SCANNED MAR 1 7 20

Form **990**

Department of the Treasury

Internal Revenue Service

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)

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

2007
Open to Public
Inspection

| Α | For the 2007 calendar year, or tax year beginning JUL 01, 2007, and ending | JUN 30,2008 |
|------------|---|--|
| 8 | Check if applicable Please C Name of organization, number and street, city, town, state, and ZIP code D Emp | loyer identification number |
| | Address change use IRS label or | 23-1892383 |
| | Name change print or type FRIENDSHIP COMMUNITY E Tele | phone number |
| | Initial return See | 717-656-2466 |
| | Termination Specific Instruc- 1149 EAST OREGON ROAD F Acct | g. method: Cash X Accrual |
| | I 4 | Other (specify) ▶ |
| П | Application pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A H(3) to the application | oplicable to section 527 organizations |
| | (Form 990 or 990-EZ). Charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). | return for affiliates? Yes X No |
| G | Website: ► FRIENDSHIPCOMMUNITY.NET H(b) If "Yes," enter n | umber of affiliates |
| J | Organization type (check only one) ► X 501(c)(3) ◀ (Insert no) 4947(a)(1) Or 527 H(c) Are all affiliates (If *No.* attach a | included? Yes No |
| K | Uneck here \(\) If the organization is not a 509(a)(3) supporting organization and its \(\) | |
| | gross receipts are normallynot more than \$25,000. A return is not required, but if the organization covers the second organi | vered by a group ruling? Yes X No |
| | organization chooses to file a return, be sure to file a complete return | ption Number ▶ |
| | M Check ▶ | X if the organization is not required |
| L | Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 9, 289, 717. to attach Sci | h B (Form 990, 990-EZ, or 990-PF) |
| Ŀ | | e instructions) |
| | 1 Contributions, gifts, grants, and similar amounts received | |
| | a Contributions to donor advised funds | |
| | b Direct public support (not included on line 1a) . 1b 607,053. | |
| | c Indirect public support (not included on line 1a) | |
| | d Government contributions (grants) (not included on line 1a) . 1d 6,637,121. | |
| | e Total (add lines 1a through 1d) (cash \$ 7,244,174. noncash \$) | 1e 7,244,174. |
| | 2 Program service revenue including government fees and contracts (from Part VII, line 93). | 2 1,105,754. |
| | 3 Membership dues and assessments | 3 |
| | 4 Interest on savings and temporarycash investments | 4 4,705. |
| | 5 Dividends and interest from securities | 5 6,914. |
| | 6 a Gross rents | |
| | b Less: rental expenses | |
| | c Net rental income or (loss) Subtract line 6b fom line 6a | 6c |
| nue | 7 Other investment income (describe ► UNREALIZED LOS) | 7 (12,204.) |
| Revenue | 8 a Gross amount from sales of assets other (A) Securities (B) Other | |
| æ | than inventory | |
| | b Less cost or other basis & sales expenses. 8b 416,948. | |
| | c Gain or (loss) (attach schedule) 8c 420,387. | |
| | d Net gain or (loss). Combine line 8c, columns (A) and (B) | 8d 420,387. |
| | 9 Special events and activities (attach schedule) Ifany amount is fromgaming, check here ▶ ☐ | |
| | a Gross revenue (not including \$ of | |
| | contributions reported on line 1b) 9a 71, 982. | |
| | b Less direct expenses other than fundraising expenses 9b 23, 613. | |
| | c Net income or (loss) from special events. Subtract line 9b from line 9a | 9c 48,369. |
| | 10 a Gross sales of inventory, less returns and allowances 10a 14,747. | |
| | b Less: cost of goods sold 10b 6,187. | 0.550 |
| | c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b fom line 10a. | 10c 8,560. |
| | 11 Other revenue (from Part VII, line 103) | 11 16,310. |
| | 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 | 8,842,969. |
| S | 13 Program services (from line 44, column (B)) RECEIVED | 7,228,223. |
| nse | 14 Management and general (from line 44, column (C)) | 14 894,266. |
| Expenses | 15 Fundraising (from line 44, column (D)) | 15 138,492. |
| Ω | 1001 1001 | 16 |
| <u>~</u> | | 8,260,981. |
| Net Assets | 18 Excess or (deficit) for the year Subtract line 17 from line 12. OGDEN UT | <u>18</u> <u>581,988.</u> |
| As | 19 Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 1,702,708. |
| ét | 20 Other changes in net assets or find balances (attach explanation). | 20 |
| _ | 21 Net assets or fund balances at end of year Combine lines 18, 19, and 20 | 21 2,284,696. |

Part II Statement of Functional Expenses

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

| | Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I. | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|----------|--|-------|-----------|----------------------|---|-----------------|
| | Grants paid from donor advised funds (attach schedule) | | ÷. | | | |
| | (cash \$ noncash \$) | | | | | |
| | If this amount includes foreign grants, check here | 22a | | | | |
| | Other grants and allocations (attach schedule) | | | | | |
| | (cash \$) | | | | | |
| | If this amount includes foreign grants, check here | 22b | | | | |
| 23 | Specific assistance to individuals (attach | | | | | |
| | schedule) | 23 | | | | |
| 24 | Benefits paid to or for members (attach schedule) | 24 | | | | |
| 25a | Compensation of current officers, directors, key | | | | | |
| | employees, etc listed in Part V-A | 25a | 377353. | 85490. | 250567. | 41296. |
| b | Compensation of former officers, directors, key | | | | | |
| | employees, etc. listed in Part V-B | 25b | Ì | ' | | |
| С | Compensation and other distributions, not included | | | | | |
| | above, to disqualified persons (as defined under | | | | | |
| | section 4958(f)(1)) and persons described in section | | | | | |
| | 4958(c)(3)(B) | 25c | | | | |
| 26 | Salaries and wages of employees not included on | | | | | |
| | lines 25a, b, and c | 26 | 3973484. | 3723916. | 228955. | 20613. |
| 27 | Pension plan contributions not included on lines | | | | | |
| | 25a, b, and c | 27 | 121157. | 91895. | 25711. | 3551. |
| 28 | Employee benefits not included on lines 25a - 27 | 28 | 977763. | 876531. | 83816. | 17416. |
| 29 | Payroll taxes | 29 | 351308. | 308172. | 38106. | 5030. |
| 30 | Professional fundraising fees | 30 | | | | |
| 31 | Accounting fees | 31 | 29150. | 29150. | | |
| 32 | Legal fees. | 32 | 674. | | 674. | |
| 33 | Supplies . | 33 | 138704. | 124360. | 12756. | 1588. |
| 34 | Telephone | 34 | 58589. | 51324. | 6826. | 439. |
| 35 | Postage and shipping | 35 | 14245. | 750. | 11488. | 2007. |
| 36 | Occupancy . | 36 | 467691. | 428530. | 38305. | 856. |
| 37 | Equipment rental and maintenance | 37 | 33375. | 7543. | 25293. | 539. |
| 38 | Printing and publications. | 38 | 45826. | 2579. | 24501. | 18746. |
| 39 | Travel | 39 | 174652. | 168450. | 4835. | 1367. |
| 40 | Conferences, conventions, and meetings. | 40 | 26797. | 2094. | 3541. | 21162. |
| 41 | Interest | 41 | 163333. | 150457. | 12876. | |
| | Depreciation, depletion, etc. (attach schedule) | 42 | 385854. | 360672. | 24840. | 342. |
| | Other expenses not covered above (itemize) | | | | | |
| а | SEE STMT | 43a | 921026 | 816310 | 101176 | 3540 |
| b | | 43b | | | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | |
| C | | 43c | | | | |
| d | | 43d | | | | |
| <u> </u> | | 43e | | | | |
| f | | 43f | | | | |
| | | 43g | | | | |
| g 44 | Total functional expenses. Add lines 22a through | 8 | | | | |
| . • | 43g. (Organizations completing columns | | | | | |
| | (B) - (D), carry these totals to lines 13 - 15) | 44 | 8260981. | 7228223. | 894266. | 138492. |
| | Costs. Check ► If you are following SOP 98-2 | 1 4 1 | | | | |

| COMMONITY 23-18 | 92383 | Page |
|--|-------------|----------|
| Part III Statement of Program Service Accomplishments (See the instructions.) | | |
| Form 990 is available for public inspection and, for some people, serves as the primaryor sole source of information about a parti | cular organ | ıızatıon |
| How the public perceives an organization in such cases maybe determined by the information presented on its return. Therefore, | - | |
| sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments | | |
| What is the organization's primary exempt purpose? | Program | Service |

| All d sen | at is the organization's primary exempt purpose? proganizations must describe their exempt purpose achievements in a clear and concise manner. State the number ofclients wed, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and | Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts but |
|--------------|--|---|
| | 7(a)(1) nonexempt charitable trusts must also enter the amount ofgrants and allocations to others) INTERMEDIATE CARE FACILITIES - SEE ATTACHED | optional for others) |
| b | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ COMMUNITY LIVING ARRANGEMENTS - SEE ATTACHED | 2083160. |
| | | |
| С | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ FRIENDSHIP MINISTRIES - SEE ATTACHED | 4220276. |
| d | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ | 924787. |
| e | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ Other program services (attach schedule) | |
| f | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶ | 7228223. |

| Where required, attached schedules and amounts within the description Beginning of year End of year | art I | | Balance Sheets (See the instructions) | | | · · · · · · · · · · · · · · · · · · · | | · · |
|---|----------------|-----|--|---|-------------------------|---------------------------------------|-----------------|------------------------|
| 45 Cash - non-interest-beaung 78, 133. 45 2,101. | Not | | | rthin the | description | | | , |
| 46 Savings and temporary cash investments. 47a Accounts receivable Less allowance for doubtful accounts 47b | | | | | | | | |
| 47a Accounts receivable b Less allowence for doubtful accounts 47b 48a Pledges receivable b Less allowence for doubtful accounts 48b 48a 35,000. 48b 50a Receivables for doubtful accounts 49 Grants receivable 50a Receivables for outered and timer officers, directors, trustees, and key enployees (attach schedule) b Receivables from other dequalified persons (as defined under section 4988(ft)) and persons described in esction 4986(g)(3) (attach schedule) 51a Other notes and loans receivable (attach schedule) 51b 51c | | ì | | • • | | | | |
| b Less allowance for doubtful accounts 48a Pledges receivable 48b Less allowance for doubtful accounts 48c 35,000. 50a 806,462. 50a | | 46 | Savings and temporary cash investments. | 130,047. | 46 | 94,061. | | |
| b Less allowance for doubtful accounts 48a Pledges receivable 48b Less allowance for doubtful accounts 48c 35,000. 50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) 51a Cher notes and loans receivable (attach schedule) 51a Cher notes and loans receivable (attach schedule) 51a Cher notes and loans receivable (attach schedule) 51b Less: allowance for doubtful accounts 51b 51c | | 470 | Accounts recoverble | 470 | 20 006 | | | |
| 48a Pledges receivable 48b 35,000 48c | | 1 | | - | 20,906. | 25 770 | 47. | 20 006 |
| b Less allowance for doubtful accounts 49 Grants receivable 50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) b Receivables from designalified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(8) (attach schedule) 51a Other notes and loans receivable (attach schedule) b Less allowance for doubtful accounts 51 Inventiones for sale or use 52 Inventiones for sale or use 53 Prepaid expenses and deferred drarges 54 Investments - publicytraded securities 54 Investments - other securities (attach schedule) 55 Investments - other securities (attach schedule) 55 Investments - other (attach schedule) 56 Investments - other (attach schedule) 57 Land, buildings, and equipment basis b Less accumulated depreciation (attach schedule) 58 Investments - other (attach schedule) 57 Land, buildings, and equipment basis b Less accumulated depreciation (attach schedule) 58 Other assets, including program-related investments (describe ➤ FINANCE COST NET OF AMOR) 59 Total assets (must equal line 74) Add lines 45 through 58 50 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from fifters, directors, trustees, and keyemployees (attach schedule) 63 Total institutions and line 73 and 74. 64 Total pitabilities, Add lines 50 through 65 65 Total liabilities, Add lines 50 through 65 67 Total pitabilities, Add lines 50 through 65 68 Temporarily restricted 1, 523, 106. 67 Corplata stock, trust principal, or current trids 70 Total and assets from the assest finus tequal line 73 71 Total and assets for fund balances. Add lines 66 and 73 72 Total and assets for fund balances. Add lines 67 71 Total and assets for fund balances. Add lines 67 72 Total and assets for fund balances. Add lines 66 and 73 73 Total and assets for fund balances. Add lines 66 and 73 73 Total and assets for fund balances. Add lines 66 and 73 74 Total field balances. Add lines 66 and 73 74 Total field season | | 6 | Less allowance for doubtiful accounts . | 4/0 | | 25,779. | 4/C | 20,906. |
| b Less allowance for doubtful accounts 48b 686 , 0.99 49 806 , 462 | | 482 | Pledges receivable | 192 | 35 000 | | | |
| 9 Grants receivable 50a Receivable 50a 50a 50a | | 1 | - | - | 33,000. | | 180 | 35 000 |
| 50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) 50a | | 1 | | 400 | | 686 099 | + | |
| employees (attach schedule) b Receivables from of the disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(8) (attach schedule) 51a | | | · · · · · · · · · · · · · · · · · · · | tors tri | istees and key | | 13 | 000, 102. |
| b Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(p(3))(8) (attach schedule) | | " | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | soloco, una koy | | 50a | |
| and persons described in section 4958(c)(3)(8) (attach schedule) | | ь | | efined u | nder section 4958(f)(1) | | | |
| State Stat | | | | | | | 50b | |
| b Less: allowance for doubtful accounts 51b | | 51a | | | | | 1 | |
| 52 Inventones for sale or use | | | schedule) | 51a | | | | |
| Stall Investments - publicly-traded securities Cost FMV 204,877. 54a 199,586. | S | b | Less: allowance for doubtful accounts | 51b | | | 51c | |
| Stall Investments - publicly traded securities | set | 52 | Inventories for sale or use | 1 | 7 | | | |
| 54a Investments - publiclytraded securities | As | 53 | Prepaid expenses and deferred charges | | | 20,879. | 53 | 35,606. |
| S5a Investments - land, buildings, and equipment basis S5a | | 54a | Investments - publicly-traded securities | • | Cost X FMV | 204,877. | 54a | 199,586. |
| Equipment basis Less accumulated depreciation (attach schedule) S5b S5c | | b | Investments - other securities (attach schedule) | | Cost FMV | | 54b | |
| b Less accumulated depreciation (attach schedule) 55b 55c 56 | | 55a | Investments - land, buildings, and | | | | | |
| Schedule | | | equipment basis | 55a | | | | |
| 56 Investments - other (attach schedule) 57a 29,504,550. | | b | Less accumulated depreciation (attach | | | | | |
| 57a Land, buildings, and equipment, basis 57a 9,504,550. b Less accumulated depreciation (attach schedule) 57b 3,736,209. 4,578,920. 57c 5,768,341. 58 Other assets, including program-related investments (describe ► FINANCE COST NET OF AMOR) 22,423. 58 32,516. 59 Total assets (must equal line 74) Add lines 45 through 58. 5,827,157. 59 7,094,579. 60 Accounts payable and accrued expenses 490,032. 60 486,393. 61 Grants payable 62 Deferred revenue 497,139. 62 409,898. 62 Deferred revenue 63 409,898. 63 Interval of the result of the schedule 64 50 50 64 Tax-exempt bond liabilities (attach schedule) 65 Other liabilities. Add lines 60 through 65 66 50 50 50 50 50 66 Total liabilities. Add lines 60 through 65 70 70 70 67 Total liabilities (attach schedule) 70 70 70 68 Temporarily restricted 1,523,106. 67 2,113,067. 69 Permanently restricted 1,523,106. 67 2,113,067. 69 Permanently restricted 1,523,106. 67 2,113,067. 60 Total liabilities (attach schedule) 70 70 70 70 Capital stock, trust principal, or current finds 70 70 70 70 70 70 70 7 | | | · | 55b | | | 55c | |
| b Less accumulated depreciation (attach schedule) 57b 3,736,209 4,578,920 57c 5,768,341 58 Other assets, including program-related investments (describe ► FINANCE COST NET OF AMOR) 22,423 58 32,516 59 Total assets (must equal line 74) Add lines 45 through 58 5,827,157 59 7,094,579 60 486,393 61 61 62 Deferred revenue 497,139 62 409,898 63 63 64 Tax-exempt bond liabilities (attach schedule) 63 64 Tax-exempt bond liabilities (attach schedule) 64 65 Other liabilities (describe ► SECURITY DEPOSITS 21,508 65 22,125 65 Total liabilities Add lines 60 through 65 4,124,449 66 4,809,883 67 Unrestricted 49,555 69 52,568 67 67 Capital stock, trust principal, or current finds 70 Capital stock, trust principal, or current finds 70 Capital stock, trust principal, or current finds 71 72 Retained earnings, endowment, accumulated income, or other funds 71 72 70 74 7,094,579 74 7,094,579 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 74 7,094,579 75 75 75 75 75 75 75 | | 1 | | 1 1 | | 80,000. | 56 | 100,000. |
| Schedule) | | 1 | | 57a | 9,504,550. | | | |
| Section Name | | þ | · · · | | | | | |
| Section FINANCE COST NET OF AMOR 22,423. 58 32,516. | | | • | | 3,736,209. | 4,578,920. | 57c | 5,768,341. |
| Total assets (must equal line 74) Add lines 45 through 58 5,827,157 59 7,094,579 | | 58 | | | 40D | 00 400 | | 20 516 |
| 60 Accounts payable and accrued expenses | | 50 | | | | | 1 | |
| September Comparizations that follow SFAS 117, check here through 69 and lines 73 and 74. Capital stock, trust principal, or current finds Capital stock, trust principal, or current finds Capital stock, trust principal, or current finds Total net assets or fund balances. Add lines 67 through 72 (Column (A)must equal line 19 and column (B)must equal line 21 and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fund balances. Add lines 66 and 73 Capital liabilities and net assets/fun | | 1 | | ougn 5 | <u>.</u> . | | 1 | |
| Comparizations that follow SFAS 117, check here through 69 and lines 73 and 74. Copical stock, trust principal, or current finds Capital stock, trust principal, or current finds Capital stock, trust principal, or current finds Capital stock, trust principal, or current finds Total net assets of fund balances. Add lines 67 through 72 (Column (A)must equal line 19 and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust equal lines 19 and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Column (A)must equal lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock trust principal and column (B)must equal line 21 Total liabilities and net assets/fund balances. Add lines 66 and 73 Capital stock and the control of the c | | ł | , | | | 490,032. | 1 | 486,393. |
| Second Composition Compo | | 1 | • • | | | 197 139 | + | 100 808 |
| Schedule 63 64a 7ax-exempt bond liabilities (attach schedule 64a 7ax-exempt bond liabilities (attach schedule 65 0ther liabilities (describe ► SECURITY DEPOSITS 21,508 65 22,125 22,125 22,125 24,125 24,124 249 266 4,809,883 24,124,449 266 4,809,883 266 266 267 | S _a | 1 | | nnlovee | s (attach | 457,135. | 02 | 400,090. |
| b Mortgages and other notes payable (attach schedule). 65 Other liabilities (describe ► SECURITY DEPOSITS) 21,508. 65 22,125. 66 Total liabilities. Add lines 60 through 65 | Ħ | " | | ipioyee | 3 (attach | | 63 | |
| b Mortgages and other notes payable (attach schedule). 65 Other liabilities (describe ► SECURITY DEPOSITS) 21,508. 65 22,125. 66 Total liabilities. Add lines 60 through 65 | dei | 64a | • | | | | | |
| 65 Other liabilities (describe SECURITY DEPOSITS) 21,508. 65 22,125. 66 Total liabilities. Add lines 60 through 65 | _ | 1 | • | ıle). | _ | 3,115,770. | - | 3,891,467. |
| G6 Total liabilities. Add lines 60 through 65 4, 809, 883. Organizations that follow SFAS 117, check here through 69 and lines 73 and 74. G7 Unrestricted 1, 523, 106. 67 2, 113, 067. G8 Temporarily restricted 130, 047. 68 119, 061. G9 Permanently restricted 49, 555. 69 52, 568. Organizations that do not follow SFAS 117, check here 1 and complete lines 70 through 74 T0 Capital stock, trust principal, or current finds 70 Paid-in or capital surplus, or land, building, and equipment find 71 Retained earnings, endowment, accumulated income, or other finds 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1, 702, 708. 73 2, 284, 696. Total liabilities and net assets/fund balances.Add lines 66 and 73 5, 827, 157. 74 7, 094, 579. | | I | · · · | | ITS) | | -i - | |
| Organizations that follow SFAS 117, check here through 69 and lines 73 and 74. 67 Unrestricted 1,523,106. 67 2,113,067. 68 Temporarily restricted 130,047. 68 119,061. 69 Permanently restricted 49,555. 69 52,568. Organizations that do not follow SFAS 117, check here 1 and complete lines 70 through 74 70 Capital stock, trust principal, or current finds 70 Paid-in or capital surplus, or land, building, and equipment find 71 Retained earnings, endowment, accumulated income, or other finds 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | | | | | | | | |
| through 69 and lines 73 and 74. 70 Capital stock, trust principal, or current finds 71 Paid-in or capital surplus, or land, building, and equipment find 72 Retained earnings, endowment, accumulated income, or other funds 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 71 Total liabilities and net assets/fund balances.Add lines 66 and 73 1, 523, 106. 67 2, 113, 067. 130, 047. 68 119, 061. 149, 555. 69 52, 568. 74 70 Capital stock, trust principal, or current finds 70 Total net assets or fund balances.Add lines 67 through 69or lines 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 75 70 Total liabilities and net assets/fund balances.Add lines 66 and 73 75 76 Total liabilities and net assets/fund balances.Add lines 66 and 73 76 77 7, 094, 579. | | 66 | Total liabilities. Add lines 60 through 65 | | | 4,124,449. | 66 | 4,809,883. |
| 1,523,106. 67 2,113,067. | | Org | anizations that follow SFAS 117, check here | ▶ ⊠ a | and complete lines 67 | | | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | | | through 69 and lines 73 and 74. | | | | | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | ces | 67 | Unrestricted | | | | 67 | 2,113,067. |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | <u>a</u> ŭ | 68 | • | | | | 68 | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 5,827,157. 74 7,094,579. | Ва | | | | | 49,555. | 69 | 52,568. |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | P P | Org | | ere | ▶ ☐ and complete | | | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 5,827,157. 74 7,094,579. | Ē | | • | | | | | 1 |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 5,827,157. 74 7,094,579. | ts o | ì | | | | | | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 5,827,157. 74 7,094,579. | SSe | | | | | | _ | |
| 70 through 72 (Column (A)must equal line 19 and column (B)must equal line 21) 1,702,708. 73 2,284,696. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 5,827,157. 74 7,094,579. | ţ | | | | | | 72 | |
| 74 Total liabilities and net assets/fund balances.Add lines 66 and 73 5,827,157. 74 7,094,579. | Š | 1'3 | | - | | 1 702 700 | 72 | 2 201 606 |
| | | 74 | | | | | | |
| | | 1 | . via. nauminos and net assetsmand paralles.Ac | 10 mics | 00 and 70 | 3,021,131. | · • • | Form 990 (2007) |

BCA

US990\$\$4

| Part IV-A Reconciliation of Revenue per Audited Financial | Statements With Revenu | | turn |
|---|---------------------------|------------|-------------------|
| (See the instructions) | | | |
| Total revenue, gains, and other support per audited fnancial statements | | а | 8849156. |
| b Amounts included on linea but not on Part I, line 12: | | | |
| 1 Net unrealized gains on investments | b1 | | |
| 2 Donated services and use offacilities | b2 | | |
| 3 Recoveries of prior year grants | b3 | | |
| 4 Other (specify) COST OF SALES OF SODA ROUTE | | | |
| | b4 6187 | <u>' .</u> | |
| Add lines b1 through b4 | | b | 6187. |
| c Subtract line b from line a | | С | 8842969. |
| d Amounts included on Part I, line 12, but not on line: | | | |
| 1 Investment expenses not included on Part I, line 6b | d1 | | |
| 2 Other (specify): | | | |
| | d2 | | |
| Add lines d1 and d2 | | d | |
| e Total revenue (Part I, line 12). Add linesc and d | | ▶ e | 8842969. |
| Part IV-B Reconciliation of Expenses per Audited Financia | Statements With Expen | ses per F | Return |
| a Total expenses and losses per audited financial statements | • • | a | 8267168. |
| b Amounts included on linea but not on Part I, line 17: | | | |
| 1 Donated services and use of facilities | b1 | • | |
| 2 Prior year adjustments reported on Part I, line 20 | b2 | | |
| 3 Losses reported on Part I, line 20 | b3 | | |
| 4 Other (specify). COST OF SALES OF SODA ROUTE | | _ | |
| | b4 6187 | · . | |
| Add lines b1 through b4 | | ь | 6187. |
| c Subtract line b from line a | | С | 8260981. |
| d Amounts included on Part I, line 17, but not on line: | | | |
| 1 Investment expenses not included on Part I, line 6b | d1 | | |
| 2 Other (specify) | | _ | |
| | d2 | | |
| Add lines d1 and d2 | | . d | |
| e Total expenses (Part I, line 17) Add linesc and d | | ▶ e | 8260981. |
| Part V-A Current Officers, Directors, Trustees, and Key Em | plovees (List each person | who was ar | officer, director |

trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

| (A) | (B) | | (C) | (D) Contributions to | (E) |
|------------------------|---------------------|--|------------------|---|------------------------|
| Name and address | Title and average h | Title and average hours per week devoted to position | | employee benefit plans & deferred comp plans | Expense account |
| GEORGE STOLTZFUS | | | | , , , | |
| 1149 E OREGON ROAD | CEO | 40 | 81,571. | 4,894. | |
| BRIAN FRENCH | | | | | |
| 1149 E OREGON ROAD | DIR PROGRA | 40 | 52 , 977. | 3,179. | |
| MYRON STONER | | | | | |
| 1149 E OREGON ROAD | DIR FINANC | 40 | 53,212. | 3,193. | |
| IRVIN ENCK | | | | | |
| 1149 E OREGON ROAD | DIR BLDG | 40 | 47,124. | 2,827. | |
| MILT STOLTZFUS | | | | | |
| 1149 E OREGON ROAD | DIR DEVELO | 40 | 48,584. | 2,915. | |
| ROBERT REDCAY | | | | | |
| 1149 E OREGON ROAD | DIR HR | 40 | 46,285. | 2,777. | |
| JENNIFER STRAUSSER | | | | | |
| 1149 E OREGON ROAD | DIR PROGRA | 40 | 47,600. | 2,856. | |
| see attached for Board | _ | | | | |
| | _ | | - | | |
| | | | | | |
| | | | | | Form 990 (2007) |

b

81a Enter direct and indirect political expenditures (See line 81 instructions.)

If "Yes," enter the name of the organization ▶

b Did the organization file Form 1120-POL for this year?

membership, governing bodies, trustees, oficers, etc., to anyother exempt or nonexempt organization?

and check whether it is

exempt or

81 a

Χ

80 a

Form 990 (2007)

nonexempt

| Pa | rt VI Other Information (continued) | 23-189 | | Yes | No |
|-----|---|----------|---------|--------------|----------|
| 82a | Did the organization receive donated services or the use ofmaterials, equipment, or facilities at no charge or a | it | T^- | | |
| | substantially less than fair rental value? | | 82a | x | |
| b | If "Yes," you may indicate the value of these items here. Do not include this amount | | | | |
| | as revenue in Part I or as an expense in Part II (See instructions in Part III) | | | | |
| 83a | Did the organization comply with the public inspection requirements for returns and exemption applications? | | 83a | Х | |
| b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | | 83b | Х | |
| 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 gift | were not | | | |
| | tax deductible? | | 84b | | |
| 85a | 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members? | | 85a | | |
| b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | 85b | | |
| | If "Yes" was answered to either 85a or 85b,do not complete 85c through 85h below unless the organization recomplete 85c through 85h below unless through 85h below | ceived a | | | |
| | waiver for proxy tax owed for the prior year | | | | |
| С | Dues, assessments, and similar amounts for members 85c | | | | |
| d | Section 162(e) lobbying and political expenditures | | _ | | |
| е | 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 | . = | _ | ļ | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85? | | 85g | | |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85fto i | | 1 | | 1 |
| | 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 | | _ | | ļ |
| 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 | | 4 | 1 | 1 |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | | | |
| | against amounts due or received form them) | | 4 | | |
| 88a | | | İ | | |
| | 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 | | 88a | | X |
| b | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning | 9 | | | |
| 00- | of section 512(b)(13)? If "Yes," complete Part XI | | 88b | | X |
| 89a | | | | | |
| _ | section 4911▶; section 4912 ▶; section 4955 ▶ 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction | | - | | |
| b | 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 | ł | × |
| С | Enter Amount of tax imposed on the organization managers or disqualified persons during the year under | • | 030 | ı | 1 |
| · | sections 4912, 4955, and 4958 | | | | |
| d | Enter Amount of tax on line 89c, above, reimbursed by the organization | | | | |
| e | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction. | action? | 89e | | X |
| f | All organizations. Did the organization acquire a direct or indirect interest in anyapplicable insurance contract | | 89f | | X |
| g | For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting | | • | 1 | |
| 8 | or a fund maintained by a sponsoring organization, have excess business holdings at anytime during the year | | 89g | | l x |
| 90a | List the states with which a copy of this return is filed PA | | 229 | 1 | <u>'</u> |
| b | Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) | 90b | | | 210 |
| 91a | The books are in care of ▶ FRJENDSHIP COMMUNITY Telephone no ▶ | | 7-65 | 6-2 | |

LITITZ

b At any time during the calendar year, did the organization have an interest in or a signature or other authorityover a

financial account in a foreign country (such as a bank account, securities account, or other financial account)?

See the instructions for exceptions and filing requirements foForm TD F 90-22.1, Report of Foreign Bank and Financial

PΑ

Form **990** (2007)

Yes

91b

No

Accounts.

Located at ▶ 1149 EAST OREGON ROAD,

If "Yes," enter the name of the foreign country ▶

ZIP+4▶ 17543-

| Form 990 (2007) FRIENDSHIP CO | УТІИИММС | | | 23- | 1892383 Page 8 |
|---|------------------|---------------------------|-----------------------|---------------------------------------|------------------------|
| Part VI Other Information (co | ntinued) | | | | Yes No |
| c At any time during the calendar year, | did the organiza | ation maintain an offic | e outside of the Unit | ted States? | 91c X |
| If "Yes," enter the name of the foreign | · — | | | | |
| 92 Section 4947(a)(1) nonexempt charita | | | | re | . ▶ |
| and enter the amount of tax-exempt in | | | | ▶ 92 | |
| Part VII Analysis of Income-Pr | oducing Ac | tivities (See the | instructions) | | <u> </u> |
| Note: Enter gross amounts unless | | d business income | Excluded by se | ection 512, 513, or 514 | (E) |
| otherwise indicated | (A) Business | (B) | (C) | (D) | Related or exempt |
| 93 Program service revenue | code | Amount | Exclusion code | Amount | function income |
| a ICF PROGRAMS | | | | | 142,338. |
| b CLA PROGRAMS | | | | | 416,839. |
| c PCH & SUPP LIVING | - | | | | 546,577. |
| 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 | 4,705. | |
| 96 Dividends and interest from securities | - | | 14 | 6,914. | |
| 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 | | | 14 | (12,204.) | |
| 100 Gain or (loss) from sales of assets | | | | | |
| other than inventory | | | | | 420,387. |
| 101 Net income or (loss) from special events | | | 01 | 48,369. | |
| 102 Gross profit or (loss) from sales of inventory | | | | | 8,560. |
| 103 Other revenue: a OTHER | | | | | 16,310. |
| b | | | | | |
| c | - | | | | |
| d | | | | | |
| e | - | | | 1.7. 7.0 | |
| 104 Subtotal (add columns (B), (D), & (E) | | <u> </u> | | 47,784. | 1,551,011. |
| 105 Total (add line 104, columns (B), (D), | | | • | > | 1,598,795. |
| Note: Line 105 plus line 1e, Part I, should e | | | - (E | | · . · |
| Part VIII Relationship of Activi | | | | | |
| Line No. Explain how each activity for v | | | | outed importantlyto the ac | complishment of the |
| organization's exempt purpos 93 ROOM & BOARD FOR | | PMENTALLY | | ERSONS IN OU | R PROGRAMS |
| TOOM & BOARD FOR | CDEVERO | PENENTALLI | DISABLED F | ERSONS IN OU | K FROGRAMS |
| | | | | | |
| | | | | | |
| Part IX Information Regarding | Tavable Su | heidiaries and D | isregarded Ent | ities (See the instruct | ione) |
| | | | | | |
| (A) Name, address, and EIN of corporation, partnership, or disregarded entity | | ige of Nature | (C) of activities | (D) Total income | (E) End-of-year |
| partitership, or disregarded entity | ownersh | % | | | assets |
| | | % | | | |
| | | % | | | |
| | | % | | | |
| Part X Information Regarding | Transfers A | | Personal Renef | it Contracts (Social | ne instructions) |
| | | | | | |
| (a) Did the organization, during the yr, re (b) Did the organization, during the year, Note: If "Yes" to (b), file Form 8870 and Fe | pay premiums, | directly or indirectly, o | | | Yes X No |
| Total in Total to tay, me to init our variation | 2111 77 20 (3CC | inoa dodona) | | · · · · · · · · · · · · · · · · · · · | Form 990 (2007) |

| Pa | ert XI | Information Regarding Tra controlling organization as defined | | ntrolled E | Entities. C | omple | te only if | the organizat | ion is a | 3 |
|------------------------|---------|--|------------------------------------|---------------|--------------------------------|-------------|------------|------------------|---------------|-------|
| 106 | | e reporting organizationmake any tran "complete the schedule belowfor ea | nsfers to a controlled entity as | defined in se | ection 512(b)(13) |) of the | e Code? | | Yes | No |
| | | (A) Name, address, of each controlled entity | (B) Employer Identification Number | on | (C) Description transfer | of | | Amount o | • | sfer |
| a | | | | - | | | | | | |
| b | | | | | - | | | | | |
| С | | | | | | | | | | |
| | | Totals | | | | | | | | · |
| 107 | | e reporting organization receive any to "complete the schedule belowfor ea | | ty as defined | in section 512(t | o)(13) | of the Co | de? | Yes | No |
| | | (A) Name, address, of each controlled entity | (B) Employer Identification | on | (C) Description transfer | of | | Amount o | O) of tran | sfer |
| a | | | | | | | | | | |
| b | | | | | | | | | | |
| С | | | | | | | | | | |
| | | Totals | | | | | | | | |
| 108 | | e organization have a binding written nnuities described in question 107 ab Under penalties of perjury, I declar | oove? | | | | | | Yes and to | |
| Please Sign Here | | best of my knowledge and belief, it information of which preparer has a Signature of officer | • | Declaration | n ofpreparer (othe | | _ | is based on a | | |
| | | GEORGE B STOLTZ Type or print name and title | FUS | CEO | | | | | | |
| | parer's | Preparer's signature Firm's name (or yours | Date | | Check if self employed ▶ | | Preparer's | SSN or PTIN (See | Gen In | st X) |
| Use | Only | if self-employed), address, and ZIP + 4 | | | | EIN Phon | e no.► | | | |

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 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

OMB No 1545-0047

2007

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

| FRIENDSHIP COMMUNITY | | | 23-189238 | 13 |
|--|--|----------------------|---|--|
| Part I Compensation of the Five H | ighest Paid Employees O | ther Than Offic | ers, Directors, a | nd Trustees |
| (See the instructions. List each one. | Ifthere 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 | | 1 | <u> </u> | |
| \$50,000 | | Cantractors for | Drofossianal Se | |
| Part II-A Compensation of the Five H (See the instructions. List each one) | • | | | ervices |
| (a) Name and address of each independent conf | | | e of service | (c) Compensation |
| NONE | addor paid more than \$00,000 | (6) 190 | C OI SCIVICE | (c) compensation |
| | | | | |
| | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of others receiving over \$50,000 for professional services | > | | | |
| Part II-B Compensation of the Five H | ighest Paid Independent | Contractors for | Other Services | |
| (List each contractor who performed | services other than professional s | ervices, whether ind | ividuals or | |
| firms If there are none, enter None. | See the instructions.) | | | |
| (a) Name and address of each independent con- | ractor paid more than \$50,000 | (b) Typ | e of service | (c) Compensation |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other contractors receiving over | | | | |
| \$50,000 for other services | > | | | |
| For Paperwork Reduction Act Notice, see the Inst | | 990-EZ. | Schedule A (Form | 990 or 990-EZ) 2007 |

| Pa | Tt III Statements About Activities (See 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 linei of Part VI-B) | 1 | | Х |
| | Organizations that made an election under section 501(h) byfiling 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 he lobbying activities | | ; | |
| 2 | During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, oficers, creators, keyemployees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majorityowner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions) | | | |
| а | Sale, exchange, or leasing of property? | 2a | - | Х |
| b | Lending of money or other extension of credit? | 2b | | Х |
| С | Furnishing of goods, services, or facilities? | 2c | | Х |
| d | Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d | | X |
| е | Transfer of any part of its income or assets? | 2e | | Х |
| 3а | Did the organization make grants for scholarships, fellowships, student loans, etc? (If"Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) | 3a | | X |
| b | Did the organization have a section 403(b) annuity plan for its employees? | 3b | Х | |
| С | Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If Yes," attach a detailed statement | 3c | | X |
| d | Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? | 3d | | Х |
| 4a | Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g | 4a | | X |
| b | Did the organization make any taxable distributions under section 4966? | 4b | | |
| С | Did the organization make a distribution to a donor, donor advisor, or related person? | 4c | | |
| d | Enter the total number of donor advised funds owned at the end of the tax year | | | |
| е | Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year | | | |
| f | Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts | | | |
| 9 | Enter the aggregate value of assets held in all funds or accounts included on line 4fat the end of the tax year | | | |

Schedule A (Form 990 or 990-EZ) 2007

| pertify that the organization is not a private bundation because it is (Please check on NONE A church, convention of churches, or association of churches Section 170(b)(1)(A A school Section 170(b)(1)(A)(ii) (Also complete Part V.) | • • • | | |
|--|--|-------------------------------|------------------|
| | A)(I). | | |
| A school Section 170/h)(1)(A)(u) (Also complete Part V.) | | | |
| | | | |
| 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 | v) | | |
| A medical research organization operated in conjunction with a hospital Section and state ▶ | 170(b)(1)(A)(⊪ Enter tl | he hospital's | name, city, |
| An organization operated for the benefit of a college or university owned or operate (Also complete the Support Schedule in Part IV-A) | ted by a governmenta | Lunit Section | 170(b)(1)(A)(ıv) |
| An organization that normally receives a substantial part of its support from a government of the Support Schedule in Part IV-A.) | ernmental unit or from | the general p | ublic |
| A community trust Section 170(b)(1)(A)(vi) (Also complete the support Schedule | ın Part IV-A) | | |
| An organization that normally receives (1) more than 33 1/3% of its support from a receipts from activities related to its charitable, etc., finctions - subject to certain a support from gross investment income and unrelated business taxable income (le organization after June 30, 1975 See section 509(a)(2) (Also complete th8uppo | exceptions, an (2) no r ess section 511 tax) fro | nore than 33 om businesses | 1/3%of its |
| An organization that is not controlled by any disqualified persons (other than found requirements of section 509(a)(3) Check the boxthat describes the type of support Type I Type II Type III-Functionally Integrated | orting organization | otherwse me | ets the |
| Provide the following information about the supported orga | nizations.(See the ins | structions) | |
| (a) (b) (c) | (d |) | (e) |
| Name(s) of supported organization(s) Employer Type of | Is the su | | Amount of |
| identification organization | organizat | | support |
| number (EIN) (described in lines 5 through 12 | in the su organizatio | | |
| above or IRC | ning doci | - | |
| section) | | | |
| | Yes | No | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| otal | | • | |
| | | | |
| An organization organized and operated to test for public safety Section 509(a)(4 |) (See the instruction | ıs) | |

Schedule A (Form 990 or 990-EZ) 2007

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 ofaccounting Calendar year (or fiscal year beginning in) (a) 2006 (b) 2005 (c) 2004 (e) Total Gifts, grants, and contributions received (Do not include unusual grants See line 28) 6551835 6333747 6105062 5700336 24690980 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 1155485 1078046 1019335 940569 4193435 chantable, etc. purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)) rents, royalties, income from similar sources, and unrelated business tax able income (less section 511 taxes) from businesses acquired by the organization after June 30,1975 10437 3457 1047 2557 17498 Net income from unrelated business activities not included ın lin<u>e 18</u> Tax revenues levied for the organization's benefit and either paid to it or expended on its 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 Other income. Attach a schedule Do not include gain or (loss) from 14197 3290 1856 837 20180 sale of capital assets 7731954 7418540 7127300 6644299 28922093 23 Total of lines 15 through 22. 6576469 6340494 6107965 5703730 24728658 24 Line 23 minus line 17 77320 74185 71273 66443 25 Enter 1% of line 23 494573 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test: Enter line 24, column (e) 24728658 26c d Add: Amounts from column (e) for lines. 18 17498 19 20180 26b 26d 37678 24690980 e Public support (line 26c minus line 26d total) 26e 99.85 % f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disgualified 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 (2006)(2005)(2004)(2003) 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 targer of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, 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 (1) or (2), enter the sum of these differences (the excess amounts) for each year (2005) (2006)(2004) c Add Amounts from column (e) for lines 15 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 fom line 23, column (e) % 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)) %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received anyunusual grants during 2003 through 2006, 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

Schedule A (Form 990 or 990-EZ) 2007

nature of the grant Do not file this list with your return. Do not include these grants in line 15

| į | | ying Expenditures completed ONLY by an | | | ee the | instructions) | | | |
|--|---|---|----------------------------------|-----------------------|-------------------|---------------------------------------|--------|--------|--------------------------------------|
| Che | | anization belongs to an | | | vou ch | ecked "a" and | "lımıf | ed co | ontrol" provisions apply |
| | | Limits on Lobbyin | | | ,00 0. | (a) Affiliated g | | | (b) To be completed for all electing |
| (The term "expenditures" means amounts paid or incurred.) | | | | | | | | | organizations |
| 36 | Total lobbying expendi | tures to influence public | opinion (grassroots lobby | ing) | 36 | | | | |
| 37 | Total lobbying expendi | tures to influence a legisl | ative body (direct lobbying | ng) . | 37 | | | | |
| 38 | Total lobbying expendi | tures (add lines 36 and 3 | 37) | | 38 | | | | |
| 39 | Other exempt purpose | expenditures | | | 39 | | | | |
| 40 | 40 Total exempt purpose expenditures (add lines 38 and 39) 40 | | | | | | | | |
| 41 | Lobbying nontaxable a | mount Enter the amoun | t fom 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 . \$10 | 00,000 plus 15% of the excess ov | er \$500,000 |] | | | | |
| | Over \$1,000,000 but n | ot over \$1,500,000 s17 | 5,000 plus 10% of the excess ov | er \$1,000,000 | 41 | | | | |
| | Over \$1,500,000 but n | ot over \$17,000,000 s22 | 25,000 plus 5% of the excess ove | r \$1,500,000 | | | | | |
| | Over \$17,000,000 | \$1 | 000,000 | | | | | | |
| 42 | Grassroots nontaxable | amount (enter 25% of lir | ne 41) | | 42 | | | | |
| | | ne 36. Enter -0- ıflıne 42 | | | 43 | | | | |
| 44 | Subtract line 41 from li | ne 38 Enter -0- ıflıne 41 | is more than line 38 | ••• | 44 | - | | | |
| | | | | | Ì | | | | |
| _ | Caution: If there is an | amount on either line 43 | | | | | | | |
| | | | veraging Period U | | | • | | | |
| | (Some or | rganizations that made a | section 501(h) election of | do not have to con | nplete | all of the five co | lumn | s belo | ow |
| | | ; | See the instructions for li | nes 45 through 50 |) | | | | |
| | | | Lobbying Expend | ditures During 4- | Year A | veraging Perio | od | | |
| | llendar year (or fiscal ar beginning in) ▶ | (a) 2007 | (b) 2006 | (c) 2005 | | (d) 2004 | | | (e) Total |
| 45 | Lobbying | | | | | | | | |
| | nontaxable amount | | | | | L | | | |
| 46 | Lobbying ceiling amount (150% of line 45(e)) | | | | | | | | |
| 47 | Total lobbying | | | | | | | | |
| | expenditures . | | | | | | | | |
| 48 | Grassroots | | | | | | | | |
| | nontaxable amount | | | | | | | | |
| 49 | Grassroots ceiling amount (150% | | | | | | | | |
| | amount (150% of line 48(e)) | | | | | | | | |
| 50 | Grassroots lobbying | | | | | | | | |
| | expenditures | | | | | | | | |
| j | | ying Activity by No | | | | | | | |
| | | eporting only by organizat | | | | · · · · · · · · · · · · · · · · · · · | - | | |
| | | ganization attempt to influ | | | cluding | any | es | No | Amount |
| | | opinion on a legislative r | natter or referendum, thro | ough the use of | | | - | | |
| a | | | | • • | | <u> </u> | | X | |
| b Paid staff or management (Include compensation in expenses reported on lines through h.) | | | | | | | -+- | X | |
| | c Media advertisements | | | | | | | X | |
| | d Mailings to members, legislators, or the public. | | | | | | | X | |
| | e Publications, or published or broadcast statements. | | | | | | - | X | |
| f | | | | | | | | X | |
| g | | gislators, their stafs, gov | | - | | | | X | |
| h | h Rallies, demonstrations, seminars, conventions, speeches, lectures, or anyother means | | | | | | | X | |
| i | | ditures (Add linesc throu | • • | | | L. | | | |
| | ir "Yes" to any of the | above, also attach a sta | tement giving a detailed | description of the lo | obbyin | | la A | /E | n 990 or 990-EZ) 2007 |
| | | | | | | əcnedu | IE A | 1 COLU | 1 330 OF 330-EZ) 200/ |

| Schedu | ıle A | (Form 990 or 990-EZ) 2 | | | | | | 23-18 | | | ige 7 |
|--------|----------|-----------------------------|---------------------|---------------------------------------|---------------------------------------|---------------------|----------------|---------------------|-----------|----------|--------|
| Part | VII | | _ | nsfers To and To | ransaction | ns and Relatio | nships Wi | th Nonch | aritab | le | |
| | | Exempt Organ | i zations (S | ee the instructions) | | | | | | | |
| 51 | | the reporting organization | | | | | _ | lescribed in | section | 501(c) | of |
| | | Code (other than section | , = | | | | nizations? | | | | |
| а | | ansfers from the reportin | g organization to | a nonchantable exer | npt organizat | ion of | | | | Yes | No |
| | | Cash | | • | | • | | | 51a(i) | | _X_ |
| | | Other assets | | | • • • | • • • • | • | | a(ii) | | X |
| b | | her transactions: | | | | | | | | | |
| | |) Sales or exchanges of | | • | - | | • | | b(i) | | X |
| | | Purchases of assets from | | , • | מכ | | | • | b(iı) | <u> </u> | _X |
| | | Rental of facilities, equ | • | assets | | | | • | b(iii) | | X |
| | | Reimbursement arrang | | | • | | | | b(iv) | | X |
| | |) Loans or loan guarante | | | | • | • | | b(v) | - | X |
| | • |) Performance of service | | | | | | • | b(vi) | | X |
| C | | aring of facilities, equipr | · - | • | | | | | <u> </u> | | X |
| d | | he answer to any of the | | | | | - | | | | |
| | - | ods, other assets, or ser | - | | _ | | | market vali | ue in an | y transa | action |
| | | sharing arrangement, sh | nowin column (d |) the value of the goo | ds, other ass | ets, or services re | ceived: | | | | |
| (a) | | (b) Amount involved | Name of nor | (c) ncharitable exempt or | annimition | Description of tr | | d) | horno | orrana | mont |
| Line | 10. | Amount involved | Name of no | | gariization | Description of tr | ansiers, trans | actions, a s | snanny a | arrange | |
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| | | e organization directly or | | | | taxexempt organi | zations descr | ibed in | | 5. | i |
| | | on 501(c) of the Code (c | | n 501(c)(3)) or in sec | tion 5277 | ••• | | ▶ | Yes | <u> </u> | No |
| b | T "Y(| es," complete the followi | ng schedule | | | Τ | | | | _ | |
| | | (a) Name of organization | nn l | (b) Type of organ | ızation | | Description | (C) of relations | ain. | | |
| | | Traine or organization | JII | Type of organ | ZZUON | | Description | O Telations | <u>пр</u> | | |
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23-1892383

| US 990 Other | i unctional Ex | penses: Page 2 | Massauri | 2007 |
|--------------------------|----------------|----------------------|-------------|-------------|
| Description of the Asset | Total | Program | Management | |
| PURCHASED PERSONNEL | 348,737. | Services | and General | Fundraising |
| ESIDENT PROGRAMS | 181,719. | 312,127. 181,719. | 36,610. | |
| PURCHASED SERVICES | 11,138. | | 10 003 | |
| TAFF DEVELOPMENT | 21,139. | 1,136. | 10,002. | 070 |
| TAFF RECRUITMENT | 27,856. | 15,542. | 4,625. | 972 |
| NSURANCE | | 19,440. | 8,311. | 105 |
| OOD | 85,206. | 59,573. | 25,633. | |
| LOTHING | 209,222. | 209,222. | | |
| | 4,002. | 4,002. | | |
| ESIDENT DEVELOPMENT | 7,129. | 7,129. | | |
| EMBERSHIPS | 18,315. | 1,233. | 15,482. | 1,600 |
| ISCELLANEOUS | 6,563. | 5,187. | 513. | 863 |
| | 921,026. | 816,310. | 101,176. | 3,540. |
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Land, Buildings and Equipment 990: Page 4, Line 57; 990-PF: Page 2, Line 14

| US 990 990: Page 4, Line 5 | ings and Equipme 7: 990-PF: Page 2 | nt Line 14 | 2007 |
|----------------------------|---------------------------------------|---------------|------------|
| | <u> </u> | Accumulated | 2001 |
| Description | Cost / Basis | Depreciation | Book Value |
| AND | 500,732. | Depreciation | 500,732. |
| LAND IMPROVEMENTS | 446,794. | 332,462. | |
| BUILDINGS | | | |
| | 5,481,765. | 2,268,763. | 3,213,002. |
| CONSTRUCTION IN PROGRESS | 1,583,606. | | 1,583,606. |
| URNISHINGS & EQUIPMENT | 754,549. | 580,277. | 174,272. |
| ADAPTIVE EQUIPMENT | 23,509. | 17,914. | 5,595. |
| /EHICLES | 713,595. | 536,793. | 176,802. |
| | 9,504,550. | 3,736,209. | 5,768,341. |
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FRIENDSHIP COMMUNITY EIN: 23-1892383

YEAR ENDED JUNE 30, 2008

FORM 990

PART I - STATEMENT OF REVENUE, EXPENSES, AND CHANGES IN NET ASSETS

Line 1e - Total Contributions:

The Organization meets the 33.33% support test of the Regulations under section 170(b) (1) (A) (vi). The Organization did not receive any contributions which exceeded 2% of the total contributions reported on Line 1e from any contributor for the year ended June 30, 2008.

Line 7 - Other investment income:

This negative \$12,204 was from unrealized losses on securities investments.

Line 8c - Gain on sale of assets other than inventory:

The organization sold a 14 unit apartment building in order to build a 40 unit apartment complex. All proceeds were invested in the new project. The organization also experienced an accounting gain when a portion of one home was damaged by water, gutted and renovated. The insurance proceeds were in excess of the remaining basis of the portion of the building damaged.

Line 10c - Gross profit from sales of inventory:

The organization runs a soda route to provide a job for one of our residents.

PART II - STATEMENT OF FUNCTIONAL EXPENSES

LINE 42, DEPRECIATION, DEPLETION, ETC.

Friendship Community depreciates is assets using the straight-line method over their estimated useful lives as listed in the Uniform Chart of Accounts and Definitions for Hospitals published by the American Hospital Association.

| Description | Total | Program | Management | Fundraising |
|-------------------------|---------|---------|------------|-------------|
| Land Improvements | 25,857 | 25,857 | | |
| Building/Leasehold Imp. | 219,478 | 219,478 | | |
| Equipment/Furnishings | 56,111 | 30,929 | 24,840 | 342 |
| Adaptive Equipment | 2,336 | 2,336 | | |
| Vehicles | 79,720 | 79,720 | | |
| Finance Costs (Amort.) | 2,352 | 2,352 | | |
| Total | 385,854 | 360,672 | 24,840 | 342 |

FRIENDSHIP COMMUNITY EIN: 23-1892383 YEAR ENDED JUNE 30, 2008

FORM 990

PART III - STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE

Friendship Community is a Christian ministry supporting persons with developmental disabilities It was founded in 1972 and currently serves 128 persons with 220 full and part time staff. The vision of Friendship Community is to be a community which:

- * Affirms the worth of all people
- * Responds to families and individuals seeking a Christian program
- * Supports personal growth and wholeness
- *Advocates for community and church inclusion
- * Provides opportunities for spiritual growth and service

PART III (a) - INTERMEDIATE CARE FACILITIES

This program includes three homes that provide intermediate care for 17 individuals. Funding comes from the Pennsylvania Department of Public Welfare, Office of Mental Retardation for these programs. All residents are engaged in vocational programs outside the facility during the day.

PART III (b) - COMMUNITY LIVING ARRANGEMENTS & COMMUNITY RESIDENTIAL FACILITIES

This program includes 13 group homes which serve 45 individuals, family living for 15 individuals, supported apartment living for 11 individuals and offers a range of residential and social services providing an independent environment which helps develop living skills. Funding comes from the Lancaster and Lebanon County MH/MR Programs via an annual contract.

PART III (c) - FRIENDSHIP MINISTRIES

This is a privately funded church related service which includes counseling and networking, supervised living for 24 individuals, respite care and two personal care homes serving 16 individuals.

FRIENDSHIP COMMUNITY EIN: 23-1892383 YEAR ENDED JUNE 30, 2008

FORM 990

PART VI - BALANCE SHEETS

LINE 54a Investments - Other:

Ownership interest in Self-Funded Medical Group Reserve Fund

LINE 64 Mortgages and notes payable:

| Lender/Relationship/Terms | Current Balance | Onginal \$/Date |
|---|-----------------|-------------------------|
| Bank of Lancaster County (none) - 4.9% tax-exempt note paya | able | |
| secured by property - matures July 2019 | 1,286,985 | 2,150,000 - June 1999 |
| Bank of Lancaster County (none) - 5% working capital loan | | |
| secured by property - renegotiated annually | 639,915 | 1,100,000 - N/A |
| Commerce Bank (none) - 4.87% tax-exempt note payable | | |
| secured by property - matures April 2027 | 852,005 | 880,000 - December 2007 |
| Commerce Bank (none) - 4.87% tax-exempt note payable | | |
| secured by a construction project - matures June 2037 | 773,818 | N/A - December 2007 |
| Commerce Bank (none) - 7.5% note payable | | |
| secured by a construction project - matures November 2029 | 149,983 | N/A - December 2007 |
| Mennonite Financial Federal Credit Union (none) | | |
| Vehicle loans with interest rates between 5.75%-8.5% | | |
| and maturities between 3 and 5 years | 188,761 | |
| | 3,891,467 | |

FRIENDSHIP COMMUNITY Board of Directors

Current Term Ends Entry Year

William Rohrer (President)

(2008) (eligible to 2011) (2002)

355 E. Chestnut Street

Lancaster, PA 17602

Phone: 397-7312

E-mail: roarlikealion@qwestonline.com

Employment: Retired

Charles Kahler (Vice President)

(2008) (eligible to 2014)

(2005)

2565 Spring Valley Rd Lancaster, PA 17601 1917

Phone: (717) 392-8455

E-mail: charleskahler@comcast.net

Employment: Retired

Bob Peifer (Treasurer) 1222 Main Street

(2009) (eligible to 2012)

(2003)

Akron, PA 17501

Phone: (717) 859-1294 E-mail: Bob@cloisterTax.com

Employment: Self-employed accountant/Tax preparations

Connie Bender (Secretary) 808 East Jefferson Court

(2008) (eligible to 2014)

(2005)

Lancaster, Pennsylvania 17602 Phone: 717 293-1513

Fax: 717 299-1074 E-mail: lrbender@aol.com

Employment: Self-employed, Farm Supply Business

Catherine Scandrett

(2009) (eligible to 2016)

(2007)

210 Church Avenue Ephrata, PA 17522

Phone: (717) 738-3243 (most days 8-9AM)

E-mail cscandrett@dejazzd.com

Employment: Acute Rehab Staff Nurse

Beulah M. Landis

(2008) (eligible to 2010)

(1999)

3245 Glengreen Drive Lancaster, PA 17601

Phone: 285-2027

E-mail: bmlandis@dejazzd.com

Employment: Retired

Board Members Page 2

Georgia Martin

2124 Creek Hill Road

Lancaster, PA 17601

E-mail: Samgeo@earthlink.net

Phone: (717) 392-2823

Ed Cunliffe

405 South Broad Street

Lititz, PA 17543

Phone: (717) 626-6907

E-mail: etcunliffe@armstrong.com

Orpha King

1278 Crestview Drive

Denver, PA 17517

Phone: (717) 445-7485

osk@frontiernet.net

(gs February '09)

(2010) (eligible to 2016)

(2007)

(2011) (eligible to 2017)

(2008)

(2011) (eligible to 2017)

(2008)