

Form **990**

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

OMB No 1545-0047

2003

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning 10/01/03, and ending 9/30/04

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization South Brevard Seniors Assoc., Inc.	D Employer ID number 59-1898531
		Number and street (or P O box if mail is not delivered to street address) Room/suite 1300 Airport Road	E Telephone number 321-724-2233
		City or town, state or country, and ZIP + 4 Melbourne FL 32901	F Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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

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

H(c) Are all affiliates included? Yes No
(If "No," att a list See instr)

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

G Website: **▶** N/A

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

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 **▶** 212,850

I Group Exemption Number **▶**

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

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

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	12,838		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 12,438 noncash \$ 400)	1d		12,838	
2	Program service revenue, including government fees and contracts (from Part VII, line 93)	2		190,858	
3	Membership dues and assessments	3	See Stmt 1	5,347	
4	Interest on savings and temporary cash investments	4		3,567	
5	Dividends and interest from securities	5			
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b	19,178		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	-19,178		
8d		8d	See Stmt 2	-19,178	
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11		240	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		193,672	
E	13 Program services (from line 44, column (B))	13		181,720	
14	Management and general (from line 44, column (C))	14		21,248	
15	Fundraising (from line 44, column (D))	15			
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		202,968	
A	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		-9,296	
N	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		139,384	
S	20 Other changes in net assets or fund balances (attach explanation)	20			
S	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		130,088	

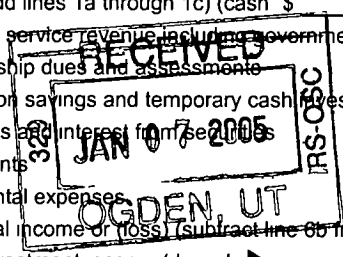
For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2003)

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Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule) Stmt 3 (cash \$ 1,198 non-cash \$)	22	1,198	1,198		
23	Specific assistance to individuals	23				
24	Benefits paid to or for members	24				
25	Compensation of officers, directors, etc	25				
26	Other salaries and wages	26				
27	Pension plan contributions	27				
28	Other employee benefits	28				
29	Payroll taxes	29				
30	Professional fundraising fees	30				
31	Accounting fees	31	4,540	2,270	2,270	
32	Legal fees	32				
33	Supplies	33	9,851	7,758	2,093	
34	Telephone	34	1,576	788	788	
35	Postage and shipping	35	249	111	138	
36	Occupancy	36	39,412	35,471	3,941	
37	Equipment rental and maintenance	37	3,123		3,123	
38	Printing and publications	38				
39	Travel	39				
40	Conferences, conventions, and meetings	40				
41	Interest	41	883		883	
42	Depreciation, depletion, etc. (attach schedule)	42	5,619	971	4,648	
43	Other expenses not covered above (itemize) a	43a				
	b See Statement 4	43b	136,517	133,153	3,364	
	c	43c				
	d	43d				
	e	43e				
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	202,968	181,720	21,248	0

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) & (4) orgs. & 4947(a)(1) trusts, but optional for others.)
<p>► Recreation for seniors</p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p> <p>a Bingo - approximately 3,600 participants annually</p> <p style="text-align: right;">(Grants and allocations \$ _____)</p>	89,915
<p>b Travel services - provides planned excursions to area attractions and the theatre - approximately 390 members participated</p> <p style="text-align: right;">(Grants and allocations \$ 1,198)</p>	85,539
<p>c Dances are held and entertainment is provided for holiday celebrations - approximately 700 participate</p> <p style="text-align: right;">(Grants and allocations \$ _____)</p>	3,507
<p>d See Statement 5</p> <p style="text-align: right;">(Grants and allocations \$ _____)</p>	2,759
<p>e Other program services (attach schedule)</p> <p style="text-align: right;">(Grants and allocations \$ _____)</p>	
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</p>	181,720

Part IV Balance Sheets (See page 25 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing	16,156	45	24,216
46	Savings and temporary cash investments	60,572	46	53,334
47a	Accounts receivable			
b	Less allowance for doubtful accounts		47c	
48a	Pledges receivable			
b	Less: allowance for doubtful accounts		48c	
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	3,112	53	5,977
54	Investments-securities See Stmt 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	27,912	54	29,604
55a	Investments-land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach schedule)		55c	
56	Investments-other (attach schedule)		56	
57a	Land, buildings, and equipment basis	43,599		
b	Less: accumulated depreciation (attach schedule) See Stmt 7	12,902	57c	30,697
58	Other assets (describe <u>See Stmt 8</u>)	3,650	58	4,348
59	Total assets (add lines 45 through 58) (must equal line 74)	146,124	59	148,176
60	Accounts payable and accrued expenses		60	
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule) See Worksheet		64b	13,371
65	Other liabilities (describe <u>See Stmt 9</u>)	6,740	65	4,717
66	Total liabilities (add lines 60 through 65)	6,740	66	18,088
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted	139,384	67	122,789
68	Temporarily restricted		68	7,299
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)	139,384	73	130,088
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	146,124	74	148,176

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)
N/A

a	Total revenue, gains, and other support per audited financial statements	a	
b	Amounts included on line a but not on line 12, Form 990.		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	\$		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
N/A

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

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 10				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule-see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures. See line 81 instructions		
b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
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) See Stmt 11		
82b	13,000		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84b	N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members		
d	Section 162(e) lobbying and political expenditures		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
85g	N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
85h	N/A		
86	501(c)(7) orgs Enter. a Initiation fees and capital contributions included on line 12		
b	Gross receipts, included on line 12, for public use of club facilities		
86a			
86b			
87	501(c)(12) orgs Enter. a Gross income from members or shareholders		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)		
87a			
87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a	501(c)(3) organizations Enter. Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> 0 ; section 4912 <input type="checkbox"/> 0 , section 4955 <input type="checkbox"/> 0		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
89b			
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed <input type="checkbox"/> FL		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)		0
90b			
91	The books are in care of <input type="checkbox"/> Board and the Treasurer Located at <input type="checkbox"/> Melbourne, Florida		
	Telephone no <input type="checkbox"/> 321-724-2233 ZIP + 4 <input type="checkbox"/> 32901		
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		<input type="checkbox"/>
	<input type="checkbox"/> 92		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a See Statement 12				190,858	
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					5,347
95 Interest on savings and temporary cash investments			14	3,567	
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					-19,178
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b Miscellaneous Income			1	240	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))			0	194,665	-13,831
105 Total (add line 104, columns (B), (D), and (E))					180,834

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).
94	Membership fees to guarantee the benefits of the organization will be directed to the senior citizen population.

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

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

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including attachments, if any, and believe that it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has knowledge.

Signature of officer: *William R DeLauder*

Type or print name and title: William R DeLauder Pres

Paid Preparer's Use Only

Preparer's signature: *Elaine S. Dils CPA*

Firm's name (or yours if self-employed), address, and ZIP + 4: Janes, Key & Dinho, 2717 North Wickham, Melbourne, FL 3293

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

2003

Department of the Treasury
Internal Revenue Service

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

Name of the organization South Brevard Seniors Assoc., Inc.	Employer identification number 59-1898531
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

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

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2003

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

	Yes	No
<p>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)</p> <p>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.</p>	1	X
<p>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)</p>		
<p>a Sale, exchange, or leasing of property?</p>	2a	X
<p>b Lending of money or other extension of credit?</p>	2b	X
<p>c Furnishing of goods, services, or facilities?</p>	2c	X
<p>d Payment of compensation (or payment or reimbursement of expiration if more than \$1,000)?</p>	2d	X
<p>e Transfer of any part of its income or assets?</p>	2e	X
<p>3a Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)</p>	3a	X
<p>3b Do you have a section 403(b) annuity plan for your employees?</p>	3b	X
<p>4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>	4	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

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

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state ►**
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions-subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations. (See page 5 of the instructions.)

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

- 14 An organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 of the instructions)

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

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

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	4,529	3,703	3,041	3,043	14,316
16 Membership fees received	5,427	5,131	4,081	3,630	18,269
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	141,247	153,937	110,833	154,195	560,212
18 Gross income from interest, dividends, amounts received from payment 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	3,611	3,226	3,610	4,338	14,785
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf					0
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	19,500	19,500	19,500	19,500	78,000
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. Stmt 13	221	6	12	51	290
23 Total of lines 15 through 22	174,535	185,503	141,077	184,757	685,872
24 Line 23 minus line 17	33,288	31,566	30,244	30,562	125,660
25 Enter 1% of line 23	1,745	1,855	1,411	1,848	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	▶	26a	0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		▶	26b	
c Total support for section 509(a)(1) test. Enter line 24, column (e)		▶	26c	
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____		▶	26d	
e Public support (line 26c minus line 26d total)		▶	26e	
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 "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:	(2002)	(2001)	(2000)	(1999)
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2002)	(2001)	(2000)	(1999)	
c Add: Amounts from column (e) for lines: 15 <u>14,316</u> 16 <u>18,269</u> 17 <u>560,212</u> 20 _____ 21 <u>78,000</u>				▶	27c 670,797
d Add: Line 27a total _____ and line 27b total _____				▶	27d _____
e Public support (line 27c total minus line 27d total)				▶	27e 670,797
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)				▶	27f 685,872
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				▶	27g 97.8021%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				▶	27h 2.1557%

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

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?			
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	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		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev. Proc 75-50, 1975-2 C.B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768) N/A

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

Limits on Lobbying Expenditures

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

Table with columns for line numbers (36-44), (a) Affiliated group totals, and (b) To be completed for ALL electing organizations. Rows include Total lobbying expenditures, exempt purpose expenditures, and nontaxable amounts.

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)

Table titled 'Lobbying Expenditures During 4-Year Averaging Period' with columns for Calendar year (2003, 2002, 2001, 2000) and Total. Rows include Lobbying nontaxable amount, ceiling amount, and total lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.) 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

- 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.)

Table with columns Yes, No, and Amount for each activity listed in the previous block.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Mortgages and Other Notes Payable

Forms
990 / 990-PF

2003

For calendar year 2003, or tax year beginning **10/01/03**, and ending **9/30/04**

Name South Brevard Seniors Assoc., Inc.	Employer Identification Number 59-1898531
---	---

Form 990, Part IV, Line 64b - Additional Information

Name of lender	Relationship to disqualified person
(1) Lanier Worldwide, Inc.	None
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 14,910	11/01/03	10/01/08	\$315 mo pymts, P & I	8.300
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) Copier with scan/print	Purchase copier
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		13,371
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals		13,371

59-1898531

Federal Statements

FYE: 9/30/2004

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
Dues - current year	\$ <u>5,347</u>
Total	\$ <u><u>5,347</u></u>

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc		Date	Date	Sale	Cost &	Deprec	Gain/	
How	Whom	Acquired	Sold	Price	Expense		-Loss	
Rec'd	Sold							
Furniture & equipment disposals								
Purchase		Various	5/31/04	\$	\$ 18,256	\$ 16,822	\$ -1,434	
Leasehold improvements disposals								
Purchase		Various	5/31/04		170,114	152,370	-17,744	
Total				\$	0	\$ 188,370	\$ 169,192	\$ -19,178

Federal Statements**Statement 3 - Form 990, Part II, Line 22 - Grants, Allocations and Contributions**

Donee's Name	Donee's Address	City	St	Zip	Donee's Relationship to Org	Class of Activity / Description	Cash Contribution	Noncash Contribution
Senior Care of Brevard County, Inc.	3661 S. Babcock St.	Melbourne	FL	32901	None	Donation	\$ 650	\$
South Brevard Sharing Center	17 E. Hibiscus Blvd.	Melbourne	FL	32901	None	Donation	400	
Various other					None	Donation	148	
Total							\$ 1,198	\$ 0

59-1898531

Federal Statements

FYE: 9/30/2004

Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
Advertisement	1,053	1,053		
Bank charges	18	12	6	
Dues and subscriptions	35		35	
Office expense	3,405	153	3,252	
Office expense-Travel service	98	98		
Taxes and licenses	71		71	
Prizes	64,223	64,223		
Bus/train transportation	4,475	4,475		
Attractions/trips	53,966	53,966		
Theatre	8,445	8,445		
Miscellaneous trip expenses	728	728		
Total	\$ 136,517	\$ 133,153	\$ 3,364	\$ 0

Statement 5 - Form 990, Part III, Line d - Statement of Program Service Accomplishments

User fees - provide facility for exercise, art and dance classes, shuffleboard and bridge lessons as well as a medical clinic, legal and family counseling services - serve approximately 2100

59-1898531

Federal Statements

FYE: 9/30/2004

Statement 6 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US and State Government Savings Bonds	27,912	29,604	Market
	<u>27,912</u>	<u>29,604</u>	

Statement 7 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
Equipment	\$ 41,081	\$	\$ 42,833	\$
Leasehold improvements	170,114		766	
Accumulated depreciation		24,552		12,876
Accumulated amortization		151,921		26
Total	<u>\$ 211,195</u>	<u>\$ 176,473</u>	<u>\$ 43,599</u>	<u>\$ 12,902</u>

Statement 8 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
Deposits	\$ 3,650	\$ 4,348
Total	<u>\$ 3,650</u>	<u>\$ 4,348</u>

Statement 9 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Travel escrow payable	\$ 6,615	\$ 4,535
Sales tax payable	125	34
Other payable		148
Total	<u>\$ 6,740</u>	<u>\$ 4,717</u>

Federal Statements**Statement 10 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees**

Name			Title	Average Hrs	Address	City, State, Zip
Comp	Benefits	Expenses				
William R DeLauder			President	8		
0	0	0	1177 Hwy A1A			N Indialantic FL 32903
Hilda Mahoney			1st Vice Pre	8		
0	0	0	2927 Gemini Ave			Palm Bay FL 32905
Harold G Philips			2nd Vice Pre	8		
0	0	0	839 Barbados Ave			Melbourne FL 32901
Mary Woodrow			Secretary	8		
0	0	0	214 Hurst Road NE			Palm Bay FL 32907
Betty Byers Norwalk			Treasurer	8		
0	0	0	50 New York Way			Rockledge FL 32955
Margaret R Winson			Asst Treasur	8		
0	0	0	387 Lamplighter Dr			Melbourne FL 32934
Alice Good			Director	8		
0	0	0	1120 Salem Road			Melbourne FL 32901
Daily Philips			Director	8		
0	0	0	709 E Melbourne Ave			Melbourne FL 32901
Gaye Mayer			Director	8		
0	0	0	1054 Sun Flower Lane			Palm Bay FL 32907
Mac Perrin			Director	8		
0	0	0	621 Ford Circle			Melbourne FL 32935
Bob Schmidt			Director	8		
0	0	0	7801 Maplewood Drive			W Melbourne FL 32904
William Bye			Director	8		
0	0	0	671 Plum Grove Road			Melbourne FL 32901
Clifford Manz			Director	8		
0	0	0	11207 Nolen St NE			Palm Bay FL 32907
Jasper Trigg			Director	8		
0	0	0	7692 Candlewick Drive			Melbourne FL 32940
Shirley Massey			Director	8		
0	0	0	1290 Cypress Bend Circle			Melbourne FL 32934
Marvin Heinz			Director	8		
0	0	0	4427 Twin Lakes Drive			Melbourne FL 32934

Federal Asset Report

Indirect Depreciation

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
1	Building signs	1/01/80	211				211	10	MO S/L	211	0
	Mass Sale 5/31/04										
2	Vacuum Cleaner	5/31/80	125				125	10	MO S/L	125	0
	Mass Sale 5/31/04										
4	Clock	9/30/80	29				29	10	MO S/L	29	0
	Mass Sale 5/31/04										
5	File cabinet - storage room	10/31/80	124				124	10	MO S/L	124	0
	Mass Sale 5/31/04										
6	Office desk and chair	10/31/80	315				315	10	MO S/L	315	0
8	Air cleaner	4/30/89	3,215				3,215	10	MO S/L	3,215	0
	Mass Sale 5/31/04										
9	Library shelves	1/31/82	160				160	10	MO S/L	160	0
	Mass Sale 5/31/04										
10	Ceiling fan	6/30/82	1,096				1,096	10	MO S/L	1,096	0
	Mass Sale 5/31/04										
11	Bridge tables	1/31/87	315				315	10	MO S/L	315	0
	Mass Sale 5/31/04										
12	Bridge tables	12/18/88	437				437	10	MO S/L	437	0
	Mass Sale 5/31/04										
13	Bridge tables	11/05/91	635				635	10	MO S/L	635	0
	Mass Sale 5/31/04										
14	Bridge supply cabinet	3/31/83	445				445	10	MO S/L	445	0
	Mass Sale 5/31/04										
16	Libary shelves - 66	3/31/87	270				270	7	MO S/L	270	0
	Mass Sale 5/31/04										
17	Office chair - secretary	4/30/83	49				49	10	MO S/L	49	0
	Mass Sale 5/31/04										
19	File cabinet	6/30/88	40				40	10	MO S/L	40	0
20	Alarm - entry	1/29/88	383				383	10	MO S/L	383	0
	Mass Sale 5/31/04										
22	File cabinets - 2	2/28/90	150				150	10	MO S/L	150	0
25	Chairs - 2	5/31/90	481				481	10	MO S/L	481	0
26	Book case - library	8/30/90	135				135	10	MO S/L	135	0
	Mass Sale 5/31/04										
27	Office chair	1/11/91	82				82	10	MO S/L	82	0
28	Ceiling fans	1/25/91	468				468	10	MO S/L	468	0
	Mass Sale 5/31/04										
30	Air conditioning unit - front office	11/30/91	318				318	5	MO S/L	318	0
	Mass Sale 5/31/04										
38	Water cooler	10/18/93	332				332	5	MO S/L	332	0
41	Shuffleboard court repair - The Nidy Co	5/27/94	2,380				2,380	15	MO S/L	1,481	159
42	Vacuum cleaner	6/21/94	106				106	10	MO S/L	98	8
45	Vertical blinds	6/13/95	94				94	10	MO S/L	78	7
	Mass Sale 5/31/04										
46	Signs	8/25/95	599				599	10	MO S/L	484	60
48	Office chairs - 5	5/07/96	472				472	10	MO S/L	350	47
50	Step Stool	6/07/96	53				53	10	MO S/L	39	5
52	Lanier copier	5/10/96	3,032				3,032	5	MO S/L	3,032	0
	Mass Sale 5/31/04										
53	Computer and printer	1/14/97	2,162				2,162	10	MO S/L	1,460	144
	Mass Sale 5/31/04										
54	Computer chair	12/09/97	126				126	10	MO S/L	74	12
55	Fax for computer	6/26/98	121				121	5	MO S/L	121	0
	Mass Sale 5/31/04										
56	Card tables (30)	1/29/99	954				954	10	MO S/L	445	95
57	Office chair	4/13/99	137				137	10	MO S/L	62	13
58	Coffee urns (3)100 cup (2)60 cup	5/14/99	580				580	5	MO S/L	513	67
59	Computer hard drive	12/17/99	116				116	5	MO S/L	87	15
	Mass Sale 5/31/04										
60	Phones	12/28/99	127				127	10	MO S/L	48	8
	Mass Sale 5/31/04										
61	Bingo sign	6/23/00	350				350	5	MO S/L	228	70
62	Ice Machine - Reddy Ice	3/23/01	1,899				1,899	5	MO S/L	950	379
63	Shuffleboard shed	1/01/80	745				745	10	MO S/L	745	0
	Mass Sale 5/31/04										
64	Bridge tables	10/31/79	203				203	10	MO S/L	203	0
	Mass Sale 5/31/04										
65	Portable amplifier	7/31/79	125				125	10	MO S/L	125	0

59-1898531

Federal Asset Report

FYE: 9/30/2004

Indirect Depreciation

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
67	Stage Banner	5/31/04								
	Mass Sale	5/31/04								
68	Bridge tables	5/31/81	125				125	10 MO S/L	125	0
	Mass Sale	5/31/04								
69	Drum stand	5/31/84	1,625				1,625	10 MO S/L	1,625	0
	Mass Sale	5/31/04								
70	File cabinet - travel	8/31/88	84				84	10 MO S/L	84	0
	Mass Sale	5/31/04								
71	Bridge tables	10/07/92	129				129	10 MO S/L	129	0
	Mass Sale:	5/31/04								
72	Bridge tables	3/30/93	379				379	10 MO S/L	379	0
	Mass Sale:	5/31/04								
73	Tables	12/15/94	379				379	10 MO S/L	335	38
	Mass Sale:	5/31/04								
74	Sound equipment	5/05/95	650				650	10 MO S/L	547	44
	Mass Sale:	5/31/04								
76	Bingo caller stool	10/10/95	1,208				1,208	10 MO S/L	967	80
	Mass Sale:	5/31/04								
77	Sound equipment	10/08/96	159				159	10 MO S/L	111	16
	Mass Sale	5/31/04								
78	Sound equipment	2/06/96	335				335	10 MO S/L	257	22
	Mass Sale	5/31/04								
80	Sound System	5/07/96	556				556	10 MO S/L	412	37
	Mass Sale	5/31/04								
81	Organ	2/07/97	1,491				1,491	10 MO S/L	994	100
	Mass Sale:	5/31/04								
82	Parking lot	2/22/00	517				517	10 MO S/L	185	52
	Mass Sale:	5/31/04								
83	Roof	2/28/82	31,104				31,104	18 MO S/L	31,104	0
	Mass Sale:	5/31/04								
84	Air conditioner	2/28/85	16,067				16,067	15 MO S/L	16,067	0
	Mass Sale:	5/31/04								
85	Building addition	8/31/85	19,225				19,225	15 MO S/L	19,225	0
	Mass Sale:	5/31/04								
86	Carpet	12/31/85	71,334				71,334	15 MO S/L	71,334	0
	Mass Sale:	5/31/04								
87	Air conditioner	10/31/88	3,515				3,515	10 MO S/L	3,515	0
	Mass Sale:	5/31/04								
88	Hot water heater	5/31/89	2,000				2,000	10 MO S/L	2,000	0
	Mass Sale	5/31/04								
89	Renovate stage area	12/07/92	120				120	10 MO S/L	120	0
	Mass Sale	5/31/04								
90	Parking lot upgrade	9/03/93	10,181				10,181	39 MO S/L	2,609	174
	Mass Sale:	5/31/04								
91	Parking lot refurbishing	2/11/94	1,420				1,420	39 MO S/L	352	24
	Mass Sale:	5/31/04								
92	Concrete ramp in parking lot	7/19/96	9,300				9,300	39 MO S/L	1,709	159
	Mass Sale:	5/31/04								
93	Exhaust Fan	12/05/97	1,545				1,545	39 MO S/L	231	26
	Mass Sale	5/31/04								
94	Parking bumpers (60)	4/28/98	347				347	15 MO S/L	125	16
	Mass Sale:	5/31/04								
95	Computer surge protector	7/09/99	741				741	10 MO S/L	315	49
	Mass Sale:	5/31/04								
96	Laser Jet printer	4/30/02	277				277	5 MO S/L	78	56
	Mass Sale:	5/31/04								
97	Electric Bingo Statesman Color Console	9/13/02	1,696				1,696	5 MO S/L	367	340
	Mass Sale:	5/31/04								
98	6 Monitor TV systems for electric bingo	12/27/02	5,300				5,300	10 MO S/L	398	530
	Mass Sale:	5/31/04								
99	Lowrey organ - used	12/27/02	3,551				3,551	10 MO S/L	266	355
	Mass Sale:	5/31/04								
100	Blue Rocker 5 Piece Drum Set	11/18/02	750				750	10 MO S/L	63	75
	Mass Sale:	5/31/04								
101	Amplifier for sound system	9/05/03	1,373				1,373	10 MO S/L	495	113
	Mass Sale:	5/31/04								
102	Lanier copier B/C w/scanprint	1/12/04	599				599	10 MO S/L	0	45
	Mass Sale:	5/31/04								
103	Folding banquet tables (60)	11/01/03	15,359				15,359	7 MO S/L	0	2,011
	Mass Sale:	5/31/04								
104	Telephones - Communication Connection	5/07/04	2,690				2,690	10 MO S/L	0	112
	Mass Sale:	5/31/04								
105	Carpet - Chapman's Carpet Supply	5/14/04	959				959	10 MO S/L	0	40
	Mass Sale:	5/31/04								
106	Piano - used	5/25/04	766				766	10 MO S/L	0	26
	Mass Sale:	5/31/04								
		6/01/04	400				400	10 MO S/L	0	13
	Total Other Depreciation		<u>232,452</u>				<u>232,452</u>		<u>176,961</u>	<u>5,642</u>
	Total ACRS and Other Depreciation		<u>232,452</u>				<u>232,452</u>		<u>176,961</u>	<u>5,642</u>

Federal Asset Report

Indirect Depreciation

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
	Grand Totals		232,452				232,452		176,961	5,642
	Less: Dispositions		<u>188,367</u>				<u>188,367</u>		<u>168,285</u>	<u>905</u>
	Net Grand Totals		<u>44,085</u>				<u>44,085</u>		<u>8,676</u>	<u>4,737</u>
	<i>LIKE KIND EXCHANGE DIFFERENCE ASSET #100</i>		<u>43,599</u>				<u>43,599</u>		<u>8,187</u>	<u>4,715</u>
									<u>8,187</u>	<u>12,902</u>

59-1898531

Federal Statements

FYE: 9/30/2004

Statement 11 - Form 990, Part VI, Line 82b - Donated Services

<u>Description</u>	<u>Amount</u>
Value of donated facilities-618 Melburne Ave, Melburne, FL	\$ 13,000
Total	\$ 13,000

59-1898531

Federal Statements

FYE: 9/30/2004

Statement 12 - Form 990, Part VII, Line 93 - Program Service Revenue

<u>Description</u>	<u>Business Code</u>	<u>Unrelated Amount</u>	<u>Exclusion Code</u>	<u>Exclusion Amount</u>	<u>Related Income</u>
Bingo Sales		\$	9	\$ 98,766	\$
Travel Sales			2	73,905	
Member activities			3	11,830	
Outsider user fees			3	3,407	
Room rental			3	850	
Coffee, refreshments, dinners			2	1,786	
Dances			2	314	
Total		\$		\$ 190,858	\$
					0

Federal Statements

Statement 13 - Schedule A, Part IV-A, Line 22 - Other Income

Description	2002	2001	2000	1999
Miscellaneous Income	\$ 221	\$ 6	\$ 12	\$ 51
Total	<u>\$ 221</u>	<u>\$ 6</u>	<u>\$ 12</u>	<u>\$ 51</u>