

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)

2004

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 **2004** calendar year, or tax year beginning **APR 1, 2004** and ending **MAR 31, 2005**

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
SENIOR CITIZENS OF GREATER DALLAS, INC.

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1215 SKILES

City or town, state or country, and ZIP + 4
DALLAS, TX 75204

D Employer identification number
75-1085555

E Telephone number
(214) 823-5700

F Accounting method Cash Accrual
 Other (specify) **▶**

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

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No

G Website: **WWW.THESENIORSOURCE.ORG**

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

H(b) If "Yes," enter number of affiliates **▶**

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.

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number **▶**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **▶ 4,242,085.**

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

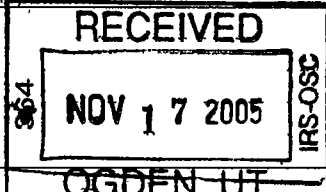
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, and similar amounts received:				
	a	Direct public support	1a	956,799.		
	b	Indirect public support	1b	509,882.		
	c	Government contributions (grants)	1c	1,519,093.		
	d	Total (add lines 1a through 1c) (cash \$ <u>2,985,774.</u> noncash \$ _____)	1d		2,985,774.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		47,794.	
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		9,669.	
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	6c	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		
		1,110,932.	8a			
		1,109,621.	8b			
		1,311.	8c			
8d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	STMT 2	1,311.		
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a	Gross revenue (not including \$ <u>558,051.</u> of contributions reported on line 1a)	9a	86,013.			
b	Less: direct expenses other than fundraising expenses	9b	87,754.			
9c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	SEE STATEMENT 3	<1,741.>		
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		1,903.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		3,044,710.		
Expenses	13	Program services (from line 44, column (B))	13		2,724,650.	
	14	Management and general (from line 44, column (C))	14		208,572.	
	15	Fundraising (from line 44, column (D))	15		103,165.	
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17		3,036,387.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		8,323.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,071,213.	
	20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 4	<2,250.>	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,077,286.	

REVENUE

EXPENSES

NET ASSETS



613-15 19

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. Page 2

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 \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	388,533.	308,527.	66,886.	13,120.
26	Other salaries and wages	1,228,129.	1,177,220.		50,909.
27	Pension plan contributions	104,822.	96,555.	5,117.	3,150.
28	Other employee benefits	154,633.	147,125.	4,599.	2,909.
29	Payroll taxes	136,308.	125,807.	5,027.	5,474.
30	Professional fundraising fees				
31	Accounting fees	12,500.		12,500.	
32	Legal fees				
33	Supplies	141,083.	131,235.	7,091.	2,757.
34	Telephone	21,769.	16,145.	5,168.	456.
35	Postage and shipping	28,697.	25,655.	2,935.	107.
36	Occupancy	20,774.	15,570.	3,474.	1,730.
37	Equipment rental and maintenance				
38	Printing and publications	29,636.	26,716.	2,198.	722.
39	Travel				
40	Conferences, conventions, and meetings	22,731.	16,356.	5,810.	565.
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	53,769.		53,769.	
43	Other expenses not covered above (itemize):				
a					
b					
c					
d					
e	SEE STATEMENT 5	693,003.	637,739.	33,998.	21,266.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	3,036,387.	2,724,650.	208,572.	103,165.

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

What is the organization's primary exempt purpose? SEE STATEMENT 6		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
a	SEE STATEMENT 7 (Grants and allocations \$ _____)	559,625.
b	SEE STATEMENT 8 (Grants and allocations \$ _____)	453,153.
c	SEE STATEMENT 9 (Grants and allocations \$ _____)	380,950.
d	SEE STATEMENT 10 (Grants and allocations \$ _____)	324,891.
e	Other program services (attach schedule) STATEMENT 11 (Grants and allocations \$ _____)	1,006,031.
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,724,650.

Part IV Balance Sheets

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	1,118.	45 1,799.
	46 Savings and temporary cash investments	297,432.	46 170,988.
	47 a Accounts receivable	47a 8,314.	
	b Less: allowance for doubtful accounts	47b	47c 8,314.
	48 a Pledges receivable	48a 76,250.	
	b Less: allowance for doubtful accounts	48b	48c 76,250.
	49 Grants receivable	60,211.	49 76,333.
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	19,722.	53 24,372.
	54 Investments - securities STMT 12 STMT 13 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	588,805.	54 633,735.
	55 a Investments - land, buildings, and equipment: basis	55a	
	b Less: accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	57a 364,723.		
b Less: accumulated depreciation	57b 253,585.	118,185.	
58 Other assets (describe <input type="checkbox"/>)		58	
59 Total assets (add lines 45 through 58) (must equal line 74)	1,085,473.	59 1,102,929.	
Liabilities	60 Accounts payable and accrued expenses	14,260.	60 12,820.
	61 Grants payable		61
	62 Deferred revenue		62 12,823.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe <input type="checkbox"/>)		65
66 Total liabilities (add lines 60 through 65)	14,260.	66 25,643.	
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	967,704.	67 935,606.
	68 Temporarily restricted	103,509.	68 141,680.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	1,071,213.	73 1,077,286.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	1,085,473.	74 1,102,929.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 76 through 91 regarding organizational activities, expenditures, and governance.

Located at 1215 SKILES, DALLAS, TX ZIP + 4 75204

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

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) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <u>FOOD/SUPPLY REIMBURSEMT</u>					26,635.
b <u>HOLIDAY MAILING</u>					4,875.
c <u>FGP/SCP SITE REIMBURSE.</u>					8,398.
d <u>TRIBUTES/HONORARIUMS</u>					1,970.
e <u>PROGRAM FEES</u>					5,916.
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	9,669.	
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			18	1,311.	
101 Net income or (loss) from special events			01	<1,741.>	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>COKE/COFFEE MONIES</u>			03	94.	
b <u>MISCELLANEOUS</u>			01	1,809.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		11,142.	47,794.
105 Total (add line 104, columns (B), (D), and (E))					58,936.

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).
93	EACH OF THE REPORTED ACTIVITIES CONTRIBUTED TO THE ORGANIZATION'S
103	ABILITY TO PROVIDE INCREASED PROGRAMMING AND SUPPORT TO THE SENIOR
	CITIZENS OF DALLAS AND SURROUNDING AREAS, THUS HELPING TO IMPROVE THE
	QUALITY OF LIFE OF INCREASED NUMBERS OF OLDER ADULTS.

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
N/A	%			
	%			
	%			
	%			

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

I am preparing this return on behalf of the organization, and to the best of my knowledge and belief, it is true, correct, and complete, and I am not aware of any information of which preparer has any knowledge.

11-14-05 te **Linus Wight** Chairman of the BOARD OF DIRECTORS
Type or print name and title.

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

2004

Supplementary Information-(See separate instructions.)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

SENIOR CITIZENS OF GREATER DALLAS, INC.

Employer identification number

75 1085555

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
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶

0

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.	1	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.)		
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)? SEE PART V, FORM 990	2d	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 a 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 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
N/A	

- 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.)	2,691,014.	2,763,148.	2,716,618.	2,745,668.	10,916,448.
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	55,304.	82,678.	75,558.	79,341.	292,881.
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	8,318.	25,618.	32,994.	77,628.	144,558.
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	16,420.		SEE STATEMENT 17		16,420.
23 Total of lines 15 through 22	2,771,056.	2,871,444.	2,825,170.	2,902,637.	11,370,307.
24 Line 23 minus line 17	2,715,752.	2,788,766.	2,749,612.	2,823,296.	11,077,426.
25 Enter 1% of line 23	27,711.	28,714.	28,252.	29,026.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 221,549.
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 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 11,077,426.
d Add: Amounts from column (e) for lines: 18 144,558. 19 _____ 22 16,420. 26b _____					26d 160,978.
e Public support (line 26c minus line 26d total)					26e 10,916,448.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.5468%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A	(2003)	(2002)	(2001)	(2000)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A	(2003)	(2002)	(2001)	(2000)	
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

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.)

N/A

(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?	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? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____	32d	
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? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____	33h	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? 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.) N/A
 (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 (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
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		
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				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

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.) N/A

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.)			0.

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

FOOTNOTES

STATEMENT 1

SCHEDULE - PART II, LINE 42 AND PART IV, LINE 57

AUTO	121,452.
FURNITURE AND FIXTURES	243,271.
TOTAL PROPERTY AND EQUIPMENT	364,723.
ACCUMULATED DEPRECIATION	253,585.
NET BOOK VALUE - PROPERTY AND EQUIPMENT	111,138.

ALL PROPERTY AND EQUIPMENT IS STATED AT COST AND IS DEPRECIATED USING THE STRAIGHT-LINE METHOD OVER THE ASSETS USEFULL LIFE, WHICH IS FIVE YEARS FOR AUTOS AND FURNITURE AND FIXTURES.

FORM 990 **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES** **STATEMENT 2**

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SALES OF TREASURY BILLS	1,110,000.	1,108,700.	0.	1,300.
921 SHARES PROCTOR AND GAMBLE	932.	921.	0.	11.
TO FORM 990, PART I, LINE 8	1,110,932.	1,109,621.	0.	1,311.

FORM 990 **SPECIAL EVENTS AND ACTIVITIES** **STATEMENT 3**

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPIRIT OF GENERATIONS LUNCHEON	532,230.	488,901.	43,329.	76,815.	<33,486.>
SAGE SOCIETY	88,750.	69,150.	19,600.	10,939.	8,661.
GOLF TOURNAMENT	23,084.		23,084.		23,084.
TO FM 990, PART I, LINE 9	644,064.	558,051.	86,013.	87,754.	<1,741.>

FORM 990 **OTHER CHANGES IN NET ASSETS OR FUND BALANCES** **STATEMENT 4**

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	<2,250.>
TOTAL TO FORM 990, PART I, LINE 20	<2,250.>

FORM 990 **OTHER EXPENSES** **STATEMENT 5**

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
STIPEND	485,159.	485,159.		
CONTRACT SERVICES	22,286.	3,168.	1,537.	17,581.
SUBSCRIPTIONS	1,775.	464.	1,193.	118.
LIAB INS & FID BOND	19,828.	15,788.	4,040.	0.
MEMBERSHIPS	3,687.	1,850.	1,437.	400.

VOLUNTEER RECOGNITION	19,239.	18,014.	1,225.	0.
VOLUNTEER TRAVEL	53,210.	53,210.		
JANITORIAL	10,560.	7,920.	1,760.	880.
TRANSPORTATION COSTS	22,754.	20,507.	2,154.	93.
RECRUITING	664.	0.	664.	0.
BANK CHARGES	6,099.	241.	5,673.	185.
MAINTENANCE AGREEMENTS	12,985.	9,711.	2,195.	1,079.
WEB SITE	1,783.	1,341.	293.	149.
HOUSEHOLD SUPPLIES	1,678.	1,260.	278.	140.
INSURANCE	16,785.	10,597.	5,547.	641.
VEHICLE EXPENSE	12,736.	8,509.	4,227.	0.
SOFTWARE	1,775.		1,775.	
TOTAL TO FM 990, LN 43	693,003.	637,739.	33,998.	21,266.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 6
PART III

EXPLANATION

TO PROVIDE PROGRAMS THAT IMPROVE THE QUALITY OF LIFE OF OLDER ADULTS IN THE GREATER DALLAS AREA.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

7

DESCRIPTION OF PROGRAM SERVICE ONE

FOSTER GRANDPARENT PROGRAM (FGP) -
 135 LOW-INCOME GRANDPARENTS HAD MEANINGFUL ROLES & FINANCIAL
 SUPPORT WHILE 2,460 CHILDREN WITH SPECIAL NEEDS RECEIVED ONE
 TO ONE SUPPORT & CARE FOR 101,083 HRS DURING THE YEAR

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	_____	_____
	=====	=====
		559,625.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

8

DESCRIPTION OF PROGRAM SERVICE TWO

SENIOR COMPANION PROGRAM (SCP) -
 115 SR COMPANIONS RECD FIN'L ASSISTANCE, SOCIAL SUPPORT & AN
 IMPORTANT SOCIETAL ROLE WHILE PROVIDING HOME CARE (10-40 HRS/
 WK) TO 134 FRAIL ELDERLY ALLOWING THEM TO STAY IN THEIR HOMES

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	_____	_____
	=====	=====
		453,153.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 9

DESCRIPTION OF PROGRAM SERVICE THREE

RETIRED & SENIOR VOLUNTEER PROGRAM (RSVP) -
 2,884 VOLUNTEERS' MENTAL & PHYSICAL HEALTH WAS IMPROVED WHILE
 230 NONPROFIT AGENCIES RECD 440,087 HRS OF VOLUNTEER SVC IN
 ESL CLASSES, FOOD PANTRIES & ENCOURAGING CHILD IMMUNIZATIONS

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C		380,950.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 10

DESCRIPTION OF PROGRAM SERVICE FOUR

NURSING HOME OMBUDSMAN PROGRAM -74 VOLUNTEER OMBUDSMEN & 2509
 FRIENDLY VISITORS MADE 64,080 CONTACTS WITH 18,809 NURSING
 HOME & ASSISTED LIVING RESIDENTS IN 57 NURSING HOMES & 135
 ASSISTED LIVING FACILITIES. THEY HANDLED 8442 COMPLAINTS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D		324,891.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 11

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
"OFF OUR ROCKERS" INTERGENERATIONAL PROGRAM		169,356.
ELDER SUPPORT PROGRAM		224,285.
GUARDIANSHIP AND MONEY MANAGEMENT PROGRAM		253,851.
ADVOCACY GROUP FOR THE ELDERLY (AGE)		150,588.
SENIOR EMPLOYMENT SOURCE		207,951.
TOTAL TO FORM 990, PART III, LINE E		1,006,031.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 12

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
MUTUAL FUNDS	FMV			166,287.	166,287.
TO FORM 990, LINE 54, COL B				166,287.	166,287.

FORM 990 GOVERNMENT SECURITIES STATEMENT 13

DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
TREASURY NOTES & U.S. GOVT SECURITIES	FMV	467,448.		467,448.
TOTAL TO FORM 990, LINE 54, COL B		467,448.		467,448.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 14

DESCRIPTION	AMOUNT
EXPENSES RELATED TO SPECIAL EVENTS	87,754.
TOTAL TO FORM 990, PART IV-A	87,754.

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 15

DESCRIPTION	AMOUNT
EXPENSES RELATED TO SPECIAL EVENTS	87,754.
TOTAL TO FORM 990, PART IV-B	87,754.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 16

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MOLLY H. BOGEN 1215 SKILES DALLAS, TX 75204	EXEC DIRECTOR 40 HOURS	131,200.	16,830.	1,500.
BONNIE C. DICKINSON 1215 SKILES DALLAS, TX 75204	ASSOC. EXEC DIRECTOR 40 HOURS	72,292.	11,468.	0.
SANDRA J. LANDERS 1215 SKILES DALLAS, TX 75204	FINANCE DIRECTOR 40 HOURS	69,791.	12,919.	0.
BETTINA C. LANG 1215 SKILES DALLAS, TX 75204	DIRECTOR OF PROGRAMS 40 HOURS	64,083.	6,085.	0.
CARIN A. HUGHES 1215 SKILES DALLAS, TX 75204	DIRECTOR OF COMMUNICATIONS 40 HOURS	51,167.	4,858.	0.
BECKY MUNOZ-DIAZ 1215 SKILES DALLAS, TX 75204	PRESIDENT 0-5	0.	0.	0.
V. ALVIN WADE 1215 SKILES DALLAS, TX 75204	PAST-PRESIDENT 0-5	0.	0.	0.
LINUS WRIGHT 1215 SKILES DALLAS, TX 75204	PRESIDENT-ELECT 0-5	0.	0.	0.
JOHN SOLANA 1215 SKILES DALLAS, TX 75204	TREASURER 0-5	0.	0.	0.
ROBERT HALLAM 1215 SKILES DALLAS, TX 75204	CORPORATE SECRETARY 0-5	0.	0.	0.
JOE ATKINS 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.

GREGG BALLEW 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
CORDELIA BOONE 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
GARRETT BOONE 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BECKY BRIGHT 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BILL BROWN 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
R. STUART BUSH 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
EDWIN CASH 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
ELENA CORTEZ 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
KANTILAL DESAI 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
RICHARD W. DOUGLAS 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
DALE FULLER, M.D. 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
SUZY GEKIERE 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
JAMES A. GETTMAN 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.

PEGGY GLENN-SUMMITT 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
COREY R. HILL 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
SALLY HOGLUND 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
SUZANNE JOHNSTON 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
WILLIS C. MADDREY, M.D. 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
MARTY MARKS 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
DAVID B. MILLER 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
DARYL A. MULLIN 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
TERESA HAGGERTY PARRAVANO 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
ANN POMYKAL 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
MAX POST 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
WARREN L. RUTHERFORD 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
CARLOS H. SALAZAR 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.

NAOMI SANIT 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
SUSAN STAHL 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
MOLLY SULLIVAN 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
DEBORAH ETHRIDGE SUTTON 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BEVERLY TOBIAN 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
POLLY TRAPP 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
MAE FRANCES TRAYLOR 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BARBARA LORD WATKINS 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
JON B. WHITE 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BERNARD WILLIAMS, JR. 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
JO LYNN WILLIAMS 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.
BARBARA YOUNT 1215 SKILES DALLAS, TX 75204	DIRECTOR 0-5	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V

388,533.	52,160.	1,500.
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SCHEDULE A OTHER INCOME STATEMENT 17

DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
MISCELLANEOUS REVENUE	16,420.	0.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	16,420.	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).
- 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)

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers) However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization	Employer identification number
	SENIOR CITIZENS OF GREATER DALLAS, INC.	75-1085555
	Number, street, and room or suite no. If a P.O. box, see instructions 1215 SKILES	
File by the due date for filing your return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DALLAS, TX 75204	

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 |

- The books are in the care of ▶ **SANDRA LANDERS**
Telephone No. ▶ **(214) 823-5700** FAX No. ▶ _____
- 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-months for a **Form 990-T corporation**) extension of time until **NOVEMBER 15, 2005** to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or

▶ tax year beginning **APR 1, 2004**, and ending **MAR 31, 2005**.

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 \$ **N/A**

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

(DI)

The Senior Source, Senior Citizens of Greater Dallas

**~~Proposed Bylaws Change~~
February 2005**

This amendment will be considered and voted upon at the February Board of Directors meeting.

Current Bylaws

Article IV, Section 1. Officers

The officers of the Board shall be President, Vice President (President-elect), Past President, Secretary, Treasurer and Planning Committee Chairman.

Proposed change in Article IV, Section 1.

The officers of the Board shall be Chairman of the Board, Chairman-elect of the Board, Past Chairman of the Board, Corporate Secretary, Treasurer and Planning Committee Chairman.

It is proposed that these changes be made throughout the Bylaws.