

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)

2002

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

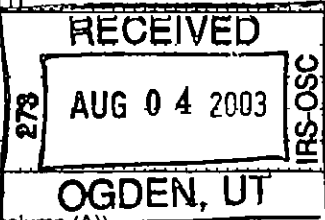
A For the 2002 calendar year, or tax year beginning, and ending
B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending
C Name of organization: Serene Harbor, Inc.
D Employer ID number: 59-3115093
E Telephone number: 321-726-8282
F Accounting method: Accrual
G Web site: N/A
J Organization type: 501(c)(3)
K Check here if the organization's gross receipts are normally not more than \$25,000
L Gross receipts: 493,152

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? No
H(b) If "Yes" enter no. of affiliates
H(c) Are all affiliates included?
H(d) Is this a separate return filed by an organization covered by a group ruling?
I Enter 4-digit GEN
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 17 of the instructions)

Table with 21 rows and multiple columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less direct expenses; 9c Net income; 10a Gross sales of inventory; 10b Less cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

REVENUE
EXPENSES
NET ASSETS



23 GB

**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 21 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____ )	22			
23 Specific assistance to individuals	23			
24 Benefits paid to or for members	24			
25 Compensation of officers directors, etc	25 54,038	32,422	10,808	10,808
26 Other salaries and wages	26 216,896	203,562	10,064	3,270
27 Pension plan contributions	27 3,983	3,469	305	209
28 Other employee benefits	28 26,366	21,177	3,716	1,473
29 Payroll taxes	29 21,020	18,308	1,610	1,102
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33 4,576	2,704	1,872	
34 Telephone	34 7,644	6,658	589	397
35 Postage and shipping	35 1,086	326	760	
36 Occupancy	36			
37 Equipment rental and maintenance	37 17,408	14,239	3,169	
38 Printing and publications	38 904	723	181	
39 Travel	39 7,957	4,698	3,259	
40 Conferences, conventions, and meetings	40			
41 Interest	41 5,246	4,721	525	
42 Depreciation, depletion, etc (attach schedule)	42 17,347	16,410	937	
43 Other expenses not covered above (itemize) a	43a			
b See Statement 1	43b 64,181	54,918	8,924	339
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	44 448,652	384,335	46,719	17,598

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 24 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><b>▶ Assist victims of domestic violence</b>                      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 Provide shelter, food, and clothing for victims of domestic violence; number sheltered, 215                      Provide crisis line; answered 1,155 calls                      (Grants and allocations \$ _____ )</p>	<b>302,874</b>
<p>b See Statement 2                      (Grants and allocations \$ _____ )</p>	<b>81,461</b>
<p>c                      (Grants and allocations \$ _____ )</p>	
<p>d                      (Grants and allocations \$ _____ )</p>	
<p>e Other program services (attach schedule) (Grants and allocations \$ _____ )</p>	
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</p>	<b>384,335</b>

**Part IV Balance Sheets** (See page 24 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	105,742	45	63,549
46	Savings and temporary cash investments	31,822	46	52,590
47a	Accounts receivable			
	b Less allowance for doubtful accounts	24,904	47c	
48a	Pledges receivable	40,236		
	b Less allowance for doubtful accounts	24,707	48c	40,236
49	Grants receivable		49	28,830
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	3,721	53	14,876
54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
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	478,102		
	b Less accumulated depreciation (attach schedule) <b>See Stmt 3</b>	79,013	57c	399,089
58	Other assets (describe <input type="checkbox"/> )		58	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	601,812	59	599,170
60	Accounts payable and accrued expenses	17,258	60	20,164
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) <b>See Worksheet</b>	64,223	64b	59,112
65	Other liabilities (describe <input type="checkbox"/> <b>See Stmt 4</b> )	851	65	910
66	<b>Total liabilities</b> (add lines 60 through 65)	82,332	66	80,186
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>				
67	Unrestricted	494,773	67	478,748
68	Temporarily restricted	24,707	68	40,236
69	Permanently restricted		69	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>				
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	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	519,480	73	518,984
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	601,812	74	599,170

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 26 of the instructions )		Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return	
<b>a</b> Total revenue, gains, & other support per audited financial statements ▶	<b>493,152</b>	<b>a</b> Total expenses and losses per audited financial statements ▶	<b>493,648</b>
<b>b</b> Amounts included on line <b>a</b> but not on line 12, Form 990		<b>b</b> Amounts included on line <b>a</b> but not on line 17, Form 990	
(1) Net unrealized gains on investments \$		(1) Donated services and use of facilities \$	
(2) Donated services and use of facilities \$		(2) Prior year adjustments reported on line 20, Form 990 \$	
(3) Recoveries of prior year grants \$		(3) Losses reported on line 20, Form 990 \$	
(4) Other (specify)		(4) Other (specify)	
<b>See Stmt 5</b>		<b>See Stmt 6</b>	
<b>\$ 44,996</b>		<b>\$ 44,996</b>	
Add amounts on lines (1) through (4) ▶	<b>44,996</b>	Add amounts on lines (1) through (4) ▶	<b>44,996</b>
<b>c</b> Line <b>a</b> minus line <b>b</b> ▶	<b>448,156</b>	<b>c</b> Line <b>a</b> minus line <b>b</b> ▶	<b>448,652</b>
<b>d</b> Amounts included on line 12, Form 990 but not on line <b>a</b>		<b>d</b> Amounts included on line 17, Form 990 but not on line <b>a</b>	
(1) Investment expenses not included on line 6b, Form 990 \$		(1) Investment expenses not included on line 6b, Form 990 \$	
(2) Other (specify)		(2) Other (specify)	
<b>\$</b>		<b>\$</b>	
Add amounts on lines (1) and (2) ▶		Add amounts on lines (1) and (2) ▶	
<b>e</b> Total revenue per line 12 Form 990 (line <b>c</b> plus line <b>d</b> ) ▶	<b>448,156</b>	<b>e</b> Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> ) ▶	<b>448,652</b>

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see page 26 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
<b>See Statement 7</b>				

**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 26 of the instructions

**Part VI Other Information (See page 27 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 inc of \$1,000 or more during the year covered by this return?		X
78b	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
80b	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 or indirect political expenditures See line 81 instr		
81b	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	
82b	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?	X	
83b	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
84b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
85a	b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
85b	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	N/A	
85c	c Dues, assessments, and similar amounts from members		
85d	d Section 162(e) lobbying and political expenditures		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	
85h	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86a	86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
86b	b Gross receipts, included on line 12, for public use of club facilities		
87a	87 501(c)(12) orgs Enter a Gross income from members or shareholders		
87b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
88	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	89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
89b	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
89c	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958		0
89d	d Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	90a List the states with which a copy of this return is filed <u>FL</u>		
90b	b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)		14
91	91 The books are in care of <u>Serene Harbor, Inc.</u> Telephone no <u>321-726-8282</u> Located at <u>Palm Bay, FL</u> ZIP + 4 <u>32910-0039</u>		
92	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"/>

**Part VII Analysis of Income-Producing Activities (See page 31 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	
<b>Note</b> Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a <b>Contract revenue</b>					7,000
b <b>Rental income</b>					9,908
c <b>transitional housing</b>					
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	808	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			1	946	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b <b>Miscellaneous</b>			1	1,280	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		3,034	16,908
105 Total (add line 104, columns (B), (D), and (E))					19,942

**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 32 of the instructions)**

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	Revenue from domestic violence training workshops
93b	Rentals from domestic violence victims and families in transitional housing, based on ability to pay

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 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 33 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, and believe it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has knowledge.

Signature of officer: *Melody R. Keeth*

Type or print name and title: **Melody R. Keeth / Executive Director**

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**Paid Preparer's Use Only**

Preparer's signature: *Jane Key CPA*

Firm's name (or yours if self-employed): **Janes, Key & Dinho,**

address and ZIP + 4: **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

**2002**

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

Employer identification number

**Serene Harbor, Inc.**

**59-3115093**

**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 instr List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$ 50,000	(b) Type of service	(c) Compensation
None		

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

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

Yes No

<p><b>1</b> 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 <b>▶</b> \$ _____ (Must equal amount 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>	<p><b>1</b></p>	<p><b>X</b></p>
<p><b>2</b> 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><b>a</b> Sale, exchange, or leasing of property?</p>	<p><b>2a</b></p>	<p><b>X</b></p>
<p><b>b</b> Lending of money or other extension of credit?</p>	<p><b>2b</b></p>	<p><b>X</b></p>
<p><b>c</b> Furnishing of goods services, or facilities?</p>	<p><b>2c</b></p>	<p><b>X</b></p>
<p><b>d</b> Payment of compensation (or payment or reimbursement of exp if more than \$1 000)? <b>See Part V, Form 990</b></p>	<p><b>2d</b></p>	<p><b>X</b></p>
<p><b>e</b> Transfer of any part of its income or assets?</p>	<p><b>2e</b></p>	<p><b>X</b></p>
<p><b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below )</p>	<p><b>3</b></p>	<p><b>X</b></p>
<p><b>4</b> Do you have a section 403(b) annuity plan for your employees?</p>	<p><b>4</b></p>	<p><b>X</b></p>
<p><b>Note</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments</p>		

**Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 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 5 of the instructions )



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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	682,975	385,366	311,396	251,655	1,631,392
<b>16</b> Membership fees received					
<b>17</b> 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	43,367	67,408	60,608	60,831	232,214
<b>18</b> Gross inc from int dividends amounts received from pymt on securities loans (section 512(a)(5)) rents royalties & unrelated busn taxable inc (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	1,739				1,739
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revn levied for the organization's ben & either paid to it or expended on its behalf					
<b>21</b> The value of serv or fac furnished to the org by a governmental unit without charge. Do not incl the value of serv or fac gen erally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of cap assets. <b>Stmt 8</b>	9,389	3,818	4,888		18,095
<b>23</b> Total of lines 15 through 22	737,470	456,592	376,892	312,486	1,883,440
<b>24</b> Line 23 minus line 17	694,103	389,184	316,284	251,655	1,651,226
<b>25</b> Enter 1% of line 23	7,375	4,566	3,769	3,125	

<b>26</b> Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	▶	26a	33,025
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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		▶	26b	166,975
c Total support for section 509(a)(1) test. Enter line 24, column (e)		▶	26c	1,651,226
d Add Amounts from column (e) for lines	18 <u>1,739</u> 19 _____			
	22 <u>18,095</u> 26b <u>166,975</u>	▶	26d	186,809
e Public support (line 26c minus line 26d total)		▶	26e	1,464,417
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		▶	26f	88.6866%

**27** Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year N/A

(2001) (2000) (1999) (1998)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A

(2001) (2000) (1999) (1998)	
c Add Amounts from column (e) for lines	15 _____ 16 _____
	17 _____ 20 _____ 21 _____
d Add Line 27a total _____ and line 27b total _____	▶ 27c _____
e Public support (line 27c total minus line 27d total)	▶ 27d _____
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)	▶ 27e _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27f _____
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27g _____ %
	▶ 27h _____ %

**28** Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )	31		
<b>32</b> Does the organization maintain the following			
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
<b>c</b> Copies of all catalogues brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
<b>d</b> 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		
<b>33</b> Does the organization discriminate by race in any way with respect to			
<b>a</b> Students' rights or privileges?	33a		
<b>b</b> Admissions policies?	33b		
<b>c</b> Employment of faculty or administrative staff?	33c		
<b>d</b> Scholarships or other financial assistance?	33d		
<b>e</b> Educational policies?	33e		
<b>f</b> Use of facilities?	33f		
<b>g</b> Athletic programs?	33g		
<b>h</b> Other extracurricular activities?  If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement )	33h		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?	34a		
<b>b</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		
<b>35</b> 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

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred )			
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table-			
<b>If the amount on line 40 is-</b>	<b>The lobbying nontaxable amount is-</b>		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	<b>41</b>	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>		

**Caution** If there is an amount on either line 43 or line 44 you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
 (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instr ) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
<b>a</b> Volunteers			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines c through h )			
<b>c</b> Media advertisements			
<b>d</b> Mailings to members, legislators, or the public			
<b>e</b> Publications or published or broadcast statements			
<b>f</b> Grants to other organizations for lobbying purposes			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
<b>i</b> Total lobbying expenditures (add lines c through h )			

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

**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 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
<b>51a(i)</b>		<b>X</b>
<b>a(ii)</b>		<b>X</b>
<b>b(i)</b>		<b>X</b>
<b>b(ii)</b>		<b>X</b>
<b>b(iii)</b>		<b>X</b>
<b>b(iv)</b>		<b>X</b>
<b>b(v)</b>		<b>X</b>
<b>b(vi)</b>		<b>X</b>
<b>c</b>		<b>X</b>

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

**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
<b>N/A</b>		



**Mortgages and Other Notes Payable**

**2002**

Form  
**990/990-PF**

For calendar year 2002, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name

Employer Identification Number

**Serene Harbor, Inc.**

**59-3115093**

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

Name of lender	Relationship to disqualified person
(1) <b>Huntington Bank</b>	<b>none - mortgage note payable</b>
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	
(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)	<b>64,223</b>	<b>59,112</b>
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Totals</b>	<b>64,223</b>	<b>59,112</b>

## Federal Statements

### Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
Dues and subscriptions	1,679	1,679		
Food	10,713	10,713		
Insurance	9,674	9,058	427	189
Insurance	5,267	5,267		
Licenses and permits	542	271	271	
Licenses and permits	1,176	1,176		
Miscellaneous	1,839	1,601	220	18
Miscellaneous	69	69		
Professional fees	13,044	6,324	6,588	132
Professional fees	4,547	4,547		
Training	1,666	1,666		
Training	1,269	1,269		
Utilities	10,670	9,252	1,418	
Utilities	2,026	2,026		
<b>Total</b>	<u>\$ 64,181</u>	<u>\$ 54,918</u>	<u>\$ 8,924</u>	<u>\$ 339</u>

### Statement 2 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

Outreach services, provide counseling and transitional housing for victims of domestic violence - eight apartment units  
 Provide information and referral calls from the community, answered 3,353 calls

**Federal Statements**

**Statement 3 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
Property and equipment	\$ 394,834	\$ 61,667	\$ 400,353	\$ 79,013
Land	77,749		77,749	
Total	<u>\$ 472,583</u>	<u>\$ 61,667</u>	<u>\$ 478,102</u>	<u>\$ 79,013</u>

**Statement 4 - Form 990, Part IV, Line 65 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Security deposits	\$ 851	\$ 910
Total	<u>\$ 851</u>	<u>\$ 910</u>



## Federal Statements

### Statement 5 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

<u>Description</u>	<u>Amount</u>
Fundraising event expenses	\$ 44,996
Total	\$ 44,996

### Statement 6 - Form 990, Part IV-B - Other Expenses Included in Financial Statements

<u>Description</u>	<u>Amount</u>
Fundraising event expenses	\$ 44,996
Total	\$ 44,996

**Federal Statements**

**Statement 7 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees**

Name			Title	Average Hours	Address	City, State, Zip
Comp	Benefits	Expenses				
Carolyn Carlsen	0	0	0	director	var	Satellite Beach, FL
Kathleen Casey	0	0	0	guild-pres	var	Palm Bay, FL
Ronald A Caswell	0	0	0	vice-pres	var	Titusville, FL
Ginny Dukes	0	0	0	director	var	Malabar, FL
Vickie Freece	0	0	0	treasurer	var	Melbourne Beach, FL
Dottie Gatti	0	0	0	director	var	Satellite Beach, FL
Ruthann Genoni	0	0	0	director	var	Melbourne, FL
Joseph Hemple	0	0	0	director	var	Satellite Beach, FL
Louise Jones	0	0	0	secretary	var	Melbourne, FL
Patsy Kurth	0	0	0	director	var	Malabar, FL
J Michael Mullen	0	0	0	director	var	Melbourne Beach, FL
Dr James Oelschlager	0	0	0	director	var	Palm Bay, FL
Mischel Ostovich	0	0	0	president	var	Indian Harbour Beach, FL
Lt Stephen Salvo	0	0	0	director	var	Melbourne, FL
Melody Keeth	54,038	0	0	exec direct	40	Palm Bay, FL

# Federal Statements

## Statement 8 - Schedule A, Part IV-A, Line 22 - Other Income

<u>Description</u>	<u>2001</u>	<u>2000</u>	<u>1999</u>	<u>1998</u>
Miscellaneous	\$ 2,521	\$ 3,818	\$ 4,888	\$
Program service revenue	6,868			
Total	<u>\$ 9,389</u>	<u>\$ 3,818</u>	<u>\$ 4,888</u>	<u>\$ 0</u>

