

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

2002

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning 10/01/02, and ending 9/30/03

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: PINE CASTLE, INC. 4911 SPRING PARK ROAD JACKSONVILLE FL 32207. D Employer ID number: 59-0704733. E Telephone number: 904-733-2650. F Accounting method: Accrual.

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? No. H(b) If "Yes," enter no. of affiliates. H(c) Are all affiliates included? No. H(d) Is this a separate return filed by an organization covered by a group ruling? 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).

J Organization type: 501(c)(3) (insert no. 3) or 4947(a)(1) or 527

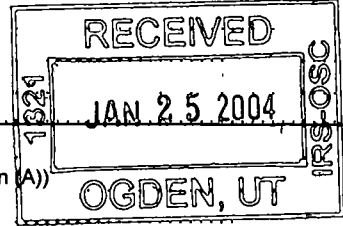
K Check here if the organization's gross receipts are normally not more than \$25,000. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 5,285,093

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

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, and Total. Includes revenue items like contributions, program service revenue, and expenses like program services and fundraising.

SCANNED JAN 28 2004



**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 \$ _____ non-cash \$ _____ )	22			
23 Specific assistance to individuals	23			
24 Benefits paid to or for members	24			
25 Compensation of officers, directors, etc	25	1,873,435	1,440,740	339,374
26 Other salaries and wages	26			93,321
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29	542,813	428,883	99,656
30 Professional fundraising fees	30			14,274
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	116,405	105,438	8,140
34 Telephone	34	22,434	18,999	2,548
35 Postage and shipping	35	32,680	30,353	1,085
36 Occupancy	36	108,512	100,211	7,521
37 Equipment rental and maintenance	37	81,988	79,641	1,770
38 Printing and publications	38	16,668	6,248	1,646
39 Travel	39	336,864	334,982	1,874
40 Conferences, conventions, and meetings	40			8
41 Interest	41	19,014	18,982	25
42 Depreciation, depletion, etc (attach schedule)	42	171,312	158,872	11,353
43 Other expenses not covered above (itemize). a	43a			1,087
b SEE STATEMENT	43b	317,503	198,356	46,180
c	43c			72,967
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	3,639,628	2,921,705	521,172

Joint Costs. Check  if you are following SOP 98-2  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)**

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) & (4) orgs. & 4947(a)(1) trusts, but optional for others.)
SEE STATEMENT	
a ADULT DAY TRAINING - PROVIDES ON-THE-JOB TRAINING FOR THOSE MEMBERS WHO ARE POTENTIALLY EMPLOYABLE IN THE COMMUNITY OR WITHIN THE ORG. (Grants and allocations \$ _____ )	1,426,092
b GROUP HOMES - PROVIDES MEMBERS THE OPPORTUNITY TO LIVE IN RESIDENTIAL HOUSING WITHIN A COMMUNITY ENVIRONMENT. (Grants and allocations \$ _____ )	1,126,940
c SUPPORTED EMPLOYMENT - PROVIDES ON-THE-JOB TRAINING FOR THOSE MEMBERS WHO ARE POTENTIALLY EMPLOYABLE IN THE COMMUNITY. (Grants and allocations \$ _____ )	343,779
d INDEPENDENT LIVING - PROVIDES ASSISTANCE IN ACTIVITIES TO ENABLE MEMBERS TO LIVE ON THEIR OWN IN THE COMMUNITY. (Grants and allocations \$ _____ )	24,894
e Other program services (attach schedule) (Grants and allocations \$ _____ )	0
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,921,705

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

<b>Note:</b> Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
45 Cash - non-interest-bearing			45	
46 Savings and temporary cash investments		45,113	46	739,912
47a Accounts receivable		116,166		
b Less allowance for doubtful accounts			47b	
		98,635	47c	116,166
48a Pledges receivable				
b Less allowance for doubtful accounts			48a	
			48b	
49 Grants receivable		428,210	49	318,409
50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
51a Other notes and loans receivable (attach schedule)				
b Less allowance for doubtful accounts			51a	
			51b	
52 Inventories for sale or use			52	
53 Prepaid expenses and deferred charges		26,055	53	79,410
54 Investments-securities SEE STMT 5 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		65,038	54	203,467
55a Investments-land, buildings, and equipment, basis		3,192,743		
b Less accumulated depreciation (attach schedule) SEE STMT 6		1,235,713		
		1,917,042	55a	1,957,030
56 Investments-other (attach schedule)			56	
57a Land, buildings, and equipment basis				
b Less accumulated depreciation (attach schedule)			57a	
			57b	
58 Other assets (describe _____ )			58	
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74)		2,580,093	59	3,414,394
60 Accounts payable and accrued expenses		303,389	60	302,972
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) SEE WORKSHEET		313,708	64b	307,024
65 Other liabilities (describe _____ )			65	
<b>66 Total liabilities</b> (add lines 60 through 65)		617,097	66	609,996
<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
67 Unrestricted		1,962,996	67	2,804,398
68 Temporarily restricted			68	
69 Permanently restricted			69	
<b>Organizations that do not follow SFAS 117, check here</b> <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	
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		1,962,996	73	2,804,398
<b>74 Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		2,580,093	74	3,414,394

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		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instr		
b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	N/A	
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.)		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
c	Dues, assessments, and similar amounts from members		
d	Section 162(e) lobbying and political expenditures		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
b	Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0 ; section 4912 <input type="checkbox"/> 0 , section 4955 <input type="checkbox"/> 0		
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		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> 0		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> 0		
90a	List the states with which a copy of this return is filed <input type="checkbox"/> NONE		
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	105
91	The books are in care of <input type="checkbox"/> LEIGH TOWNSEND Located at <input type="checkbox"/> 4911 SPRING PARK ROAD, JACKSONVILLE, FL	Telephone no. <input type="checkbox"/> 904-733-2650 ZIP + 4 <input type="checkbox"/> 32207	
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 type="checkbox"/> 92		

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

Table with 5 main columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include 93 Program service revenue, 94 Membership dues and assessments, 95 Interest on savings and temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 98 Net rental income or (loss) from personal property, 99 Other investment income, 100 Gain or (loss) from sales of assets other than inventory, 101 Net income or (loss) from special events, 102 Gross profit or (loss) from sales of inventory, 103 Other revenue, 104 Subtotal, 105 Total.

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.)

Table with 2 columns: 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). Row 1 contains 'SEE STATEMENT 10'.

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

Table with 5 columns: (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. Row 1 contains 'N/A'.

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?
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

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. Signature: [Signature], Date: 1/21/04, Title: Executive Director.

**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.)**

OMB No 1545-0047

**2002**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

PINE CASTLE, INC.

59-0704733

**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 ben plans & deferred compensation	(e) Expense account and other allowances
NONE				
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 instr. 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 ▶		

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

Schedule A (Form 990 or 990-EZ) 2002

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

	Yes	No
<b>1</b> 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 <b>▶</b> \$ _____ (Must equal amount on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
<b>2</b> 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 )		
<b>a</b> Sale, exchange, or leasing of property?		X
<b>b</b> Lending of money or other extension of credit?		X
<b>c</b> Furnishing of goods, services, or facilities?		X
<b>d</b> Payment of compensation (or payment or reimbursement of exp if more than \$1,000)?	X	
<b>e</b> Transfer of any part of its income or assets?		X
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below )		X
<b>4</b> Do you have a section 403(b) annuity plan for your employees?	X	
SEE STMT 11		
<b>Note:</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

**Part IV Reason for Non-Private Foundation Status (See 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
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	2,929,786	2,928,892	2,245,053	1,976,747	10,080,478
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1,105,731	907,003	587,227	695,267	3,295,228
<b>18</b> Gross inc from int, dividends, amounts received from pymt on securities loans (section 512(a)(5)), rents, royalties, & unrelated busn taxable inc (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	4,226	11,637	10,468	10,485	36,816
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revn levied for the organization's ben & either paid to it or expended on its behalf					
<b>21</b> The value of serv or fac furnished to the org by a governmental unit without charge. Do not incl the value of serv or fac generally furnished to the public without charge					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of cap assets					
<b>23</b> Total of lines 15 through 22	4,039,743	3,847,532	2,842,748	2,682,499	13,412,522
<b>24</b> Line 23 minus line 17	2,934,012	2,940,529	2,255,521	1,987,232	10,117,294
<b>25</b> Enter 1% of line 23	40,397	38,475	28,427	26,825	

<b>26</b> Organizations described on lines 10 or 11:	a	Enter 2% of amount in column (e), line 24	▶	<b>26a</b>	202,346
	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	▶	<b>26b</b>	
	c	Total support for section 509(a)(1) test. Enter line 24, column (e)	▶	<b>26c</b>	10,117,294
	d	Add. Amounts from column (e) for lines:			
		18 <u>36,816</u>	19 _____		
		22 _____	26b _____		
	e	Public support (line 26c minus line 26d total)	▶	<b>26e</b>	10,080,478
	f	Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶	<b>26f</b>	99.6361%

**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

N/A

(2001) (2000) (1999) (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

N/A

(2001)	(2000)	(1999)	(1998)	
<b>c</b> Add. Amounts from column (e) for lines	15 _____	16 _____		
	17 _____	20 _____	21 _____	
<b>d</b> Add. Line 27a total	_____	and line 27b total	_____	
<b>e</b> Public support (line 27c total minus line 27d total)				
<b>f</b> Total support for section 509(a)(2) test: Enter amount on line 23, column (e)				▶ <b>27f</b> _____
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))				▶ <b>27g</b> _____ %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				▶ <b>27h</b> _____ %

**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)**

	N/A	Yes	No
<b>29</b> 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?			
<b>30</b> 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?			
<b>31</b> 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 )			
<b>32</b> Does the organization maintain the following			
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?			
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
<b>d</b> 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 )			
<b>33</b> Does the organization discriminate by race in any way with respect to.			
<b>a</b> Students' rights or privileges?			
<b>b</b> Admissions policies?			
<b>c</b> Employment of faculty or administrative staff?			
<b>d</b> Scholarships or other financial assistance?			
<b>e</b> Educational policies?			
<b>f</b> Use of facilities?			
<b>g</b> Athletic programs?			
<b>h</b> Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?			
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement			
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc. 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation			

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

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

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

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

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(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**

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

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.

Table with 3 columns: Question, Yes, No. Rows include 51a(i), 51a(ii), 51b(i), 51b(ii), 51b(iii), 51b(iv), 51b(v), 51b(vi), and 51c.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A'.

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

Yes No (with checked box for No)

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

5300 Pine Castle, Inc.  
 59-0704733  
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## Federal Statements

### Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
SALE OF GROUP HOME 1					\$ 850,000	\$ 134,873	\$	\$ 715,127
PURCHASE		CITY OF JACKSONVILLE		3/17/03	\$ 850,000	\$ 134,873	\$ 0	\$ 715,127
TOTAL					<u>\$ 850,000</u>	<u>\$ 134,873</u>	<u>\$ 0</u>	<u>\$ 715,127</u>

## Federal Statements

### Statement 2 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	COGS	Gross Profit
WORKSHOPS	\$ 850,194	\$ 669,190	\$ 181,004
TOTAL	<u>\$ 850,194</u>	<u>\$ 669,190</u>	<u>\$ 181,004</u>

### Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	\$	\$	\$	\$
EXPENSES				
BUILDING MAINTENANCE	46,162	43,937	2,013	212
CLIENT SUPPORT COSTS	26,094	26,094		
CONSULTANTS	50,540	29,476	18,479	2,585
DUES AND MEMBERSHIPS	12,258	865	9,902	1,491
INSURANCE	80,259	70,089	9,255	915
MISCELLANEOUS	16,080	13,364	2,091	625
RECRUITING	10,906	10,422	10	474
STAFF TRAINING	7,253	2,663	4,430	160
SPECIAL EVENTS	67,951	1,446		66,505
TOTAL	<u>\$ 317,503</u>	<u>\$ 198,356</u>	<u>\$ 46,180</u>	<u>\$ 72,967</u>

### Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

PINE CASTLE, INC. WAS ESTABLISHED IN 1952 TO PROMOTE THE GENERAL WELFARE OF DEVELOPMENTALLY DISABLED ADULTS AND TO PROVIDE A CENTER FOR RESEARCH AND TRAINING IN THE FIELD OF MENTAL DISABILITIES.

### Statement 5 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
CORPORATE STOCK			
FIRST GUARANTY BANK	41,662	44,298	MARKET
SUNTRUST COMMON STOCK & MUTUAL FUND	23,376	159,169	MARKET
	<u>65,038</u>	<u>203,467</u>	

**Federal Statements****Statement 6 - Form 990, Part IV, Line 55 - Investments in Land, Buildings, and Equipment**

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
LAND, BULDINGS, & EQUIPMENT	\$ 3,022,238	\$ 1,105,196	\$ 3,192,743	\$ 1,235,713
TOTAL	<u>\$ 3,022,238</u>	<u>\$ 1,105,196</u>	<u>\$ 3,192,743</u>	<u>\$ 1,235,713</u>

**Statement 7 - Form 990, Part IV-A - Other Revenue Included in Financial Statements**

Description	Amount
COST OF GOODS SOLD	\$ 669,190
TOTAL	<u>\$ 669,190</u>

**Statement 8 - Form 990, Part IV-B - Other Expenses Included in Financial Statements**

Description	Amount
COST OF GOODS SOLD	\$ 669,190
TOTAL	<u>\$ 669,190</u>

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## Federal Statements

### Statement 9 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

Comp	Name	Benefits	Expenses	Title	Average Hours	Address	City, State, Zip
0	ARNETT GREENE	0	0	DIRECTOR			JACKSONVILLE
0	CAPTAIN ANDY ANDERSEN	0	0	DIRECTOR			JACKSONVILLE
0	DAVID LANE	0	0	TREASURER			JACKSONVILLE
0	DR. THOM BOROWY	0	0	DIRECTOR			JACKSONVILLE
0	ELLEN MORRIS-MILLS	0	0	2ND VP			JACKSONVILLE
0	ERIN SHIRLEY	0	0	DIRECTOR			PONTE VEDRA BEACH
0	GREG LECHWAR	0	0	DIRECTOR			JACKSONVILLE
0	JENNIFER YOUNG	0	0	SECRETARY			JACKSONVILLE
0	JOHN CAMPBELL	0	0	1ST VP			JACKSONVILLE
0	KAREN MAYFIELD	0	0	DIRECTOR			NEPTUNE BEACH
0	MARIE PENNA	0	0	DIRECTOR			JACKSONVILLE
0	MARY JARRETT	0	0	DIRECTOR			JACKSONVILLE
0	MINDY HANNA	0	0	DIRECTOR			JACKSONVILLE
0	RADHE MITTAL	0	0	DIRECTOR			JACKSONVILLE
0	SIDNEY MORGAN	0	0	DIRECTOR			JACKSONVILLE
0	STAN TENENBAUM	0	0	DIRECTOR			JACKSONVILLE
0	SUE BUTTS	0	0	PRESIDENT			JACKSONVILLE
0	TED SPETNAGEL	0	0	DIRECTOR			PONTE VEDRA BEACH
0		0	0	DIRECTOR			PONTE VEDRA BEACH

5300 Pine Castle, Inc.  
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## Federal Statements

### Statement 9 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued)

Name	Comp		Benefits	Expenses	Title	Average Hours	Address	City, State, Zip
CINDY CRAFT	0	0	0	0	DIRECTOR			JACKSONVILLE
J. B. SASSER	0	0	0	0	DIRECTOR			JACKSONVILLE
JONATHAN MAY	78,790	4,727		0	EXEC. DIR.	37.5		JACKSONVILLE
RANDALL DUNCAN	61,527	3,692		0	ASST. DIR.	37.5		JACKSONVILLE
LEIGH TOWNSEND	56,396	3,384		0	FIN. DIR.	37.5		JACKSONVILLE

## Federal Statements

### Statement 10 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	<u>Description</u>
93A	PROGRAM FEES ARE FEES CHARGED TO THE MEMBERS WHO ARE NOT SPECIFICALLY FUNDED THROUGH THE STATE--HRS. THESE FEES GO TOWARD THE CARE AND WELL-BEING OF THESE CLIENTS.
102	GROSS PROFIT FROM SALE OF INVENTORY PRODUCED IN WORKSHOPS STAFFED BY CLIENTS AS PART OF THE ADULT DAY TRAINING AND SUPPORTED EMPLOYMENT PROGRAMS.
103	THE MAJORITY OF THE MISCELLANEOUS REVENUE IS GENERATED BY THE SALE OF SODA AND SNACKS AND FROM REIMBURSEMENT FOR BUSING COSTS.

5300 Pine Castle, Inc.

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## Federal Statements

**Statement 11 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of  
Exp**

SEE PART V, FORM 990

## Mortgages and Other Notes Payable

Form  
990/990-PF

2002

For calendar year 2002, or tax year beginning

10/01/02, and ending

9/30/03

Name

PINE CASTLE, INC.

Employer Identification Number

59-0704733

## FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) FIRST GUARANTY BANK	
(2) FIRST GUARANTY BANK	
(3) FORD MOTOR CREDIT	
(4) FORD MOTOR CREDIT	
(5) FORD MOTOR CREDIT	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 130,410	3/03/00	1/03/17	\$1,051 PER MONTH	7.500
(2) 177,300	3/01/01	11/01/19	\$1,335 PER MONTH	6.630
(3) 25,249	9/30/02	9/30/07	\$453.11 PER MONTH	2.900
(4) 26,157	9/30/02	9/30/07	\$469.40 PER MONTH	2.900
(5) 30,518	4/30/03	4/30/08	\$508.62 PER MONTH	0.000
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) REAL ESTATE	MORTGAGE
(2) REAL ESTATE	MORTGAGE
(3) VEHICLE	TRANSPORTATION
(4) VEHICLE	TRANSPORTATION
(5) VEHICLE	TRANSPORTATION
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	105,354	94,330
(2)	156,948	142,960
(3)	25,249	20,512
(4)	26,157	21,248
(5)		27,974
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Totals</b>	<b>313,708</b>	<b>307,024</b>