

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)

OMB No. 1545-0047

2004

Open to Public Inspection

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

A For the 2004 calendar year, or tax year beginning January 1, 2004, and ending December 31, 2004

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

C Name of organization Elderhaus Adult Day Programs, Inc.
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
605 S. Shields Street
 City or town, state or country, and ZIP + 4
Ft. Collins, CO 80521

D Employer identification number 84-0833808

E Telephone number (970) 221-0406

F Accounting method: ☐ Cash ☐ Accrual
☐ Other (specify)

G Website:

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

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 428,115

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? ☐ Yes ☐ No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? ☐ Yes ☐ No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No
I Group Exemption Number

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenues	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	177,709	
	b	Indirect public support	1b	39,205	
	c	Government contributions (grants)	1c	7,213	
	d	Total (add lines 1a through 1c) (cash \$ <u>184,922</u> noncash \$ <u>39,205</u>)	1d	224,127	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	199,786	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	1,317	
	5	Dividends and interest from securities	5		
	6a	Gross rents	6a		
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe <u> </u>)	7			
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a	
	b	Less: cost or other basis and sales expenses	8b		
	c	Gain or (loss) (attach schedule)	8c		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ☐			
	a	Gross revenue (not including \$ <u>14,136</u> of contributions reported on line 1a)	9a	2,885	
	b	Less: direct expenses other than fundraising expenses	9b	1,765	
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	1,120	
	10a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
Net Assets	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
	11	Other revenue (from Part VII, line 103)	11		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c and 11)	12	426,350	
	13	Program services (from line 44, column (B))	13	296,124	
	14	Management and general (from line 44, column (C))	14	45,661	
	15	Fundraising (from line 44, column (D))	15	16,008	
	16	Payments to affiliates (attach schedule)	16	0	
	17	Total expenses (add lines 16 and 44, column (A))	17	357,793	
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	68,557	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	313,999	
20	Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	382,556		

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule). (cash \$ _____ noncash \$ 14,646)	22 14,646	14,646		
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25			
26	Other salaries and wages	26 206,387	168,848	25,986	11,553
27	Pension plan contributions	27			
28	Other employee benefits	28 14,657	13,032	1,625	-
29	Payroll taxes	29 17,197	13,845	2,468	884
30	Professional fundraising fees	30			
31	Accounting fees	31 6,552	2,293	4,259	
32	Legal fees	32			
33	Supplies	33 3,963	3,369	594	
34	Telephone	34 3,535	3,338	197	
35	Postage and shipping	35 1,101	738	363	
36	Occupancy	36 18,948	16,152	2,796	
37	Equipment rental and maintenance	37 1,760	1,760		
38	Printing and publications	38 1,540	1,446	94	
39	Travel	39 6,640	6,640		
40	Conferences, conventions, and meetings	40			
41	Interest	41 75	75		
42	Depreciation, depletion, etc. (attach schedule)	42 10,766	8,366	2,400	
43	Other expenses not covered above (itemize): a	43a 10,961	7,390		3,571
	b Marketing	43b 2,067	2,067		
	c Board Development	43c 225		225	
	d Program Activities	43d 4,921	4,921		
	e Indirect Expenses	43e 31,852	27,198	4,654	
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 357,793	296,124	45,661	16,008

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 25 of the instructions.)What is the organization's primary exempt purpose? Respite Care

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

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

a	Direct Care Services Provide respite care for caregivers of adults with special needs, including meals & transportation.	(Grants and allocations \$ _____)	357,793
b		(Grants and allocations \$ _____)	
c		(Grants and allocations \$ _____)	
d		(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services).		357,793

Part IV Balance Sheets (See page 25 of the 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	43,074	45	108,845
	46 Savings and temporary cash investments	93,586	46	94,709
	47a Accounts receivable	19,745		
	47b Less: allowance for doubtful accounts	- 0 -		
	47c	13,890	47c	19,745
	48a Pledges receivable			
	48b Less: allowance for doubtful accounts			
	48c		48c	
	49 Grants receivable	17,623	49	41,729
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)			
	51b Less: allowance for doubtful accounts			
	51c		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	241	53	- 0 -
54 Investments—securities (attach schedule) ☐ Cost ☐ FMV		54		
55a Investments—land, buildings, and equipment: basis				
55b Less: accumulated depreciation (attach schedule)				
55c		55c		
56 Investments—other (attach schedule)		56		
57a Land, buildings, and equipment: basis				
57b Less: accumulated depreciation (attach schedule)				
57c	134,492	57c	124,457	
58 Other assets (describe ☐)	18,354	58	- 0 -	
59 Total assets (add lines 45 through 58) (must equal line 74)	321,260	59	389,485	
Liabilities	60 Accounts payable and accrued expenses	1,372	60	1,040
	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	
	64b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ☐ <u>Accrued Vacation Pay</u>)	5,888	65	5,888
66 Total liabilities (add lines 60 through 65)	7,260	66	6,928	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☐ and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	294,645	67	351,335
	68 Temporarily restricted	19,354	68	31,222
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☐ 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)	313,999	73	382,557
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	321,259	74	389,485	

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 IV-A	Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)
1	2018
2	2017
3	2016
4	2015
5	2014
6	2013
7	2012
8	2011
9	2010
10	2009
11	2008
12	2007
13	2006
14	2005
15	2004
16	2003
17	2002
18	2001
19	2000
20	1999
21	1998
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24	1995
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157	1862
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Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	426,350
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$ - 0 -		
(2)	Donated services and use of facilities \$ 39,205		
(3)	Recoveries of prior year grants . . . \$ - 0 -		
(4)	Other (specify): \$	b	39,205
	Add amounts on lines (1) through (4) ▶	c	387,145
c	Line a minus line b ▶		
d	Amounts included on line 12, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990. . . \$		
(2)	Other (specify): \$	d	39,205
	Add amounts on lines (1) and (2) ▶	e	426,350
e	Total revenue per line 12, Form 990 (line c plus line d). ▶		

a	Total expenses and losses per audited financial statements . . . ▶	a	279,383
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$ 39,205		
(2)	Prior year adjustments reported on line 20, Form 990. . . . \$ - 0 -		
(3)	Losses reported on line 20, Form 990. \$ - 0 -		
(4)	Other (specify): ----- ----- \$ - 0 -		
	Add amounts on lines (1) through (4) ▶	b	39,205
c	Line a minus line b ▶	c	318,588
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify): ----- ----- \$ 39,205		
	Add amounts on lines (1) and (2) ▶	d	39,205
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	357,793

Part V **List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see page 27 of the instructions.)

[illegible]

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 page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76		☒
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		☒
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		☒
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		☒
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?	80a	☒	
b	If "Yes," enter the name of the organization <u>American Baptist Church</u> and check whether it is ☒ exempt or ☐ nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a		
b	Did the organization file Form 1120-POL for this year?	81b		☒
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?	82a	☒	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	7,440	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	☒	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	☒	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		☒
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	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.	85b	N/A	
c	Dues, assessments, and similar amounts from members.	85c	N/A	
d	Section 162(e) lobbying and political expenditures.	85d	1	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e).	85f	1	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	1	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	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? If "Yes," complete Part IX	88		☒
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u> </u> ; section 4912 <u> </u> ; section 4955 <u> </u>			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		☒
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		- 0 -	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		- 0 -	
90a	List the states with which a copy of this return is filed <u>N/A</u>			
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) <u>10</u>	90b	10	
91	The books are in care of <u>N/A</u> Telephone no. <u> </u> Located at <u> </u> ZIP + 4 <u> </u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 —Check here. ☐ and enter the amount of tax-exempt interest received or accrued during the tax year	92		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount		
93 Program service revenue:						
a Private Pay Program Fees						93,077
b						
c						
d						
e						
f Medicare/Medicaid payments						96,948
g Fees and contracts from government agencies	Food					9,761
94 Membership dues and assessments						
95 Interest on savings and temporary cash investments						1,317
96 Dividends and interest from securities						
97 Net rental income or (loss) from real estate:						
a debt-financed property						
b not debt-financed property						
98 Net rental income or (loss) from personal property						
99 Other investment income						
100 Gain or (loss) from sales of assets other than inventory						
101 Net income or (loss) from special events						1,120
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))		-0-		-0-		202,223
105 Total (add line 104, columns (B), (D), and (E))						202,223

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 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a-b	Provided funds for food, staff salaries, & recreational activities for participants

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

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

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

Please Sign Here

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 of officer *Joanne R. Johnson*Date *8/8/05*

Executive Director

Date

Check if self-employed ☐

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

2004

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

Name of the organization

Elderhaus Adult Day Programs, Inc.

Employer identification number

84-0833808

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

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

Total number of other employees paid over \$50,000 ▶

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 ▶

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

Yes No

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

- 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**

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

- b** Do you provide credit counseling, debt management, credit repair, or debt negotiation services? **4b** ☒ **X**

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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 33⅓%** 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 33⅓%** 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 organization 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total		
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	163,699	170,845	156,020	125,869	616,133		
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	160,738	153,892	146,034	168,473	649,137		
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	1,342	1,342	4,265	638	7,587		
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	325,779	325,779	326,319	294,980	1,272,857		
24 Line 23 minus line 17	165,041	171,887	160,285	126,507	623,720		
25 Enter 1% of line 23	3,257.8	3,257.8	3,263.2	2,949.8			
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				26a		
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b		
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c		
d Add: Amounts from column (e) for lines:	18	19			26d		
	22	26b			26e		
e Public support (line 26c minus line 26d total)					26f		
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					%		
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:						
	(2003)	(2002)	(2001)	(2000)			
	0	0	0	0			
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2003)	(2002)	(2001)	(2000)			
	0	0	0	0			
c Add: Amounts from column (e) for lines:	15	16			27c		
	17	20	21				
	616,133	0	0				
d Add: Line 27a total	0	and line 27b total	0				
e Public support (line 27c total minus line 27d total)					27e		
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h		
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
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	
c 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:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

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

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— The lobbying nontaxable amount is—		
Not over \$500,000 20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	41	
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000 \$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41).	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(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 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:	Yes	No	Amount
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.)			

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 11 of the instructions.) N/A

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:

[illegible]

- 52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No

- b** If "Yes," complete the following schedule:

[illegible]

Elderhaus Adult Day Programs, Inc.
Employer ID # 84-0833808
Part V - 2004 - 990 Tax Form

List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)				
(A) Name and address	(B) Title and Average hrs. per week devoted to position	Compensation	(D) Contributions to employee benefit plans	(E) Expense account
Paul Wilson, 970 Bonner Springs Ranch Rd. LaPorte, CO 80535	Chairman of the Board - 35 hrs.	\$0.00	\$0.00	\$0.00
Joshua Zugish, 323 S. College Ave. Suite 1 Ft. Collins, CO 80524	Secretary - 1 hr.	\$0.00	\$0.00	\$0.00
Fran Kimes, 217 E. Michigan Berthoud, CO 80513	Treasurer - 1 hr.	\$0.00	\$0.00	\$0.00
Sheri Jo Wayman, 2105 Clubhouse Drive Greeley, CO 80634	Vice Chair - 1 hr.	\$0.00	\$0.00	\$0.00
Barbara Hope, 1032 Ridge Lawn Drive Ft. Collins, CO 80521	Registered Nurse - 2 hrs.	\$0.00	\$0.00	\$0.00
Sarah Harlow, 1008 Rule Drive Ft. Collins, CO 80525	Board member - 2 hrs.	\$0.00	\$0.00	\$0.00
Chris Doyle, 6702 Antigua #52 Ft. Collins, CO 80525	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
June-donna Lewis, 3821 Starlite Drive Ft. Collins, CO 80524-9629	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Gordon Lewis, 3821 Starlite Drive Ft. Collins, CO 80524-9629	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Sandy Martinez, 2218 Dover Drive Ft. Collins, CO 80526	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Jim Downey, 5509 Golden Willow Drive Ft. Collins, CO 80528-6397	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Diane Breed, 4630 Royal Vista Circle #8 Windsor, CO 80528	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Gina Murray, 815 Franklin Avenue Berthoud, CO 80513	Board member - 1 hr.	\$0.00	\$0.00	\$0.00
Christina Salas, 1000 S. Lemay Avenue Ft. Collins, CO 80524	Board member - 1 hr.	\$0.00	\$0.00	\$0.00