

Return of Organization Exempt from Income Tax

2003

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning 7/01, 2003, and ending 6/30, 2004

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

SENIOR CITIZENS, INC. 3025 BULL STREET SAVANNAH, GA 31405

D Employer Identification Number 58-0864009 E Telephone number 912-263-0363 F Accounting method: Cash, Accrual, Other

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

G Web site: N/A

J Organization type: 501(c) 3

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 2,803,279.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, and Total. Includes a 'RECEIVED' stamp dated OCT 24 2004.

SCANNED OCT 28 '04

EXPENSES

P 22

Part IV Balance Sheets (See Instructions)

Note: 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
ASSETS	45 Cash — non-interest-bearing	36,285.	45	12,632.
	46 Savings and temporary cash investments	503,155.	46	279,473.
	47 a Accounts receivable	47 a 527,487.		
	b Less allowance for doubtful accounts	47 b	312,099.	47 c 527,487.
	48 a Pledges receivable	48 a		
	b Less allowance for doubtful accounts	48 b		48 c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less allowance for doubtful accounts	51 b		51 c
	52 Inventories for sale or use		12,598.	52 22,901.
	53 Prepaid expenses and deferred charges		7,539.	53 23,956.
	54 Investments — securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55 a Investments — land, buildings, & equipment, basis	55 a		
	b Less accumulated depreciation (attach schedule)	55 b		55 c
	56 Investments — other (attach schedule)			56
	57 a Land, buildings, and equipment, basis	57 a 2,475,095.		
	b Less accumulated depreciation (attach schedule)	57 b 1,525,059.	635,506.	57 c 950,036.
	58 Other assets (describe ► <u>STATEMENT 2</u> <u>SEE STATEMENT 3</u>)		334,422.	58 2,264.
59 Total assets (add lines 45 through 58) (must equal line 74)		1,841,604.	59 1,818,749.	
LIABILITIES	60 Accounts payable and accrued expenses		60 196,184.	173,392.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		412,659.	64 b 362,509.
	65 Other liabilities (describe ► _____)		65	
	66 Total liabilities (add lines 60 through 65)		608,843.	66 535,901.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted		67 1,071,802.	1,203,346.
	68 Temporarily restricted		68 160,959.	79,502.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19, column (B) must equal line 21)		1,232,761.	73 1,282,848.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)		1,841,604.	74 1,818,749.

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

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)			Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return		
a Total revenue, gains, and other support per audited financial statements ▶	a	2,803,279.	a Total expenses and losses per audited financial statements ▶	a	2,753,192.
b Amounts included on line a but not on line 12, Form 990.			b Amounts included on line a but not on line 17, Form 990.		
(1) Net unrealized gains on investments \$ _____			(1) Donated services and use of facilities \$ _____		
(2) Donated services and use of facilities \$ _____			(2) Prior year adjustments reported on line 20, Form 990 \$ _____		
(3) Recoveries of prior year grants \$ _____			(3) Losses reported on line 20, Form 990 \$ _____		
(4) Other (specify). _____ \$ _____			(4) Other (specify). _____ \$ _____		
Add amounts on lines (1) through (4) ▶	b		Add amounts on lines (1) through (4) ▶	b	
c Line a minus line b ▶	c	2,803,279.	c Line a minus line b ▶	c	2,753,192.
d 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 not included on line 6b, Form 990 \$ _____			(1) Investment expenses not included on line 6b, Form 990 \$ _____		
(2) Other (specify). _____ \$ _____			(2) Other (specify). _____ \$ _____		
Add amounts on lines (1) and (2) ▶	d		Add amounts on lines (1) and (2) ▶	d	
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	2,803,279.	e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	2,753,192.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
PATRICIA C. LYONS ----- SAVANNAH, GA	PRESIDENT 40+	80,500.	1,106.	0.
SEE ATTACHED LIST FOR REST ----- SAVANNAH, GA	DIRECTORS NONE	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No

If 'Yes,' attach schedule — see instructions.

Part VI Other Information (See instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?	X	
81a	If 'Yes,' enter the name of the organization SEE STATEMENT 4 and check whether it is <input checked="" type="checkbox"/> exempt or <input checked="" type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	0.
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b	N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?		N/A
85b	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
85c	Dues, assessments, and similar amounts from members	85c	N/A
85d	Section 162(e) lobbying and political expenditures	85d	N/A
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
85h	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
86a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
86b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87a	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
89b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction		X
89c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
89d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90a	List the states with which a copy of this return is filed <u>GEORGIA</u>		
90b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)	90b	63
91	The books are in care of <u>PATRICIA LYONS</u> Telephone number <u>912-236-0363</u> Located at <u>3025 BULL STREET, SAVANNAH, GA</u> ZIP + 4 <u>31403</u>		
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	92	N/A

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

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue.					
a SEE STATEMENT 5					1,276,515.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					13,064.
95 Interest on savings & temporary cash invmnts					4,208.
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate.					
a debt-financed property					183,282.
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue. a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					1,477,069.
105 Total (add line 104, columns (B), (D), and (E))					1,477,069.

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	SEE STATEMENT 6

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
SENIOR IN HOME SERVICES, INC. 3025 BULL STREET SAVANNAH, GA 31403 58-2142402	100.000 %	INACTIVE	0.	0.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

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

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

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

Date 10-20-04

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Organization Exempt Under
Section 501(c)(3)**

**(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust**
Supplementary Information — (See separate instructions.)

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

OMB No 1545 0047

2003

Name of the organization

SENIOR CITIZENS, INC.

Employer identification number

58-0864009

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
PATRICIA C. LYONS SAVANNAH, GA	PRESIDENT 40+	80,500.	1,106.	0.
SHEILA VIBERT SAVANNAH, GA	VICE-PRESIDENT 40+	56,955.	433.	0.
STORMY REWCASTLE SAVANNAH, GA	DIR OF FINANCE 40+	56,770.	0.	0.
ROBERT CURLEY SAVANNAH, GA	OPERATIONS MGR 40+	51,023.	636.	0.
Total number of other employees paid over \$50,000 ▶		0		

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶		0

Part III Statements About Activities (See instructions.)

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ N/A

(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

	Yes	No
1		X

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

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

a Sale, exchange, or leasing of property?

2a		X
----	--	---

b Lending of money or other extension of credit?

2b		X
----	--	---

c Furnishing of goods, services, or facilities?

2c		X
----	--	---

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

2d		X
----	--	---

e Transfer of any part of its income or assets?

2e		X
----	--	---

3a Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)

3a		X
----	--	---

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

3b		X
----	--	---

4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

4		X
---	--	---

Part IV Reason for Non-Private Foundation Status (See instructions.)

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

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

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

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

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

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

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

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

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

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

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

Provide the following information about the supported organizations. (See instructions.)

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

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

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

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

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,368,644.	1,177,201.	1,208,964.	650,041.	4,404,850.
16 Membership fees received	11,342.	12,228.	15,960.	15,930.	55,460.
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	1,222,460.	1,138,463.	1,077,697.	541,773.	3,980,393.
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	10,341.	16,367.	38,440.	16,006.	81,154.
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 SEE STMT 7	178,372.	163,902.	153,744.	79,893.	575,911.
23 Total of lines 15 through 22	2,791,159.	2,508,161.	2,494,805.	1,303,643.	9,097,768.
24 Line 23 minus line 17	1,568,699.	1,369,698.	1,417,108.	761,870.	5,117,375.
25 Enter 1% of line 23	27,912.	25,082.	24,948.	13,036.	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	102,348.
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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		26b	
c Total support for section 509(a)(1) test. Enter line 24, column (e)		26c	5,117,375.
d Add. Amounts from column (e) for lines.	18 81,154. 19 _____	26d	657,065.
	22 575,911. 26b _____	26e	4,460,310.
e Public support (line 26c minus line 26d total)		26f	87.16 %
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))			

27 Organizations described on line 12: N/A			
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	(2002) _____ (2001) _____ (2000) _____ (1999) _____		
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	(2002) _____ (2001) _____ (2000) _____ (1999) _____		
c Add. Amounts from column (e) for lines.	15 _____ 16 _____	27c	
	17 _____ 20 _____ 21 _____	27d	
d Add. Line 27a total _____ and line 27b total _____		27e	
e Public support (line 27c total minus line 27d total)		27f	
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)		27g	%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27h	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))			

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

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

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

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

Limits on Lobbying Expenditures

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

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table --		
If the amount on line 40 is --		
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		
The lobbying nontaxable amount is --		
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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

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

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

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0.

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

Depreciation and Amortization

Form **4562**

(Including Information on Listed Property)

OMB No 1545-0172

2003

Department of the Treasury
Internal Revenue Service

▶ See separate instructions. ▶ Attach to your tax return.

Attachment
Sequence No **67**

Name(s) shown on return **SENIOR CITIZENS, INC.** Identifying number **58-0864009**

Business or activity to which this form relates
All Business Activities

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

1 Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	100,000
2 Total cost of section 179 property placed in service (see page 2 of the instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	400,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see page 2 of the instructions	5	
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2002 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2004 Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg 3 of the instr)	14	
15 Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	45,807

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

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2003	17	28,182
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶	

Section B-Assets Placed in Service During 2003 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		29,970	5.0	HY	S/L	2,996
c 7-year property		364,890	7.0	HY	S/L	26,067
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (see page 6 of the instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr	22	103,052
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	▶ 23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2003)

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

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

Section A-Depreciation and Other Information (Caution: See page 7 of the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed?		Yes	No	24b If "Yes," is the evidence written?		Yes	No	
(a) Type of prop (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 6 of the instructions)								
							25	
26 Property used more than 50% in a qualified business use (see page 6 of the instructions)								
M.O.W.	97 FORD ASTRO VAN (73949)							
	12/31/96	100.00%	15,500	15,500	5.0	S/L HY		
Other Vehicles								
		%	192,517	192,517				
27 Property used 50% or less in a qualified business use (see page 6 of the instructions)								
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B-Information on Use of Vehicles

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

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

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

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

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

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

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year	
42 Amortization of costs that begins during your 2003 tax year (see page 9 of the instructions):						
43 Amortization of costs that began before your 2003 tax year					43	1,896
44 Total. Add amounts in column (f). See page 9 of the instructions for where to report					44	1,896

CLIENT S1095

SENIOR CITIZENS, INC.

58-0864009

**STATEMENT 1
FORM 990, PART II, LINE 43
OTHER EXPENSES**

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT & GENERAL	FUNDRAISING
CONSULTANTS	16,757.	880.	13,100.	2,777.
DELIVERY/TRANSPORTATION	215,362.	215,362.		
DEVELOPMENT	177,975.		134,475.	43,500.
FOOD & NUTRITION	1,248,351.	1,248,149.	202.	
IN-KIND SERVICES	21,485.	21,485.		
INSURANCE	79,498.	43,637.	35,590.	271.
INTERDEPARTMENTAL CHARGES	-1832539.	-1545956.	-286,583.	
MARKETING & OTHER SERVICES	688,965.	556,906.	132,059.	
MEMBERSHIPS	3,373.	128.	3,245.	
MISCELLANEOUS	15,991.	13,585.	2,406.	
RECOGNITION & PROMOTION	4,922.	2,330.	2,592.	
STIPENDS	205,380.	205,380.		
TAXES-OTHER	3,794.	3,383.	411.	
TRAINING	3,307.	1,049.	1,508.	750.
UNIFORMS	3,818.	3,565.	223.	30.
UTILITIES	96,122.	37,847.	58,275.	
TOTAL	\$ 952,561.	\$ 807,730.	\$ 97,503.	\$ 47,328.

**STATEMENT 2
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT**

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT	\$ 215,779.	\$ 158,152.	\$ 57,627.
FURNITURE AND FIXTURES	108,074.	108,074.	0.
MACHINERY AND EQUIPMENT	598,776.	205,371.	393,405.
BUILDINGS	1,389,078.	1,053,462.	335,616.
LAND	163,388.		163,388.
TOTAL	\$ 2,475,095.	\$ 1,525,059.	\$ 950,036.

**STATEMENT 3
FORM 990, PART IV, LINE 58
OTHER ASSETS**

LOAN COSTS		\$ 2,264.
TOTAL		\$ 2,264.

CLIENT S1095

SENIOR CITIZENS, INC.

58-0864009

**STATEMENT 4
FORM 990, PART VI, LINE 80B
RELATED ORGANIZATIONS**

<u>NAME OF ORGANIZATION</u>	<u>EXEMPT</u>	<u>NONEXEMPT</u>
SENIOR INDEPENDENT LIVING ORG., INC.	X	
SENIOR IN-HOME SERVICES, INC.		X

**STATEMENT 5
FORM 990, PART VII, LINE 93
PROGRAM SERVICE REVENUE**

<u>PROGRAM SERVICE REVENUE</u>	<u>(A) BUSI- NESS CODE</u>	<u>(B) UNRELATED BUSINESS AMOUNT</u>	<u>(C) EXCLU- SION CODE</u>	<u>(D) EXCLUDED AMOUNT</u>	<u>(E) RELATED OR EXEMPT FUNCTION</u>
ADULT DAY CARE					\$ 74,950.
CONTRACT TRANSPORTATION					1,067.
MEMBERSHIP & MGMT					59,654.
NUTRITION					561,790.
OTHER SERVICES					34,946.
SERVICES PURCH - MEDICAID					544,108.
TOTAL		<u>\$ 0.</u>		<u>\$ 0.</u>	<u>\$ 1,276,515.</u>

**STATEMENT 6
FORM 990, PART VIII
RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES**

<u>LINE #</u>	<u>EXPLANATION OF ACTIVITIES</u>
93A-F	ALL ARE DEPARTMENT REVENUES PROVIDED BY THE AGENCY
94	DUES ARE FOR MEMBERSHIP IN SENIOR CITIZENS, INC.
95	INVESTMENT INCOME IS FROM INTEREST-BEARING BANK ACCOUNTS WHICH CONTAIN FUNDS OF VARIOUS SR. CITIZENS' PROGRAMS AS WELL AS OTHER SMALL INVESTMENT ACCOUNTS.
97	GROSS RENTAL INCOME IS FROM THE RENTAL OF SECTIONS OF THE AGENCY'S BUILDING; THE MAJORITY OF TENANTS PROVIDE SERVICES TO ELDERLY CITIZENS. INCOME IS NEGATIVE ONCE EXPENSES ARE ALLOCATED.

**STATEMENT 7
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME**

<u>DESCRIPTION</u>	<u>(A) 2002</u>	<u>(B) 2001</u>	<u>(C) 2000</u>	<u>(D) 1999</u>	<u>(E) TOTAL</u>
RENTAL INCOME	\$ 178,372.	\$ 163,902.	\$ 153,744.	\$ 79,893.	\$ 575,911.
TOTAL	<u>\$ 178,372.</u>	<u>\$ 163,902.</u>	<u>\$ 153,744.</u>	<u>\$ 79,893.</u>	<u>\$ 575,911.</u>

CLIENT S1095

SENIOR CITIZENS, INC.

58-0864009

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FORM 990, PART II, LINE 43
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	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
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DELIVERY/TRANSPORTATION	215,362.	215,362.		
DEVELOPMENT	177,975.		1,607.	176,368.
FOOD & NUTRITION	1,248,351.	1,248,149.	202.	
IN-KIND SERVICES	21,485.	21,485.		
INSURANCE	79,498.	54,322.	24,905.	271.
INTERDEPARTMENTAL CHARGES	-1832539.	-1580443.	-113,200.	-138,896.
MARKETING & OTHER SERVICES	688,965.	590,101.	98,864.	
MEMBERSHIPS	3,373.	128.	3,245.	
MISCELLANEOUS	15,991.	14,285.	1,706.	
RECOGNITION & PROMOTION	4,922.	2,330.	2,592.	
STIPENDS	205,380.	205,380.		
TAXES-OTHER	3,794.	3,549.	245.	
TRAINING	3,307.	1,049.	1,508.	750.
UNIFORMS	3,818.	3,743.	45.	30.
UTILITIES	96,122.	89,630.	5,355.	1,137.
TOTAL	\$ 952,561.	\$ 869,950.	\$ 40,174.	\$ 42,437.

**STATEMENT 2
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT**

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT	\$ 215,779.	\$ 158,152.	\$ 57,627.
FURNITURE AND FIXTURES	108,074.	108,074.	0.
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FORM 990, PART IV, LINE 58
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TOTAL		\$ 2,264.

CLIENT S1095

SENIOR CITIZENS, INC.

58-0864009

**STATEMENT 4
FORM 990, PART VI, LINE 80B
RELATED ORGANIZATIONS**

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
SENIOR INDEPENDENT LIVING ORG., INC.	X	
SENIOR IN-HOME SERVICES, INC.		X

**STATEMENT 5
FORM 990, PART VII, LINE 93
PROGRAM SERVICE REVENUE**

PROGRAM SERVICE REVENUE	(A) BUSI- NESS CODE	(B) UNRELATED BUSINESS AMOUNT	(C) EXCLU- SION CODE	(D) EXCLUDED AMOUNT	(E) RELATED OR EXEMPT FUNCTION
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CONTRACT TRANSPORTATION					1,067.
MEMBERSHIP & MGMT					59,654.
NUTRITION					561,790.
OTHER SERVICES					34,946.
SERVICES PURCH - MEDICAID					544,108.
TOTAL		\$ 0.		\$ 0.	\$ 1,276,515.

**STATEMENT 6
FORM 990, PART VIII
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**STATEMENT 7
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME**

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TOTAL	\$ 178,372.	\$ 163,902.	\$ 153,744.	\$ 79,893.	\$ 575,911.



SENIOR CITIZENS, INC
Serving the Coastal Empire

Board of Directors

Louisa Abbott

Judge

Ronnie Barnhill

Certified Public Accountant

Nina Bloxham

City of Savannah

Kathy Bousquet - *Corporate Secretary*

Homemaker

Edwin Byck

Attorney

Trey Cook

Owner - Savannah Tire

Dena Claughton

Owner - Riverstreet Riverboat Company

Frank Hardeman, III

Owner - The Hardeman Group

John Henderson

Restaurant Owner

David Jones

Past Alderman - City of Savannah

Michael Kaigler

Chatham County

DeAnne Mitchell - *Vice Chair*

Convention Consultants

Nick Mueller

Chef - Nick Mueller Catering & Baking

Rick Ouellette

International Paper

Danny Powers

Tax Commissioner

Robert Reed

Owner - Project Group WRR

Willie Mae Robinson

Retired - Savannah State University

Tim Rutherford

Publisher, Coastal Senior

Bob Scanlon - *Chair*

City of Savannah

Kathy Sharpe - *Treasurer*

Wachovia Bank

Swann Seiler

Savannah Electric

Ron Stephens

State Legislator, Quick Rx Drugs

B. Ray Truett

Merrill Lynch

Lisa Ulman

International Paper

Tim Walmsley - *Corporate Attorney*

Attorney at Law

Thomas White

Hilton Head Interiors

Melissa Yao

Chamber of Commerce

07/04



and your community

Senior Citizens is Savannah's largest non-profit agency dedicated to enhancing the quality of seniors' lives. We are committed to fostering seniors' overall well-being and to offering families alternatives to premature institutionalization by providing a variety of comprehensive services that promote independent living.

At Senior Citizens, we strive constantly to meet the needs of our community's senior population because we believe "the best is yet to be."

The Ruth F. Byck Adult Day Care Center

Since 1982, The Ruth F. Byck Adult Day Care Center has focused on caring for seniors during the workday. We specialize in the care of those who require personal assistance, in addition to those suffering from the effects of Alzheimer's disease and other forms of dementia. Seniors receive two meals, snacks, transportation and a day of fun. Our professionally-trained staff is fully prepared to anticipate and meet the needs of your loved one.

Club 55

Located in the south wing of Senior Citizens, Club 55 is a fun-filled activity center for all Senior Citizens' members. Check in any day of the week and you'll find bridge clubs, piano lessons and exercise classes, in addition to our computer center and fitness room. Open Monday through Friday, Club 55 offers something for everyone. *Club 55 is also available for rental to your group; please call for details.*



Senior Companions

The Senior Companion Program is a perfect example of seniors helping seniors. Volunteers age 60 and over, who meet minimum income guidelines, receive a stipend in exchange for assisting frail seniors. These companions prepare meals, help with laundry, take out the trash and talk about grandchildren...tasks that could reasonably be expected of a friend.



Community Centers

Thanks to our partnership with the city councils of Garden City, Port Wentworth and Thunderbolt, Senior Citizens comes to you! Our community centers provide hot meals as well as educational and recreational activities for those 60 and over. Center hours are 9 am until 2 pm, Monday through Friday