	14	Management and general (from line 44, column (C))			}	14	284,602.
	per	15	Fundraising (from line 44, column (D))			f	15	204,002.
	ΔĬ	16	Payments to affiliates (attach schedule)			ł	<u>16</u>	10,125,937.
		17	Total expenses (add lines 16 and 44, column (A))				17_	<745,397.>
		18	Excess or (deficit) for the year (subtract line 17 from line 12)			}	18	54,134,026.
	ets sets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	~		,	19	
	Net Assets	20	Other onlying to the territory of the te	STA	TEMENT	4	20	7,468,577.
		21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21	
	3230 12-1	01 7-03	LHA For Paperwork Reduction Act Notice, see the separate instructions.					Form 990 (2003)

PRESBYTERIAN HOMES & FAMILY

54-0346118 SERVICES, INC. Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) Page 2 Part II · and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (C) Management (B) Program Do not include amounts reported on line (D) Fundraising (A) Total and general services 6b, 8b, 9b, 10b, or 16 of Part I 22 Grants and allocations (attach schedule) 22 cash \$ noncash \$ 23 23 Specific assistance to individuals (attach schedule) 24 Benefits paid to or for members (attach schedule) 148,045 80,070. 228,115 0. Compensation of officers, directors, etc. 25 5,617,249 5,152,514 371,222. 93,513. 26 26 Other salaries and wages 48,202. 18,324. 27 358,00**4**. <u> 291,478</u>. 27 Pension plan contributions 12,602. 729,810 58,988. 801,400 Other employee benefits 28 38,880 13,030. 390,913 29 442,823. Payroll taxes Professional fundraising fees 30 31 Accounting fees 32 32 Legal fees 31,077. 6,936. 136,358 98,345 33 33 Supplies 11,135 2,632. 85,584 71,817 34 34 Telephone 6,958 9,423. 36,171 19,790 35 Postage and shipping 35 232,920. 232,920. 36 Occupancy 157,512 157,512 37 Equipment rental and maintenance 9,867 38 9,867 Printing and publications 3,352. <u>16,68</u>8. 6,139 39 26,179 39 Travel 40 Conferences, conventions, and meetings 40 41 Interest 613,099. 61.440. 674,539. 42 Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): 43a 43b 43c 43d 44,720. 319,216. 054,592 219,904 SEE STATEMENT 5 43e 284,602. Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15 10,125,937. 8,839,345. 001,990. 44 Joint Costs. Check > _____ if you are following SOP 98-2. Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ; (ii) the amount allocated to Program services \$ If "Yes," enter (i) the aggregate amount of these joint costs \$ ____ ; and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$ Part III | Statement of Program Service Accomplishments What is the organization's primary exempt purpose? ► <u>SEE STATEMENT</u> Program Service Expenses All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others) 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 a LYNCHBURG CHILDREN'S HOME - PHFS PROVIDES HIGH QUALITY HOME EXCEPTIONAL EDUCATION, NUTRITIOUS FOOD, AND ENVIRONMENT, PERSONAL ATTENTIONS. 2,402,094. (Grants and allocations \$ b ZUNI ADULT HOMES & COMMUNITY GROUP HOMES - PHFS PROVIDES HOMES, PERSONAL & VOCATIONAL TRAINING, AND SHELTERED WORKSHOP EMPLOYMENT FOR MENTALLY CHALLENGED ADULTS. 1,374,361. (Grants and allocations \$ c DANVILLE CHILDREN & YOUTH RESIDENTIAL TREATMENT PROGRAM PHFS PROVIDES GROUP HOMES, EDUCATION, TREATMENT SERVICES, AND SUPERVISED CARE. 3,592,036. (Grants and allocations \$ d GENESIS HOUSE - PHFS PROVIDES EMERGENCY SHELTER FOR CHILDREN THAT REQUIRE TRANSITIONAL HOME CARE AND PERSONAL ATTENTIONS ON SHORT NOTICE. 265,005. (Grants and allocations \$ STATEMENT 7 (Grants and allocations \$ 1,205,849. • Other program services (attach schedule) 8,839,345. Total of Program Service Expenses (should equal line 44, column (B), Program services

Part IV Balance Sheets

46 Savings and temporary cash investments 47 a Accounts receivable b Less: allowance for doubtful accounts 47 b	Partiv	J balance Sheets				
46 Savings and temporary cash investments 47 a Accounts receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 b 1,089,938. 48 a Pledges receivable b Less: allowance for doubtful accounts 48 b 1,089,938. 49 Grants receivable 50 Receivables from officers, directors, trustees, and key employees 51 a Other notes and loans receivable b Less: allowance for doubtful accounts 15 inventiories for sale or use 52 Propard expenses and deferred charges 15 investments of sale or use 53 Propard expenses and deferred charges 15 investments - land, buildings, and equipment; basis b Less: accumulated depreciation 55 a Investments - cother 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 58 C STATEMENT 9 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 58 C STATEMENT 9 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 58 C STATEMENT 9 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 58 C STATEMENT 9 59 Total assets (describe ► SEE STATEMENT 10) 59 Total assets (describe ► SEE STATEMENT 10) 50 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 63 Leans from officers, directors, trustees, and key employees 64 Tax-exempt bond liabilities 64 Land buildings (describe ► ACCRUED EXPENSES) 65 Total liabilities (add lines 60 through 65) 66 Total liabilities (add lines 60 through 65) 67 and complete lines 67 through 68 and lines 73 and 74.	Note: Whe	ere required, attached schedules and amount uld be for end-of-year amounts only.	ts within the description column	(A) Beginning of year		(B) End of year
46 Savings and temporary cash investments 47 a Accounts receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 b Less: allowance for doubtful accounts 48 b Less: allowance for doubtful accounts 50 Receivable for officers, directors, trustees, and key employees 51 a Other notes and loans receivable b Less: allowance for doubtful accounts 51 inventiones for sale or use 52 Prepaid expenses and deferred charges 53 Inventiones for sale or use 54 Investments - scurtures STIMT 8 55 a Investments - land, buildings, and equipment: basis b Less: accumulated depreciation 56 Investments - cother 57 a Land, buildings, and equipment: basis b Less: accumulated depreciation 58 E STATEMENT 9 57 a Land, buildings, and equipment: basis b Less: accumulated depreciation 57 a Land, buildings, and equipment: basis b Less: accumulated depreciation 58 C STATEMENT 10 59 Total assets (describe ► SEE STATEMENT 10) 3 . 2.236,060. 56 1, 214, 2.2 57 b 6, 428,016. 7, 600, 667. 57c 7, 562, 7 58 Other assets (describe ► SEE STATEMENT 10) 59 Total assets (add lines 45 through 56) (must equal line 74) 60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loss from officers, directors, trustees, and key employees 63 Cother liabilities 64 a Tax 723,479. 65 Total liabilities 65 Other liabilities 66 Total liabilities 67 Accounts payable 68 Total liabilities (add lines 60 through 65) 69 Addines 73 and 74.		On the second section of		424 525		607 000
47 a Accounts receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 a Pledges receivable b Less: allowance for doubtful accounts 48 a 1,089,938. 49 Grants receivable 50 Receivables from officers, directors, trustees, and key employees 61 Other notes and loans receivable 51 a 24,506. 52 Inventiones for sale or use 53 Prepard expenses and deferred charges 64 Investments - securities STMT 8 55 a Investments - securities STMT 8 56 Investments - land, buildings, and equipment basis b Less: accommulated depreciation 56 Investments - other 57 a Land, buildings, and equipment basis b Less: accommulated depreciation 58 Other assets (describe ► SEE STATEMENT 9 57 a Land, buildings, and equipment basis b Less: accommulated depreciation 58 Other assets (describe ► SEE STATEMENT 10) 59 Total assets (add lines 45 through 59) (must equal line 74) 50 Accounts payable and accrued expenses 61 Grants payable 62 Other itabilities (describe ► ACCRUED EXPENSES 63 Other itabilities (add lines 60 through 65) 64 Total liabilities (add lines 60 through 65) 65 Organizations that follow SFAS 117, check here ► SEE STATEMENES 65 Total liabilities (add lines 60 through 65) 66 Total liabilities (add lines 60 through 65) 67 Organizations that follow SFAS 117, check here ► SEE STATEMENES 67 Total assets (all lines 60 through 65) 68 Organizations that follow SFAS 117, check here ► SEE STATEMENES 69 Add lines 73 and 74.	1 '	~		431,537.		687,090.
b Less: allowance for doubtful accounts	46	Savings and temporary cash investments		ļ	46	
b Less: allowance for doubtful accounts	47.0	Assaunte vannustile	122 722 470	,]		
48 a Pledges receivable b Less: allowance for doubtful accounts 75 Grants receivable 50 Receivables from officers, directors, trustees, and key employees 51 a Other notes and loans receivable b Less: allowance for doubtful accounts 51 b Cost	1				47.	722 470
b Less: allowance for doubtful accounts 48b	"	Less, allowance for doubtful accounts	4/0	140,104.	4/C	143,419.
b Less: allowance for doubtful accounts 48b	48 2	Plednes receivable	1 089 938	.		
49 Grants receivable 80 Receivables from officers, directors, trustees, and key employees 51 a Other notes and loans receivable b Less: allowance for doubtful accounts 52 Inventrores for sale or use 53 Prepaid expenses and deferred charges 54 Investments - securities STMT 8 b Less: accumulated depreciation 56 Investments - other 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 58 SEE STATEMENT 9 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 a Land, buildings, and equipment basis b Less: accumulated depreciation 57 b G, 428, 016. 7, 600, 667. 57c 7, 562, 7 58 Other assets (describe ► SEE STATEMENT 10) 3, 211, 277. 58 3, 600, 9 99 Total assets (add lines 45 through 58) (must equal line 74) 60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 64 a Gad and accrued expenses 65 Other liabilities (describe ► ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) Crantal liabilities (add lines 60 through 65)	1				480	1 089 938.
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Second Second	1					
51 a Other notes and loans receivable 51a 24,506. 26,568. 516 24,5 52 Investments or sale or use 52 10 550 52 52 53 Prepaid expenses and deferred charges 50,739. 58 35,2 54 Investments - securities STMT 8					50	
52 Inventories for sale or use 53 Prepaid expenses and deferred charges 54 Investments - securities STMT 8	<u>နှာ</u> 51 a	- • •	51a 24,506	5.		
52 Inventories for sale or use 53 Prepaid expenses and deferred charges 54 Investments - securities STMT 8 55 a Investments - securities STMT 8 55 a Investments - land, buildings, and equipment basis b Less: accumulated depreciation 56 Investments - other SEE STATEMENT 9 57 a Land, buildings, and equipment basis 58 b Less: accumulated depreciation 58 Other assets (describe ► SEE STATEMENT 9 59 Total assets (describe ► SEE STATEMENT 10) 3, 211, 277, 58 3, 600, 9 59 Total assets (add lines 45 through 58) (must equal line 74) 54, 348, 540, 59 61, 459, 9 60 Accounts payable 61 61 Grants payable 61 62 Deferred revenue 62 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ► ACCRUED EXPENSES) 50, 377, 65 20, 8 66 Total liabilities (add lines 60 through 65) Organizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74.	A SS	Less: allowance for doubtful accounts			51c	24,506.
Second Second	52	Inventories for sale or use			52	
55 a Investments - land, buildings, and equipment: basis 55a	53	Prepaid expenses and deferred charges			53	35,251.
b Less: accumulated depreciation 55b 55c 56 Investments - other 57 a Land, buildings, and equipment basis 57 b Less: accumulated depreciation 57 b Less: accumulated depreciation 57 b Less: accumulated depreciation 57 b C, 428,016. 7,600,667. 57 c 7,562,7 58 Other assets (describe ► SEE STATEMENT 10) 3,211,277. 58 3,600,9 59 Total assets (add lines 45 through 58) (must equal line 74) 50 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ► ACCRUED EXPENSES 66 Total liabilities (add lines 60 through 65) Crganizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74.	54	Investments - securities STMT 8	Cost X FM\	38,605,363.	54	46,521,741.
b Less: accumulated depreciation 56 Investments - other 56 Investments - other 57 a Land, buildings, and equipment basis 57 a Land, buildings, and equipment basis 57 b Less: accumulated depreciation 57 b C, 428, 016. 57 b C, 428, 016. 57 c 7, 562, 7 58 Other assets (describe ► SEE STATEMENT 10) 59 Total assets (add lines 45 through 58) (must equal line 74) 50 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ► ACCRUED EXPENSES 66 Total liabilities (add lines 60 through 65) Crganizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74.	55 a	Investments - land, buildings, and			· '	
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58 Other assets (describe ► SEE STATEMENT 10) 3,211,277. 58 3,600,9 59 Total assets (add lines 45 through 58) (must equal line 74) 54,348,540. 59 61,459,9 60 Accounts payable and accrued expenses 164,137. 60 581,9 61 Grants payable 62 Deferred revenue 62 63 Loans from officers, directors, trustees, and key employees 63 64 a Tax-exempt bond liabilities b Mortgages and other notes payable 64b 65 Other liabilities (describe ► ACCRUED EXPENSES) 50,377. 65 20,8 66 Total liabilities (add lines 60 through 65) 214,514. 66 602,7 Organizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74.	1					
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60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) Corganizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	58	Other assets (describe	SEE STATEMENT IU	J 3, 411, 411.	58	3,600,982.
60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) Corganizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	50	Total seests (add lines 45 through 58) /must eq	ual line 74)	54 348 540	E0	61 450 000
61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) Corganizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.			uai inie (+)			581,963.
62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) 67 Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	, -			101/13/		301,303.
63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Other liabilities (describe ACCRUED EXPENSES) 66 Total liabilities (add lines 60 through 65) 67 Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	1					
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65 Other liabilities (describe ACCRUED EXPENSES) 50,377.65 20,8 66 Total liabilities (add lines 60 through 65) 214,514.66 602,7 Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	≣ 64 €		•			
66 Total liabilities (add lines 60 through 65) Organizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74.		Mortgages and other notes payable			64b	
Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.	65	Other liabilities (describe > ACCRUED	EXPENSES	50,377.	65	20,811.
Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74.					1	
69 and lines 73 and 74.				214,514.	66	602,774.
67 Unrestricted 68 Temporarily restricted 69 Permanently restricted 69 Permanently restricted 60 Organizations that do not follow SFAS 117, check here and complete lines 45,421,329.67 52,035,6 2,683,533.68 1,409,3 6,029,164.69 7,412,1	Orga	•	And complete lines 67 through			
68 Temporarily restricted 69 Permanently restricted 69 Organizations that do not follow SFAS 117, check here and complete lines 45,421,329.67 52,035,6 2,683,533.68 1,409,3 6,029,164.69 7,412,1	8 C7			45 401 200	-	E2 02E 670
69 Permanently restricted 69 Permanently restricted Corganizations that do not follow SFAS 117, check here and complete lines	5 6/ E 60					
Organizations that do not follow SFAS 117, check here	32					
= organizations that an inclination of the fillent hate >	Druss		and complete lines	0,049,104.	69	1,414,113.
70 through 74.	T 0,85		and complete lines		}	
70 Capital stock, trust principal, or current funds	ර් ₇₀				70	
71 Paid-in or capital surplus, or land, building, and equipment fund 71	# 71		equipment fund			
72 Retained earnings, endowment, accumulated income, or other funds	8 72					
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72;	73		• • • • • • • • • • • • • • • • • • • •			
	-			54,134,026.	73	60,857,206.
	74_	The state of the s	•			61,459,980.

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.

PRESBYTERIAN	HOMEC	c	TO A MET T SZ
PKESSITEKIAN	HOMES	Δz	LAMILLY

	art IV-A Reconciliation of Reven			Par	IV-B Reconciliation of Expen				Audited
L	Financial Statements wi Return				Financial Statements w Return	ith	E	per	ises per
a	Total revenue, gains, and other support		16 040 117	а	Total expenses and losses per			10	105 005
		a	16,849,117.	Ь	audited financial statements Amounts included on line a but not on		a	TO	,125,937.
b	Amounts included on line a but not on line 12, Form 990:			(4)	line 17, Form 990:				
(1)	Net unrealized gains			(1)	Donated services and use of facilities \$				
` '	on investments \$ 7,468,577.			(2)	Prior year adjustments	_			
(2)	Donated services				reported on line 20,				
	and use of facilities \$		-		Form 990 \$	_			
(3)	Recoveries of prior		-	(3)	Losses reported on				
	year grants \$		-		line 20, Form 990 \$				
(4)	Other (specify):\$				Other (specify): \$				
	Add amounts on lines (1) through (4)	b	7,468,577.		Add amounts on lines (1) through (4)		b		0.
C	Line a minus line b	C	9,380,540.	C	Line a minus line b		c	10	<u>,125,937.</u>
ď	Amounts included on line 12, Form 990 but not on line a:			d	Amounts included on line 17, Form 990 but not on line a:				
(1)	Investment expenses		- -	(1)	Investment expenses				
	not included on				not included on				
	line 6b, Form 990 \$				ine 6b, Form 990 \$				
(2)	Other (specify):			(2)	Other (specify):	ļ			
	Add arrows as lines (4) and (6)			_	\$	<u>-</u>			
e	Add amounts on lines (1) and (2) Total revenue per line 12, Form 990	d	0.	e	Add amounts on lines (1) and (2)		d		0.
6	(line c plus line d)	م	9,380,540.	-	Total expenses per line 17, Form 990 (line c plus line d)			1 N	,125,937.
Pa		Tru	stees, and Key E	mplo	yees (List each one even if not compensate	d.)	<u> </u>	<u> </u>	145,5576
				(B) Tit			ribut	ions to enefit erred	(E) Expense account and
	(A) Name and address			pe	week devoted to (If not paid, enter place position -0)	ans &	def	erred tion	other allowances
- -									
Z=		- -				•	_		
SE.	E STATEMENT 11				228,115. 1	<u>8</u> ,	<u> </u>	76.	0.
						_	_		
				l					
							_		
				i					
		_					_		
_							—		
		- -							
							_		ļ
		- -							
—						—	—		
- -		- -							
	Old any officer, director, trustee, or key employee re						elate	ed	
	organizations, of which more than \$10,000 was pro	ovide	ed by the related organiza	tions?	"Yes," attach schedule. Yes X	No			

PRESBYTERIAN HOMES & FAMILY

	990 (2003) SERVICES, INC. 54-034	<u> </u>		Page 5
Pa	rt VI Other Information ' '	- ,	Yes	
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
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		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79	ļ —	X
	If "Yes," attach a statement			
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			İ
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
h	If "Yes," enter the name of the organization	1332		
•	and check whether it is exempt or nonexempt.			1
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0			
	Did the organization file Form 1120-POL for this year?	а 81Ь		х
b	Did the organization neceive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	010		
82 a	fair rental value?	82a	!	X
		024	 	├ ┻
D	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A			
00 -	•	┦,,,		-
83 a		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	_A_	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	 	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not		ľ	
	tax deductible?	84b	-	├
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	 	├-
b	Did the organization make only in-house lobbying expenditures of $$2,000$ or less? N/A	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	1		
	owed for the prior year.			
C	Dues, assessments, and similar amounts from members 85c N/A	4		
d	Section 162(e) lobbying and political expenditures 85d N/A	4		
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A	4		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	_	ŀ	
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? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	_]		}
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A	_		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
þ	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		-	1
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?	1	ļ	ļ
	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 ▶ 0 • ; section 4912 ▶ 0 • ; section 4955 ▶0			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
_	sections 4912, 4955, and 4958			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	310377			_
ь				237
91	The books are in care of ► ROBERT S. DENDY, JR., MPH Telephone no. ► (434)	384-	313	
٠.	Total Control of the second of			
	Located at ► 150 LINDEN AVENUE, LYNCHBURG, VA ZIP+4 ►	2450	3	
	All TTP			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶ſ	\neg
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/	Α̈́	
32304				(2003)
12-17	vo			/

Part VII Analysis of Income-F			age 33 of the instru siness income	_	ded by section 512, 513, or 514	<u> </u>
Note: Enter gross amounts unless otherw	ise (/		(B)	(C)	(D)	(E)
indicated.	Busi	ness	Amount	Exclu-	Amount	Related or exempt
3 Program service revenue:	<u></u>	de		code		function income
a PRODUCT INCOME				 		122,050
b				+		
<u> </u>				┼		
d				 		
6 Addison (Madroid Committee				 		007 021
f Medicare/Medicaid payments				1		907,231
Fees and contracts from government ager	icies			-		4,771,377
Membership dues and assessments	t			+		
Interest on savings and temporary cash in	ivestinents			14	999,169.	
Dividends and interest from securities				14	333,103.	
Net rental income or (loss) from real estat	е;					
debt-financed property		+		1		
not debt-financed property	Droporty			 		
Net rental income or (loss) from personal Other investment income	bi oberty			14	27,403.	
Other investment income Gain or (loss) from sales of assets	<u> </u>			1 42	41,403.	
other than inventory	1			18	312,621.	
Net income or (loss) from special events				1 20	<u> </u>	
Gross profit or (loss) from sales of inventor				1		
Other revenue:			· — — — — —	1-1		
MISCELLANEOUS	İ	İ				185,929
)				+-	<u> </u>	103,323
_	ı			1-1		
d						
·						
Subtotal (add columns (B), (D), and (E))			0.		1,339,193.	5,986,587
Total (add line 104, columns (B), (D), and	(E))			<u> </u>	<u> </u>	7,325,780
e: Line 105 plus line 1d, Part I, should e		line 12. Part	· <i>L</i> .		Γ.	773237700
art VIII Relationship of Activ	ities to the Acco	mplishm	ent of Exemp	t Pur	poses (See page 34 of the	instructions.)
ne No. Explain how each activity for which						
 exempt purposes (other than by p 						or and or garning and or
A INCOME FROM RESI	DENT VOCAT	IONAL	PROGRAMS			
G TUITION INCOME -				TS.	OF SOCIAL SE	RVICES
3A MISCELLANEOUS IN						
F INCOME FROM MEDI	CAID FOR T	EACHIN	G LIFE SK	ILL	S	
art IX Information Regardin	g Taxable Subs	idiaries a	nd Disregard	ed Er	itities (See page 34 of the i	nstructions.)
(A) Name, address, and EIN of corporation,	(B) Percentage of	Matu	(C) re of activities		(D) Total income	(E) End-of-year
	wnership interest	Matu				assets
	%					
N/A	%					
	%					
	%					
art X Information Regardin	g Transfers Ass	ociated v	with Personal	Bene	fit Contracts (See page	e 34 of the instructions.)
) Did the organization, during the year, rec						Yes X N
) Did the organization, during the year, pay						Yes X N
ote: If "Yes" to (b), file Form 8870 and	· -	uctions).				
		com	panying schedules and	statemer	nts, and to the best of my knowleds knowledge TDENT	ge and belief, it is true,
			7-04 F	RES	IDENT	
		ate			rint name and title.	
			Da		Check If	Preparer's SSN or PTIN

SCHEDULE A (Form 990 or 990-EZ)

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

2003

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

PRESBYTERIAN HOMES & FAMILY

Employer identification number

SERVICES, INC. 54 0346118 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.") (b) Title and average hours per week devoted to (d) Contributions to employee benefit plans & deferred compensation (a) Name and address of each employee paid (e) Expense account and other (c) Compensation more than \$50,000 position allowances JAMES E. HENRY (RETIRED) DIR. OF SERV. CONNEAUT LAKE, PA 16316 40 72,216. 6.499 MICHAEL A. RAMSEY DIR OF SERV. MADISON HEIGHTS, VA 24572 40 70,380 6,334 ROBERT B. BISHOP DIR OF P.R. POWHATAN, VA 23139 40 68,340 6.834 DAVID R. WRIGHT CONTROLLER FOREST, VA 24551 40 66,912 6,022 DIANE KITTS DIR. OF H.R. LYNCHBURG, VA 24503 40 56,510 5,086 Total number of other employees paid over \$50,000 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

PRESBYTERIAN HOMES & FAMILY

Scl	nedul	e A (F	orm 990 or 990-EZ) 2003 SERVICES , INC . 54	-03461	18	Page 2
P	art	III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	pub lobb	lic op bying	e year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$ (Must equal amounts on line 38, Part V of Part VI-B.)	/I-A, 1		x
			tions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking			
_			st complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	trus pers	itees, son is	e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"			
			detailed statement explaining the transactions.) hange, or leasing of property?	20	X	
•	Jaic	, GAUI	nange, or reasing or property:	2a	<u> </u>	
b	Len	ding (of money or other extension of credit?	2b	<u> </u>	Х
c	Furn	nishın	g of goods, services, or facilities?	20		х
d	Payı	ment	of compensation (or payment or reimbursement of expenses if more than \$1,000)?	_2d	<u> </u>	
е	Tran	nsfer (of any part of its income or assets?	2e		x
			ake grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
	you	deter	mine that recipients qualify to receive payments.)	<u>3a</u>	X	ļ
_	-		ave a section 403(b) annuity plan for your employees?	3b	 	X
4			naintain any separate account for participating donors where donors have the right to provide advice e or distribution of funds?	. 4		x
P	art (Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)	.,		
The	orga	nizati	on is not a private foundation because it is: (Please check only ONE applicable box.)			
5	Ļ	_	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(ı).			
6	Ļ	=	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Ļ	┥.	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8	Ļ	뤽	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	L		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name,	city,		
10	Γ	\neg	and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)			
	_		(Also complete the Support Schedule in Part IV-A.))(A)(IV)-		
11	a [X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
			Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11	b [A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12			An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross	3		
			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 acqu	ured		
			by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	Ī		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (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)		:	
			Provide the following information about the supported organizations. (See page 5 of the instructions.)			
			(a) Name(s) of supported organization(s)		ne num rom abo	
_						
						
		_	An organization organized and operated to toot for public patch. Castian E00(a)(4) (Castian E00(a)(4))			
1	• _		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

54-0346118 F

Pa	Note: You may use the	complete only it you cn he worksheet in the insi	tructions for converting	o, 11, or 12.) Use cas n g from the accrual to ti	nethod of acc he cash method	of acc	ng. Counting.
	ndar year (or fiscal year	(a) 2002	(b) 2001	(c) 2000	(d) 1999		(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,358,356.	1,552,785.	1,735,814.	994,9	92.	7,641,947
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	6,321,331.	5 280 501	5 078 071	2 772 6	50	19,452,652
40		0,341,331.	3,400,331.	3,0/8,0/1.	4,114,0	<u> </u>	19,434,634
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		1,049,034.	2,120,654.	1,331,7	27.	5,524,154
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						
23	Total of lines 15 through 22	10,702,426.	7,882,410.	8,934,539.	5,099,3	78.	32,618,753.
24	Line 23 minus line 17	4,381,095.	2,601,819.	3,856,468.	2,326,7	19.	
25	Enter 1% of line 23	107,024.	78,824.	89,345.	50,9	94.	
26	Organizations described on lines 10	or 11: a Enter 2% of a	amount in column (e), lin	e 24	>	26a	263,322.
b	Prepare a list for your records to sho		•	,			
	unit or publicly supported organization	on) whose total gifts for 1	999 through 2002 exceed	ded the amount shown in	line 26a.		
	Do not file this list with your return.	Enter the total of all thes	e excess amounts		>	26b	1,754,410.
	Total support for section 509(a)(1) to		• •		>	26c	13,166,101.
đ	Add: Amounts from column (e) for h		24,154. 19	4 == 4 44			
		22	26b	1,754,41	<u>0.</u> ▶	26d	7,278,564.
e	Public support (line 26c minus line 2	<u>-</u>			•	26e	5,887,537.
<u>f</u>	Public support percentage (line 26e					261	44.71749
27	Organizations described on line 12:						•
	records to show the name of, and to		ich year irom, each disqu	Jaillieu person. Do not 1 1	ie tnis iist with yo	ur retu	rn. Enter the sum of
	·	N/A	(0)	2001	(100	O)	
	(2002) For any amount included in line 17 th	(2001)	•	000)	(199 re a list for your r	•	to show the name of
b	and amount received for each year, t						
	described in lines 5 through 11, as w			-	-		-
	the larger amount described in (1) or (2002)	· ·	se differences (the exces				amount received and
•	Add: Amounts from column (e) for li	, ,	•	•		3)	
C				16 21		27c	N/A
d	Add: Line 27a total		d line 27b total	4 1		27d	N/A
e	Public support (line 27c total minus		a 27 b total	-	<u> </u>	27e	N/A
f	Total support for section 509(a)(2) to	•	23. column (e)	▶ 27f	N/A		
	Public support percentage (line				>	27g	N/A %
h			-		1	27h	N/A %
28 l	Jnusual Grants: For an organization						

Schedule A (Form 990 or 990-EZ) 2003 SERVICES, INC.

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

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule A (Form 990 or 990-EZ) 2003

35

P		-	lecting Public Char		age 9 of	the instructions.)		N/A	
Ch		ation belongs to an affiliate			you che	cked "a" and "limited c	ontrol"	provisions apply.	
	Li	mits on Lobbying m "expenditures" means an	Expenditures			(a) Affiliated group totals		(b) To be completed for electing organization	
	(1.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0		<u> </u>		T	N/A			
36	Total lobbying expenditures t	o influence public opinion ('grassroots lobbying)		36	-1/ -1			
37					37				
38			, , , , , , , , , , , , , , , , , , , ,		38				
39		· · · · · · · · · · · · · · · · · · ·			39				
40			9)		40				
41	Lobbying nontaxable amount	. Enter the amount from the	e following table -						
	If the amount on line 40 is -	The lobby	ing nontaxable amount is -		1 1				
	Not over \$500,000	20% of the a	mount on line 40	٦					
	Over \$500,000 but not over \$1,000	,000 \$100,000 plu	is 15% of the excess over \$500,0	000					
	Over \$1,000,000 but not over \$1,50	00,000 \$175,000 plu	is 10% of the excess over \$1,000	,000	41				
	Over \$1,500,000 but not over \$17,0	000,000 \$225,000 plu	us 5% of the excess over \$1,500,0	000	1 1				
	Over \$17,000,000	\$1,000,000		J					
42	Grassroots nontaxable amour	•			42				
43	Subtract line 42 from 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 amo	unt an aither line 42 au l	line 44 yeur myet file Form	- 4700	1.			-	*_
_		below. See the in	structions for lines 45 throu Lobbying Exp			e instructions.) ar Averaging Period	·	N/A	
	endar year (or eal year beginning in)	(a) 2003	(b) 2002	(c) 200		(d) 2000		(e) Total	-
45	Lobbying nontaxable								
_	amount					<u>.</u>			0.
46	Lobbying ceiling amount								
	(150% of line 45(e))	-							<u>0.</u>
47	Total lobbying	:							_
_	expenditures							 	0.
48	Grassroots nontaxable								^
40	amount Grassroots ceiling amount								0.
43	(150% of line 48(e))			< >		-			0.
50	Grassroots lobbying							1	
••	expenditures								0.
P	art VI-B Lobbying A	Activity by Nonelec	cting Public Chariti	es					
	(For reporting o	nly by organizations that di	d not complete Part VI-A) (S	See page 12 of t	he instru	uctions.)			
Du	ring the year, did the organization	on attempt to influence nati	onal, state or local legislation	n, including any	attemp	t to Yes	No	Amount	
ınfl	uence public opinion on a legis	lative matter or referendum	n, through the use of:			Tes		Amount	
a	Volunteers						<u> </u>		
þ	Paid staff or management (In	clude compensation in exp	enses reported on lines c thr	ough h .)			X		
C	Media advertisements						X		
đ	Mailings to members, legislate	•				 	X		
e	Publications, or published or Grants to other organizations						X		

g Direct contact with legislators, their staffs, government officials, or a legislative body h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

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

i Total lobbying expenditures (Add lines c through h.)

X

Schedule A (Form 990 or 990-EZ) 2003

	Exempt Organiz	zations (See page 12 of the instr	ructions.)				
51		lirectly or indirectly engage in any of		r organization described in section			
	501(c) of the Code (other than s	section 501(c)(3) organizations) or ii	n section 527, relating to po	olitical organizations?			
а	Transfers from the reporting org	ganization to a noncharitable exempt	t organization of:			Yes	No
	(i) Cash				51a(i)		X
	(ii) Other assets				a(ii)		X
b	Other transactions:						
	(i) Sales or exchanges of asse	its with a noncharitable exempt orga	nization		b(i)		_X_
	(ii) Purchases of assets from a	noncharitable exempt organization			b(ii)		X
	(iii) Rental of facilities, equipme	ent, or other assets			b(iii)		X
	(iv) Reimbursement arrangeme	ents			b(iv)		X
	(v) Loans or loan guarantees				b(v)		X
	(vi) Performance of services or	membership or fundraising solicitat	tions		b(vi)		X
C	Sharing of facilities, equipment,	mailing lists, other assets, or paid ei	mployees		C		X
d	If the answer to any of the above	e is "Yes," complete the following sch	hedule. Column (b) should a	always show the fair market value of the			
		given by the reporting organization.					
	transaction or sharing arrangem	ent, show in column (d) the value of	f the goods, other assets, o	r services received:		N/A	
(a Line	no. Amount involved	(c) Name of noncharitable ex	empt organization	(d) Description of transfers, transactions, and sl	narıng arı	angem	ients
							
							
		, 					
		, 		 			
		<u> </u>					
							
		<u>L</u>		<u> </u>			
	Is the organization directly or inc Code (other than section 501(c) If "Yes," complete the following s	(3)) or in section 527?	T	anizations described in section 501(c) of the	Yes	X	No
	(a) Name of org	j ganization	(b) Type of organization	(c) Description of relationship	p		
		 	 				
			 				
						<u> </u>	
			 	 			
			 				

FORM 990	(OTHER INVESTMEN	IT INCOME	S	TATEMENT	1
DESCRIPTION					AMOUNT	
INCOME FROM INVE	STMENT IN VI	RGINIA ALLIANCE	3		27,40	03.
TOTAL TO FORM 99	0, PART I, L	INE 7			27,40	03.
FORM 990	GAIN (LOSS)	FROM PUBLICLY I	RADED SECURIT	'IES S	TATEMENT	2
DESCRIPTION		GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIL	
SECURITIES		304,989.	0.	0.	304,98	39.
TO FORM 990, PAR	m t time o	304,989.	0.	0.	304,98	

54-0346118

	AIN (LOSS) FROM	SALE OF OTH	ER ASSETS		STATEMENT	•
DESCRIPTION		DATE ACQUIR			ETHOD QUIRED	
						
VEHICLES		VARIOU	S VARIO	ous pu	RCHASED	
NAME OF BUYER	GROSS SALES PRICE O	COST OR THER BASIS	EXPENSE OF SALE	DEPREC	NET GA	
VARIOUS	9,825.	93,558.	0.	91,36	5. 7,6	532
TO FM 990, PART I, LN	9,825.	93,558.	0.	91,36	5. 7,6	532
FORM 990 OTHER	CHANGES IN NET	ASSETS OR	FUND BALAN	ICES	STATEMENT	
DESCRIPTION					AMOUNT	
UNREALIZED GAINS (LOS	SES) ON INVESTM	ENTS			7,468,5	577
TOTAL TO FORM 990, PA	ART I, LINE 20				7,468,5	577.
TOTAL TO FORM 990, PA	ART I, LINE 20				7,468,5	577
		ER EXPENSES		-	7,468,5	577
TOTAL TO FORM 990, PA		(B)	(0	!)		
FORM 990	ОТН		(C MANAG	!)	STATEMENT	Ē
FORM 990 DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICE	MANAG S AND G	:) EMENT	STATEMENT	Ē
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES	OTH (A) TOTAL 195,463.	(B) PROGRAM SERVICE	MANAG S AND G	EMENT ENERAL	STATEMENT	Ē
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES	OTH (A) TOTAL 195,463. 18,868.	(B) PROGRAM SERVICE	MANAG S AND G	EMENT ENERAL	STATEMENT	Ē
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE	OTH (A) TOTAL 195,463.	(B) PROGRAM SERVICE	MANAG S AND G	EMENT ENERAL	STATEMENT	Į
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND	OTH (A) TOTAL 195,463. 18,868. 165,747.	(B) PROGRAM SERVICE 195,4 143,1	MANAG S AND G	EMENT ENERAL	STATEMENT	Į
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428.	(B) PROGRAM SERVICE 195,4 143,1 146,4	MANAG AND G	EMENT ENERAL 18,868. 22,551.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2	(C MANAG S AND G 63. 96.	EMENT ENERAL	STATEMENT	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4	63. 96. 28. 98.	EMENT ENERAL 18,868. 22,551.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL EDUCATION EXPENSES	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1	(C MANAG S AND G 63. 96. 28. 98. 46. 78.	18,868. 22,551.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL EDUCATION EXPENSES MEDICAL ATTENTION DUES	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194. 4,079.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1 1,8	63. 96. 28. 98. 46. 78.	18,868. 22,551.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL EDUCATION EXPENSES MEDICAL ATTENTION DUES PROFESSIONAL FEES	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194. 4,079. 22,750.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1 1,8	63. 96. 28. 98. 46. 78.	EMENT ENERAL 18,868. 22,551. 3,276.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL EDUCATION EXPENSES MEDICAL ATTENTION DUES PROFESSIONAL FEES BULLETIN	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194. 4,079.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1 1,8	63. 96. 28. 98. 46. 78.	18,868. 22,551.	STATEMENT (D) FUNDRAISI	ING
FORM 990 DESCRIPTION PROGRAM FOOD EXPENSES INVESTMENT FEES INSURANCE ELECTRICITY AND WATER AUTO EXPENSES FUEL EDUCATION EXPENSES MEDICAL ATTENTION DUES PROFESSIONAL FEES BULLETIN STUDENT/RESIDENT	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194. 4,079. 22,750. 32,084.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1 1,8	63. 96. 28. 98. 46. 78.	EMENT ENERAL 18,868. 22,551. 3,276.	STATEMENT (D) FUNDRAISI	ING
	OTH (A) TOTAL 195,463. 18,868. 165,747. 146,428. 74,473. 110,446. 17,378. 23,194. 4,079. 22,750.	(B) PROGRAM SERVICE 195,4 143,1 146,4 68,2 110,4 17,3 23,1 1,8	(C MANAG S AND G 63. 96. 28. 98. 46. 78. 94. 05.	EMENT ENERAL 18,868. 22,551. 3,276.	STATEMENT (D) FUNDRAISI	ING

PRESBYTERIAN HOMES &	FAMILY SERVICES	, IN		54-0346118
COMPUTER EXPENSES PROFESSIONAL	15,118.	8,646.	6,472.	
RESOURCES PROMOTION PEANUT PROGRAM HORTICULTURE PROGRAM RECREATION	141,000. 49,555. 46,433. 4,293. 14,191.	123,759. 12,441. 46,433. 4,293. 14,191.	16,209.	1,032. 37,114.
TOTAL TO FM 990, LN 43	1,319,216.	1,054,592.	219,904.	44,720.
FORM 990 STATEMENT O	F ORGANIZATION'S	S PRIMARY EXEMI	PT PURPOSE S	TATEMENT 6

EXPLANATION

PROVIDING CARE SERVICES TO CHILDREN AND ADULTS MARGINALIZED BY DYSFUNCTIONAL FAMILIES AND MENTAL HEALTH ISSUES.

FORM 990 OTHER PROGRAM SER	OTHER PROGRAM SERVICES		
DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES	
FREDERICKSBURG HOME - PHFS PROVIDES HIGH			
QUALITY HOME ENVIRONMENT, NUTRITIOUS FOOD, AND PERSONAL ATTENTIONS FOR MENTALLY CHALLENGED ADULTS. WAYNESBORO HOME - PHFS PROVIDES HIGH QUALITY HOME ENVIRONMENT,		291,291.	
NUTRITIOUS FOOD, AND PERSONAL ATTENTIONS FOR MENTALLY CHALLENGED ADULTS. LYNCHBURG HOME - PHFS PROVIDES HIGH QUALITY HOME ENVIRONMENT,		241,427.	
NUTRITIOUS FOOD, AND PERSONAL ATTENTIONS FOR MENTALLY CHALLENGED ADULTS. ZUNI WORKSHOP - PHFS PROVIDES VOCATIONAL		311,039.	
TRAINING OF MENTALLY CHALLENGED ADULTS ON THE ZUNI CAMPUS. SOUTH HILL HOME - PHFS PROVIDES HIGH QUALITY HOME ENVIRONMENT,		150,316.	
NUTRITIOUS FOOD, AND PERSONAL ATTENTIONS FOR MENTALLY CHALLENGED ADULTS.		211,776.	
TOTAL TO FORM 990, PART III, LINE E		1,205,849.	

ORM 990 NON-GOVERNMENT SECURITIES			S	STATEMENT (
SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV SECURITI	
CORPORATE STOCKS BONDS	31,981,867.	14,539,874.			31,981,8 14,539,8	
TO 990, LN 54 COL B	31,981,867.	14,539,874.			46,521,7	41.
FORM 990 DESCRIPTION	OTI	HER INVESTMEN	VALUAT:	ION	TATEMENT	9
DESCRIPTION	IVESTMENTS		METHO	VALUE	1,180,69	
TOTAL TO FORM 990, PA	ART IV, LINE	56, COLUMN I	MARKET 3	VALUE	1,214,29	
FORM 990		OTHER ASSETS	3	S	TATEMENT	10
DESCRIPTION					AMOUNT	
BENEFICIAL INTEREST I	N PERPETUAL	TRUSTS			3,600,98	32.
TOTAL TO FORM 990, PA	RT IV, LINE	58, COLUMN E	3		3,600,98	 32.

	F OFFICERS, DIRECTORY ND KEY EMPLOYEES	STATEMENT 11		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
REV. E. PETER GEITNER(RET. JUNE 2003) 20 FRONT CIRCLE OCEAN GROVE, NJ 07756	PRESIDENT	100,045.	6,850.	0.
	PRESIDENT 40	48,000.	4,320.	0.
THOMAS WRENN, SR. (RET. DEC 2003) 108 HASTINGS COURT LYNCHBURG, VA 24503	VICE PRESIDENT	80,070.	7,206.	0.
A. ROBERT CREEKMORE 137 OLD DRIVE CHESAPEAKE, VA 23322	CHAIRMAN 2	0.	0.	0.
CHARLES W. CRIST 215 W. ASHER ST. CULPEPER, VA 22701	VICE CHAIRMAN 2	0.	0.	0.
WILLIAM E. SUDDUTH 273 WATERLOO ST. WARRENTON, VA 20186	TREASURER 2	0.	0.	0.
MADALINE THOMAS MARTIN 1644 SPOTTSWOOD PLACE LYNCHBURG, VA 24503	SECRETARY 2	0.	0.	0.
TERRY L. ADAMS 3421 IVYLINK PLACE LYNCHBURG, VA 24503	DIRECTOR 1	0.	0.	0.
E. WARRINER ATKINSON 4504 BUCKINGHAM DRIVE PORTSMOUTH, VA 23703	DIRECTOR 1	0.	0.	0.
WILLIAM C. BANKS 2627 MARROW DRIVE NEWPORT NEWS, VA 23606	DIRECTOR 1	0.	0.	0.

PREŞBYTERIAN HOMES & FAMILY S	ERVICES, IN		54-03	346118
SHARON G. DUCKWALL 3332 SOUTHWOOD VILLAGE COURT ROANOKE, VA 24014	DIRECTOR 1	0.	0.	0.
KENNETH D. OBYE 140 BRIARCLIFF LANE DANVILLE, VA 24541	DIRECTOR 1	0.	0.	0.
PETER W. THOMAS 808 LONGWOOD AVE. BEDFORD, VA 24523	DIRECTOR 1	0.	0.	0.
WILLARD L. BUNDY 5722 VALLEY GREEN DRIVE BROAD RUN, VA 20137	DIRECTOR 1	0.	0.	0.
WILLIAM D. CRAIG 4111 FOREST HILL AVENUE RICHMOND, VA 23225	DIRECTOR 1	0.	0.	0.
DR. JAMES T. FOSTER P.O. BOX 504 DANVILLE, VA 24543	DIRECTOR 1	0.	0.	0.
REV. GEORGE C. GOODMAN 1022 FLOYD ST. LYNCHBURG, VA 24501	DIRECTOR 1	0.	0.	0.
REV. DR. J. KENNETH ROGERS 504 IVY LAKE DRIVE FOREST, VA 24551	DIRECTOR 1	0.	0.	0.
THOMAS M. SMITH 928 LOVELL DRIVE VIRGINIA BEACH, VA 23454	DIRECTOR 1	0.	0.	0.
SUSAN P. SUMMERS 190 DAYSPRING ROAD RUSTBURG, VA 24588	DIRECTOR 1	0.	0.	0.
JUANDIEGO R. WADE 909 ST. CHARLES AVENUE CHARLOTTESVILLE, VA 22901	DIRECTOR 1	0.	0.	0.
DR. JANE S. CRAIG 3820 HASTINGS DR. RICHMOND, VA 23235	DIRECTOR 1	0.	0.	0.
MARY JO DAVIS 220 VIRGINIA AVE DANVILLE, VA 24541	DIRECTOR 1	0.	0.	0.

PRESBYTERIAN HOMES & FAMI	LY SERVICES, IN		54	-0346118
GWENDOLYN M. EDWARDS 133 NORTH DAVIS DR. DANVILLE, VA 24540	DIRECTOR 1	0.	0.	0.
WILLIAM T. JOHNSON 1725 ROCKY BRANCH DR FOREST, VA 24551	DIRECTOR 1	0.	0.	0.
JUDGE ROSS W. KRUMM 221 DIVOT DR. HARRISONBURG, VA 22802	DIRECTOR 1	0.	0.	0.
MOSES L. MEADOWS 48 DIAMOND HILL ROAD HAMPTON, VA 23666	DIRECTOR 1	0.	0.	0.
JOHN G. OVERSTREET 1512 WOODLAND RD. BEDFORD, VA 24523	DIRECTOR 1	0.	0.	0.
J. KEVIN RICE 3239 LOCUST GROVE LANE SALEM, VA 24153	DIRECTOR 1	0.	0.	0.
TOTALS INCLUDED ON FORM 990	, PART V	228,115.	18,376.	0.

Form 990, Part IV, Line 57b

Depreciation schedules for the year ended December 31, 2003 have not been attached due to the large volume of pages included in these schedules. Depreciation schedules are available upon request. The following is a summary of fixed assets and related depreciation:

	BASIS_	ACCUMULATED DEPRECIATION	
Land & improvements	\$ 1,271,504	\$	442,066
Buildings & improvements	9,047,158		4,011,663
Leasehold improvements	1,158,391	311,05	
Machinery & equipment	878,569	482,36	
Automobiles	663,823		365,085
Furniture & fixtures	969,278		815,785
Construction in progress	<u>1,995</u>		-
	\$ <u>13,990,718</u>	\$	6,428,016

Form 990, Schedule A, Part III, Line 2a:

In June 2003 the Corporation transferred ownership of a vehicle to the former President upon his retirement.

Form 990, Schedule A, Part III, Line 3a:

Scholarships are provided to former residents of the Corporation's residential programs. Recipients are determined based on previsions of restricted gift instruments.