

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)

2003

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 July 1 , 2003, **and ending** June 30 , 20 04

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

48081 *****AUTO**5-DIGIT 94102
 RAINBOW ADULT COMMUNITY HOUSING
 DBA OPENHOUSE
 870 MARKET ST
 SAN FRANCISCO CA 94102-3002

I
P 129 R
B 1 S

D Employer identification number
94-3337955
E Telephone number
415-296-8995
F Accounting method Cash Accrual
 Other (specify) ▶

G Website: ▶ www.openhouse-sf.org

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.**

and I are not applicable to section 527 organizations
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)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 429,721

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

1 Contributions, gifts, grants, and similar amounts received:			
a Direct public support	1a	292,734	
b Indirect public support	1b		
c Government contributions (grants)	1c	135,079	
d Total (add lines 1a through 1c) (cash \$ _____ noncash \$ 1,600)	1d		427,813
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		
3 Membership dues and assessments	3		
4 Interest on savings and temporary cash investments	4		
5 Dividends and interest from securities	5		1,908
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 ▶ _____)	7		
8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
b Less cost or other basis and sales expenses	8a		
c Gain or (loss) (attach schedule)	8b		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
8d	8d		
9 Special events and activities (attach schedule) If any amount is from gaming, check here ▶ <input type="checkbox"/>			
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		
b Less direct expenses other than fundraising expenses	9b		
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
10a Gross sales of inventory, less returns and allowances	10a		
b Less cost of goods sold	10b		
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		429,721
13 Program services (from line 44, column (B))	13		133,029
14 Management and general (from line 44, column (C))	14		124,192
15 Fundraising (from line 44, column (D))	15		62,559
16 Payments to affiliates (attach schedule)	16		
17 Total expenses (add lines 16 and 44, column (A))	17		319,780
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		109,941
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		159,229
20 Other changes in net assets or fund balances (attach explanation)	20		39,328
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		308,498

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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.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25 32,380		14,479	17,901
26	Other salaries and wages	26 92,105	46,990	45,115	
27	Pension plan contributions	27			
28	Other employee benefits	28 14,527	5,520	6,769	2,238
29	Payroll taxes	29 10,775	4,095	5,280	1,400
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33 9,022	2,825	1,907	4,290
34	Telephone	34 1,276	421	434	421
35	Postage and shipping	35 5,365	786	52	4,527
36	Occupancy	36 6,349	3,809	1,270	1,270
37	Equipment rental and maintenance	37			
38	Printing and publications	38 11,466	962	962	9,542
39	Travel	39 27		27	
40	Conferences, conventions, and meetings	40 1,294			1,294
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize) a Insur.	43a 4,362		4,362	
b	Professional fees	43b 127,272	66,381	43,280	17,611
c	Sponsorships	43c 1,225			1,225
d	Staff/Board development	43d 1,495	1,240	255	
e	Special events	43e 840			840
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B) - (D), carry these totals to lines 13 - 15</i>	44 319,780	133,029	124,192	62,559

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? <input checked="" type="checkbox"/> Affordable senior housing	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others)
a See attached program report (Grants and allocations \$ _____)	133,029
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)	133,029

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	39,734	45	32,828
	46 Savings and temporary cash investments	76,353	46	255,330
	47a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	129,940	48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges			53 24,496
	54 Investments — securities (attach schedule) .. <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54
	55a Investments — land, buildings, and equipment: basis	55a		
	b Less accumulated depreciation (attach schedule)	55b		55c
56 Investments — other (attach schedule)			56	
57a Land, buildings, and equipment basis	57a			
b Less accumulated depreciation (attach schedule)	57b		57c	
58 Other assets (describe ►			58	
59 Total assets (add lines 45 through 58) (must equal line 74)	246,027	59	312,654	
Liabilities	60 Accounts payable and accrued expenses	47,469	60	4,156
	61 Grants payable		61	
	62 Deferred revenue	39,329	62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ►		65	
66 Total liabilities (add lines 60 through 65)	86,798	66	4,156	
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	159,229	67	128,498
	68 Temporarily restricted		68	180,000
	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)	159,229	73	308,498
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	246,027	74	312,654

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.)			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	429,721	a Total expenses and losses per audited financial statements . . . ▶	a	319,780
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	429,721	c Line a minus line b ▶	c	319,780
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	429,721	e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	319,780

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the 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 & deferred compensation	(E) Expense account and other allowances
Linda Carlson 870 Market St, San Francisco, CA 94102	Exec Dir 40	0	0	0
Marcy Adelman 870 Market St, San Francisco, CA 94102	President 2	0	0	0
Nancy Brundy 870 Market St, San Francisco, CA 94102	Vice Pres. 2	0	0	0
Hadley Dale Hall 870 Market St, San Francisco, CA 94102	Secretary 2	0	0	0
Arthur Santos 870 Market St, San Francisco, CA 94102	Treasurer 2	0	0	0
Bill Denebeim 870 Market St, San Francisco, CA 94102	Board Member 1	0	0	0
Billy Ewing 870 Market St, San Francisco, CA 94102	Board Member 1	0	0	0
Jan Faulkner 870 Market St, San Francisco, CA 94102	Board Member 1	0	0	0
Alexander Hines 870 Market St, San Francisco, CA 94102	Board Member 1	0	0	0
Arthur Hurwith 870 Market St, San Francisco, CA 94102	Board Member 1	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 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		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
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
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 _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	0
b	Did the organization file Form 1120-POL for this year?	81b	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?	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	1,600
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	x
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	x
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
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	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	x
89a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under section 4911 _____ 0, section 4912 _____ 0, section 4955 _____ 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	x
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 _____ 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 California		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)	90b	2
91	The books are in care of RVKish & Company Telephone no 760-320-4093 Located at 3603 E. Via Escuela, Palm Springs, CA ZIP + 4 92262-4043		
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 _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,908	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property inventory					
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					
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))				1,908	
105 Total (add line 104, columns (B), (D), and (E))					1,908

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)
▶	

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)

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

Please

12-9-05

Date

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

OMB No 1545-0047

2003

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 RAINBOW ADULT COMMUNITY HOUSING DBA OPENHOUSE	Employer identification number 94-3337955
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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 ▶	0			

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
Cathy Maupin 605 Naples Street San Francisco, CA 94112	Interim Exec. Dir.	57,840
Total number of others receiving over \$50,000 for professional services ▶	1	

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.		x
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.)		
2a	Sale, exchange, or leasing of property?		x
2b	Lending of money or other extension of credit?		x
2c	Furnishing of goods, services, or facilities?		x
2d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		x
2e	Transfer of any part of its income or assets?		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.)		x
3b	Do you have a section 403(b) annuity plan for your employees?		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?		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 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 6 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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28) . . .	378,259	170,268			548,527
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					
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	1,489	505			1,994
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	379,748	170,773			550,521
24 Line 23 minus line 17	379,748	170,773			550,521
25 Enter 1% of line 23	3,797	1,708			

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24 ▶	26a	11,010
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	129,940
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶		26c	550,521
d Add: Amounts from column (e) for lines. 18 <u>1,994</u> 19 _____ 22 _____ 26b <u>129,940</u> ▶		26d	131,934
e Public support (line 26c minus line 26d total) ▶		26e	418,587
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶		26f	76.03 %

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:

(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 _____ 17 _____ 20 _____ 21 _____ ▶	27c	
d Add: Line 27a total and line 27b total ▶	27d	
e Public support (line 27c total minus line 27d total) ▶	27e	
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) . . . ▶ 27f		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 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 page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
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 page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
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	41	
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
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) 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 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 12 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.

Project Update 2003-2004

Openhouse's Mission

The purpose of openhouse (formerly Rainbow Adult Community Housing) is to ensure that lesbian, gay, bisexual and transgender (LGBT) seniors of all income levels have access to safe housing and aging support services that are sensitive to their needs. Our primary focus is to create and sustain a residential village with related support services for LGBT seniors and their friends. We also educate and advocate for inclusive and nondiscriminatory housing and related services to enable LGBT seniors to live with dignity, whether in our retirement village or in their own homes

Project Update

LGBT Cultural Sensitivity Trainings:

Currently when San Francisco LGBT elders need aging support services (e.g. visiting home health or personal care), there is no place where they can find help that they are sure will be sensitive and supportive of their unique LGBT concerns. Often isolated due to a lifetime of fear of discrimination, many aging LGBTs are invisible and overlooked by social service, health and housing providers. We hired a Gerontology Service Director to train existing service providers to be culturally competent and available to serve LGBT seniors. This effort brings agencies together and lays the groundwork for agencies to begin to train their own workers to be LGBT-elder sensitive, as part of their own continuing education programs. The purpose is to build partnerships to serve this isolated population, to build a base of culturally competent providers for when the openhouse facility opens, and to increase numbers of sensitive providers available for home health services now. Since much of our focus has been on providers serving high numbers of people of color, our trainings will increase diverse communities' access to support services, while increasing the diversity of people working to achieve our mission of healthy aging and supportive housing.

More than **200** providers of aging support services at more than **20** agencies have had a training in LGBT aging issues and learn how to reach out to LGBT elders in a sensitive, supportive and safe way.

All agencies that are formally trained have received follow-up contact in an effort to build a collaborative relationship with the agencies. We have worked to identify a person at each agency to be an LGBT liaison and invite the liaisons to group meetings where we can offer expertise, resources and other support.

100 agencies (providers of services for San Francisco seniors) have received sensitivity related information from openhouse through mailings, telephone or meetings and be invited to work collaboratively with us to better serve hidden LGBTs. During the second year of this program we anticipate that openhouse will help agencies develop a curriculum to include LGBT elder sensitivity training as part of their regular continuing education activities. This would create systemic change in how the aging support and long-term health care systems deal with LGBTs and LGBT issues.

openhouse has created and strengthened partnerships, especially in San Francisco's most diverse neighborhoods, by participating regularly in the Neighborhood Partnership Group, the Senior Services Collaborative, and other groups, and by educating the community and building support by speaking at other senior group meetings, both LGBT and mainstream

We held six focus groups, met with over 80 individual LGBT seniors and targeted the most marginalized and hard to reach LGBT seniors to get input on our housing project with services for LGBT seniors in San Francisco. This outreach has provided us with information from the SF LGBT senior community in developing our long term service plan for the housing.

LGBT Senior Housing:

FINANCIAL FEASIBILITY AND SERVICES:

Openhouse has completed its predevelopment, financial and service plans after working with experts in the field of finance, housing and senior services (Loraine Hiatt; Cain Brothers; Seniority Inc.; and, preliminary architectural plans were developed through contracts with Citizen's Housing, San Francisco; and, Hardison Komatsu Ivelich & Tucker {HKI&T} along with Adele Naude Santos and Associates) to develop and build a model that is financially self sustaining. Based upon our various studies and other data, the concept of our village includes 310 units and related spaces for services. 51 units are affordable and they can be subsidized by the project in perpetuity with an additional 50 HUD Section 202 will be added to increase the affordability of the housing to 101 units. These 51 units of affordable senior housing will be home to LGBT seniors with an Average Median Income (AMI) of 50% to 80%. The HUD 202 units will support seniors with very low income levels.

SPACE FOR THE SITE OF A VILLAGE:

This project requires considerable space for the living units (about 60% of the build-out) and the health, recreational and community spaces to serve the residents and others in the neighborhood and larger community (40% of the build-out space). This is NOT just a housing project.

SITE ACQUISITION EFFORTS:

- **Openhouse** has been looking at potential sites (Mission Bay, the Presidio, 10th & Mission, etc.) for nearly four years. We have not located an acceptable alternative site that meets our needs in terms of area for the housing and related programs and services.
- However, after extensive searches we have found an excellent site: Parcels O & P on the new Octavia Boulevard bounded by Oak, Fell and Laguna (where the Central freeway ramps came down).
- **Openhouse** has worked very closely with the Hayes Valley Neighborhood Association for many years and has their support to build **openhouse's** senior village on this site. Their leadership often advocates for our project at city hall. The Hayes Valley Neighborhood Association wrote a resolution supporting **openhouse's** efforts to secure parcels O and P to the Planning Commission in March 2003, submitted a letter of support to the Planning Commission saying they believed that their neighborhood would benefit from having **openhouse's** project of inclusive, mixed income housing for seniors developed on parcels O & P in their neighborhood.
- In the spring of 2003, **openhouse** commented on the zoning modifications for the Neighborhood Plan for these parcels to the Planning Commission. The Planning Commission will not address rezoning until the Environmental Review of the Neighborhood Plan is completed. But during the Commission hearings **openhouse** received encouraging support from most of the Commissioners.
- Two years ago, the Human Rights Commission and the Aging and Adult Service Commission held a public hearing to determine the needs of LGBT seniors. LGBT seniors and senior organizations spoke about the urgency for housing and services. The **openhouse** board presented both the needs survey and project plans. As a result, the Human Rights Commission in April of this year wrote a letter to the President of the Board of Supervisors, Matt Gonzalez, urging the Board of Supervisors to support the development of **openhouse's** senior village on Parcels O & P. This has yet to come before the Board for a vote.
- On November 16, 2004, the Redevelopment Agency presented the staff's recommendation for the development of the parcels owned by the agency in the Octavia Boulevard Neighborhood Plan. **Openhouse** attended the hearing of the Redevelopment Commission to request that **openhouse** be given an opportunity to compete for Parcel O in the plan by broadening the designation to affordable housing so that a senior housing project like **openhouse** could equally compete. The Redevelopment Commission asked the staff to have Parcel O pulled from the overall plan for future discussion as an agenda item before the Commission. The motion was received the majority vote of the Commissioners.
- On December 6, 2004, **openhouse** presented our plans for building an LGBT senior housing community with comprehensive services to the Director of the Mayor's Office of Housing and to the Director of the Mayor's Office of Real Estate. In that meeting, **openhouse** expressed our interest in Parcel O and Parcel P in the Octavia Blvd and discussed how to best link the two parcels in the purchase, use and planning so to reflect **openhouse's** extensive plan to build a mixed income, multi-cultural LGBT senior housing village that will also serve the surrounding senior community in a non residential capacity. MOH and the Mayor's Office of Real Estate are taking our interests into consideration to best meet the needs of the city and **openhouse's** proposed project goals.
- Through the Department of Aging and Adult Services a sizable four year planning grant was secured from the Robert Wood Johnson Foundation to develop a "Partnership for Community-Based Care and Support". The Partnership is to promote dignity, independence and choice for San Franciscans. The four target groups are seniors from the: Black, Latino, Asian & Pacific Islanders, and LGBT communities. **Openhouse** provides leadership to this group by providing the unmet need identified by the Partnership for sensitivity trainings for health care providers.
- As a result of a hearing on November 16, 2003, the Redevelopment Agency held a workshop for the Redevelopment Commissioners with the staff recommendations for the Agency owned parcels throughout

the Octavia Blvd. **Openhouse** presented our project goals at that hearing and were successful in gaining a motion approved by the Redevelopment Commissioners to have Parcel O discussed further in a future Commission hearing to consider broadening the staff recommendation of affordable family housing to include senior housing. Although the staff recommendations were not up for a vote at the November 16th Redevelopment Commission hearing, **openhouse** temporarily impacted prior efforts by the Redevelopment Agency to keep **openhouse** from consideration on these parcels

- In December 2004, **openhouse** presented in a broad based community effort the growing needs of San Francisco's LGBT senior community to the Board of Supervisors. This was the first presentation of its kind in history. It was broadcasted on public television and received very positive press.

Rainbow Adult Community Housing dba openhouse
94-3337955
Form 990 Page 4, Part V, List of Officers, Directors, etc.

(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	(E) Expense account and other allowances
Marty Low 870 Market Street, #742 San Francisco, CA 94102	Bd Member 1	0	0	0
Saralie Pennington 870 Market Street, #742 San Francisco, CA 94102	Bd Member 1	0	0	0
Matile Rothschild 870 Market Street, #742 San Francisco, CA 94102	Bd Member 1	0	0	0
Eric Smith 870 Market Street, #742 San Francisco, CA 94102	Bd Member 1	0	0	0

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns.
Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization OPENHOUSE	Employer identification number 94-3337955
	Number, street, and room or suite no. If a PO box, see instructions 870 MARKET STREET, SUITE 742	
	City, town or post office, state, and ZIP code For a foreign address, see instructions. SAN FRANCISCO CA 94102	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the **whole** group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until FEBRUARY 15, 20 04, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year 20 ____ or

▶ tax year beginning JULY 1, 20 02, and ending JUNE 30, 20 03

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ _____ Title ▶ ACCOUNTANT Date ▶ 11/14/03

For Paperwork Reduction Act Notice, see Instruction

COPY