

Form **990**

OMB No 1545-0047

Return of Organization Exempt From Income Tax

2004

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning , and ending

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Serene Harbor, Inc.

Number and street (or P O box if mail is not delivered to street address) Room/suite
P.O. Box 100039

City or town, state or country, and ZIP + 4
Palm Bay FL 32910-0039

D Employer identification no.
59-3115093

E Telephone number

F Accounting method: Cash Accrual Other (specify)

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

G Website: sereneharbor.org

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

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

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

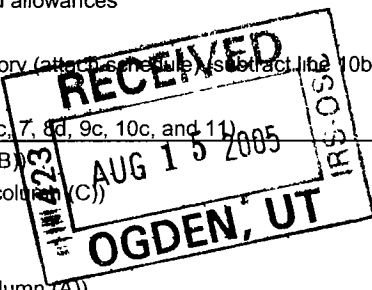
I Group Exemption Number

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 533,444

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	<u>127,028</u>		
b	Indirect public support	1b	<u>60,366</u>		
c	Government contributions (grants)	1c	<u>287,502</u>		
d	Total (add lines 1a through 1c) (cash \$ <u>436,713</u> noncash \$ <u>38,183</u>)	1d		<u>474,896</u>	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		<u>4,353</u>	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		<u>372</u>	
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	<u>191,461</u>		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	<u>-191,461</u>		
8d				<u>-191,461</u>	
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ <u>49,390</u> of contributions reported on line 1a)	9a	<u>42,575</u>		
b	Less direct expenses other than fundraising expenses	9b	<u>64,259</u>		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		<u>-21,684</u>	
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		<u>11,248</u>	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		<u>277,724</u>	
E	13 Program services (from line 44, column (B))	13		<u>438,978</u>	
X	14 Management and general (from line 44, column (C))	14		<u>50,831</u>	
P	15 Fundraising (from line 44, column (D))	15		<u>24,282</u>	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		<u>514,091</u>	
A	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		<u>-236,367</u>	
N	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		<u>490,940</u>	
S	20 Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		<u>254,573</u>	



SCANNED SEP 09 2005

413

16

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) (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	68,490	41,094	13,698
26	Other salaries and wages	26	279,621	261,762	14,151
27	Pension plan contributions	27	5,163	4,492	413
28	Other employee benefits	28	28,201	22,123	4,594
29	Payroll taxes	29	19,575	17,030	1,566
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	9,420	7,750	1,670
34	Telephone	34	7,395	6,433	592
35	Postage and shipping	35	1,311	393	656
36	Occupancy	36			
37	Equipment rental and maintenance	37	9,612	8,636	976
38	Printing and publications	38	402	322	80
39	Travel	39	7,535	5,651	1,884
40	Conferences, conventions, and meetings	40			
41	Interest	41	4,504	3,326	382
42	Depreciation, depletion, etc (attach schedule)	42	14,957	12,292	2,665
43	Other expenses not covered above (itemize) a	43a			
	b See Statement 2	43b	57,905	47,674	7,504
	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	514,091	438,978	50,831

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)
▶ Assist victims of domestic violence 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.)	
a Provide shelter, food, and clothing for victims of domestic violence; number sheltered, 204 Provide crisis line; answered 1,177 calls (Grants and allocations \$ _____)	363,770
b See Statement 3 (Grants and allocations \$ _____)	75,208
c (Grants and allocations \$ _____)	
d (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	438,978

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)		(B)
		Beginning of year		End of year
45	Cash-non-interest-bearing	42,782	45	34,897
46	Savings and temporary cash investments	58,282	46	28,640
47a	Accounts receivable	10,500		
b	Less: allowance for doubtful accounts		47c	10,500
48a	Pledges receivable	25,060		
b	Less: allowance for doubtful accounts		48c	25,060
49	Grants receivable	22,156	49	17,645
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	14,485	53	8,460
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	284,573		
b	Less: accumulated depreciation (attach schedule) See Statement 4			
57b		95,214	57c	189,359
58	Other assets (describe <input type="checkbox"/> See Statement 5)	3,183	58	2,510
59	Total assets (add lines 45 through 58) (must equal line 74)	556,951	59	317,071
60	Accounts payable and accrued expenses	11,620	60	12,624
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	53,940	64b	49,874
65	Other liabilities (describe <input type="checkbox"/> See Statement 6)	451	65	
66	Total liabilities (add lines 60 through 65)	66,011	66	62,498
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted	463,878	67	229,513
68	Temporarily restricted	27,062	68	25,060
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)	490,940	73	254,573
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	556,951	74	317,071

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.)

a	Total revenue, gains, and other support per audited financial statements	a	464,571
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	464,571
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): See Stmt 7		
	\$ -186,847		
	Add amounts on lines (1) and (2)	d	-186,847
e	Total revenue per line 12, Form 990 (line c plus line d)	e	277,724

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

a	Total expenses and losses per audited financial statements	a	508,944
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	508,944
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): See Stmt 8		
	\$ 5,147		
	Add amounts on lines (1) and (2)	d	5,147
e	Total expenses per line 17, Form 990 (line c plus line d)	e	514,091

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 9				

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
78b	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	
See Statement 10			
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
80a	If "Yes," enter the name of the organization		
	and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures See line 81 instructions		
81a			
81b	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	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		
82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	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	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	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.		
85c	Dues, assessments, and similar amounts from members		
85c			
85d	Section 162(e) lobbying and political expenditures		
85d			
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85e			
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85f			
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
		N/A	
85h	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?		
		N/A	
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
86a			
86b	Gross receipts, included on line 12, for public use of club facilities		
86b			
87a	501(c)(12) orgs Enter a Gross income from members or shareholders		
87a			
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)		
87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
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	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	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
89d	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 <u>FL</u>		
90b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)		13
91	The books are in care of <u>Serene Harbor, Inc.</u> Located at <u>Palm Bay, FL</u>		
	Telephone no <u>321-726-8282</u> ZIP + 4 <u>32910-0039</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>92</u>		

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 Transitional housing rentals					4,353
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	372	
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					-191,461
101 Net income or (loss) from special events			1	-21,684	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b Miscellaneous			1	749	
c FEMA Income			1	10,499	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		-10,064	-187,108
105 Total (add line 104, columns (B), (D), and (E))					-197,172

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)
93a	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 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	%			
	%			
	%			
	%			

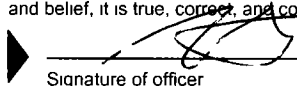
Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (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 schedules and attachments, and the information therein is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Signature of officer: 

Type or print name and title: Melody Keeth

Paid Preparer's Use Only

Preparer's signature: 

Firm's name (or yours if self-employed), address, and ZIP + 4: Jack James CPA, 2717 North Wickham, Melbourne, FL 329

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2004

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 empl ben plans & deferred comp	(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) 2004

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2a Sale, exchange, or leasing of property?		X
2b Lending of money or other extension of credit?		X
2c Furnishing of goods, services, or facilities?		X
2d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	X	
2e Transfer of any part of its income or assets?		X
3a Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)		X
3b Do you have a section 403(b) annuity plan for your employees?		X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
4b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		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 5 of the instructions.)

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	418,686	428,214	682,975	385,366	1,915,241
16 Membership fees received					0
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	107,354	62,850	50,235	67,408	287,847
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	692	808	1,739		3,239
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit 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					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets Stmt 11	1,407	1,280	2,521	3,818	9,026
23 Total of lines 15 through 22	528,139	493,152	737,470	456,592	2,215,353
24 Line 23 minus line 17	420,785	430,302	687,235	389,184	1,927,506
25 Enter 1% of line 23	5,281	4,932	7,375	4,566	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					▶ 26a 38,550
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					▶ 26b 161,450
c Total support for section 509(a)(1) test Enter line 24, column (e)					▶ 26c 1,927,506
d Add: Amounts from column (e) for lines:	18 3,239	19	22 9,026	26b 161,450	▶ 26d 173,715
e Public support (line 26c minus line 26d total)					▶ 26e 1,753,791
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					▶ 26f 90.9876%
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:	(2003)	(2002)	(2001)	(2000)	N/A
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	(2003)	(2002)	(2001)	(2000)	N/A
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 from 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 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					▶ 27h %

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)

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- 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.)

Yes	No	Amount

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 11 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		

Special Events Schedule

Form 990

2004

For calendar year 2004, or tax year beginning, and ending

Name Serene Harbor, Inc.

Employer Identification Number 59-3115093

Table with 5 columns: (A), (B), (C), Others, Total. Rows include Gross receipts, Less contributions, Gross revenue, Less direct expenses, and Net income (loss).

Table with 2 columns: Description, (A). Rows include FOSH Gala 2004, Fall Luncheon, and Others with multiple blank lines for entries.

Mortgages and Other Notes Payable

Forms
990 / 990-PF

2004

For calendar year 2004, or tax year beginning , and ending

Name **Serene Harbor, Inc.** Employer Identification Number **59-3115093**

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

Name of lender	Relationship to disqualified person
(1) Community Educators Credit Union	none - mortgage note payable
(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)	53,940	49,874
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	53,940	49,874

Federal Statements

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/-Loss
GE dishwasher	Purchase		6/30/99	5/06/04	\$	\$ 450	\$ 435	\$ -15
IBM E84 computer	Purchase		6/09/98	4/16/04		1,026	1,026	
Brown tweed sofa	Purchase		4/01/99	5/01/04		455	455	
Brown tweed sofa	Purchase		4/16/99	5/01/04		420	420	
Bunk bed set #4	Purchase		6/27/01	10/15/04		412	267	-145
Land - Tranq Cove	Purchase		4/12/01	4/30/04		40,000		-40,000
Apartment Complex	Purchase		4/12/01	4/30/04		163,536	12,606	-150,930
Totaline air conditioner	Purchase		6/11/03	4/30/04		454	83	-371
Total					\$ 0	\$ 206,753	\$ 15,292	\$ -191,461

Federal Statements**Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
Amortization				
Dues and subscriptions	2,016	1,714		302
Food	11,448	11,448		
Fundraising	2,294			2,294
Insurance	12,471	12,324	147	
Licenses and permits	640	640		
Miscellaneous	371	252	113	6
Professional fees	12,545	6,147	6,273	125
Training	1,057	1,057		
Utilities	9,916	8,945	971	
Transitional rental expenses	5,147	5,147		
Total	<u>\$ 57,905</u>	<u>\$ 47,674</u>	<u>\$ 7,504</u>	<u>\$ 2,727</u>

Statement 3 - 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 3,354 calls

Federal Statements

Statement 4 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
Property and equipment	\$ 405,333	\$ 94,831	\$ 246,824	\$ 95,214
Land	77,749		37,749	
Total	\$ 483,082	\$ 94,831	\$ 284,573	\$ 95,214

Statement 5 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
Loan costs net of amortization	\$ 3,183	\$ 2,510
Total	\$ 3,183	\$ 2,510

Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Security deposits	\$ 451	\$
Total	\$ 451	\$ 0

Federal Statements**Statement 7 - Form 990, Part IV-A - Other Revenue Included on Return**

<u>Description</u>	<u>Amount</u>
Rental income reported in discontinued operations	\$ 4,353
Contribution of transitional housing facility	-191,200
Total	<u>\$ -186,847</u>

Statement 8 - Form 990, Part IV-B - Other Expenses Included on Return

<u>Description</u>	<u>Amount</u>
Rental expenses reported in discontinued operations	\$ 5,147
Total	<u>\$ 5,147</u>

Federal Statements

Statement 9 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

<u>Name</u>	<u>Address</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
	<u>City, State, Zip</u>	<u>Title</u>			
Carolyn Carlsen	575 Jackson Ave Satellite Beach FL	Director	var	0	0
Kathleen Casey	1745 Las Palmos Dr SW Palm Bay FL	Director	var	0	0
Ronald Caswell	5075 Riverdege Dr Titusville FL	Vice-Preside	var	0	0
Vickie Freece	408 Anchor Key Melbourne Beach FL	Treasurer	var	0	0
Dottie Gatti	722 Loggerhead Island Dr Satellite Beach FL	Director	var	0	0
Ruthann Genoni	758 Glengarry Dr Melbourne FL	Director	var	0	0
Joseph Hemple	471 Oleander Ct Satellite Beach FL	Director	var	0	0
Louise Jones	624 Dawson Dr Melbourne FL	Secretary	var	0	0
Melody Keeth	1745 Las Palmos Dr SW Palm Bay FL	Executive Di	40	68,489	3,489
Patsy Kurth	2540 Rocky Point Rd Malabar FL	Director	var	0	0
Jim Oelschlager	1096 Glenham Dr NE Palm Bay FL	Director	var	0	0
Mischel Ostovich	216 Waterside Dr Indian Harbor Beach FL	President	var	0	0
David Madsen	1248 Riviera Dr NE Palm Bay FL	Director	var	0	0

Federal Statements

Statement 10 - Form 990, Part VI, Line 79 - Description of Liquidation, Dissolution, Etc.

On April 30, 2004, Serene Harbor, Inc. deeded the transitional housing facility to another nonprofit organization. Property and improvements with a net book value of \$191,301 were disposed of in the transaction.

Federal Statements

Statement 11 - Schedule A, Part IV-A, Line 22 - Other Income

<u>Description</u>	<u>2003</u>	<u>2002</u>	<u>2001</u>	<u>2000</u>
Miscellaneous	\$ 1,407	\$ 1,280	\$ 2,521	\$ 3,818
Total	<u>\$ 1,407</u>	<u>\$ 1,280</u>	<u>\$ 2,521</u>	<u>\$ 3,818</u>

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2004

Attachment Sequence No **67**

Name(s) shown on return

Serene Harbor, Inc.

Identifying number

59-3115093

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	102,000
2 Total cost of section 179 property placed in service (see page 3 of the instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	410,000
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see page 3 of the instructions	5	
(a) Description of property (b) Cost (business use only) (c) Elected cost		
6		
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2003 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg 3 of the instructions)	14	
15 Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	15,676

Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2004	17	0
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B-Assets Placed in Service During 2004 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see page 8 of the instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr	22	15,676
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	▶ 23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2004)

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
1	Nissan Quest	10/26/94	20,926				20,926	5	MO S/L	20,926	0
3	Kitchenaid washing machine	12/31/95	399				399	12	MO S/L	283	33
7	Whirlpool dryer	3/27/95	329				329	12	MO S/L	233	27
8	Range - Amana	11/02/99	639				639	5	MO S/L	533	106
9	Reverse osmosis	9/28/99	1,000				1,000	5	MO S/L	850	150
10	GE dishwasher	6/30/99	450				450	5	MO S/L	405	30
	Sold/Scrapped	5/06/04									
11	Whirlpool dishwasher GSD	2/04/00	314				314	5	MO S/L	246	63
13	Facility	11/01/95	150,996				150,996	40	MO S/L	31,334	3,775
14	Screened porch	11/27/98	3,952				3,952	20	MO S/L	1,004	198
15	Site drainage	3/31/98	6,634				6,634	20	MO S/L	1,907	332
16	Printer	1/01/94	317				317	5	MO S/L	317	0
19	IBM E84 computer	6/09/98	1,026				1,026	5	MO S/L	1,026	0
	Sold/Scrapped	4/16/04									
21	EGP copier	11/04/98	4,585				4,585	7	MO S/L	3,384	655
24	Playground	3/20/97	1,324				1,324	7	MO S/L	1,324	0
25	Storage shed	5/14/98	2,240				2,240	7	MO S/L	1,813	320
26	Water Pump - Gould	10/07/99	1,070				1,070	5	MO S/L	910	160
27	Brown tweed sofa	4/01/99	455				455	5	MO S/L	432	23
	Sold/Scrapped	5/01/04									
28	Brown tweed sofa	4/16/99	420				420	5	MO S/L	392	28
	Sold/Scrapped	5/01/04									
30	Land - shelter	11/01/95	37,749				37,749	0	-- Land	0	0
31	Desk - back office	5/21/01	534				534	5	MO S/L	276	106
32	Desk - lobby	5/22/01	948				948	5	MO S/L	490	189
33	Desk - Lobby	5/22/01	266				266	5	MO S/L	138	53
34	Fax machine	5/29/01	264				264	5	MO S/L	136	53
35	Photo printer	6/11/01	300				300	5	MO S/L	155	60
36	Computer	6/15/01	1,810				1,810	5	MO S/L	935	362
37	Hutch	6/20/01	350				350	5	MO S/L	175	70
38	Desk	6/20/01	338				338	5	MO S/L	169	68
39	Lateral file - Cypress	6/20/01	1,005				1,005	5	MO S/L	503	201
40	VCR/Camera (part of security system)	7/17/01	611				611	5	MO S/L	295	123
41	Pedestal desk #1	6/20/01	350				350	5	MO S/L	175	70
42	Pedestal desk #2	6/20/01	350				350	5	MO S/L	175	70
43	Pedestal desk #3	6/20/01	350				350	5	MO S/L	175	70
44	Hutch #1	6/20/01	278				278	5	MO S/L	139	56
45	Hutch #2	6/20/01	278				278	5	MO S/L	139	56
46	Security System	5/15/01	4,327				4,327	5	MO S/L	2,308	865
47	Accordian storm shutters	6/18/01	2,952				2,952	10	MO S/L	738	295
48	Windows	6/25/01	6,590				6,590	15	MO S/L	1,098	440
49	Bunk bed set #1	6/27/01	412				412	5	MO S/L	206	82
50	Bunk bed set #2	6/27/01	412				412	5	MO S/L	206	82
51	Bunk bed set #3	6/27/01	412				412	5	MO S/L	206	82
52	Bunk bed set #4	6/27/01	412				412	5	MO S/L	206	61
	Sold/Scrapped	10/15/04									
53	Mural	6/27/01	440				440	3	MO S/L	367	73
54	Flooring	6/11/01	6,626				6,626	5	MO S/L	3,423	1,326
55	Land - Tranq Cove	4/12/01	40,000				40,000	0	-- Land	0	0
	Sold/Scrapped	4/30/04									
56	Apartment Complex	4/12/01	163,536				163,536	40	MO S/L	11,243	1,363
	Sold/Scrapped	4/30/04									
57	Camera for Security System	5/15/01	280				280	3	MO S/L	249	31
58	GE washing machine	5/31/02	390				390	5	MO S/L	124	78
59	Water heater	8/20/02	661				661	5	MO S/L	176	133
60	Office XP software	6/25/02	348				348	3	MO S/L	174	116
61	1996 Dodge Caravan Minivan	6/10/02	4,120				4,120	3	MO S/L	2,174	1,374
62	HP CPU (Nancy's)	1/16/03	700				700	3	MO S/L	214	233
63	Frigidaire Refrigerator	4/11/03	304				304	5	MO S/L	46	60
64	Whirlpool upright freezer	4/11/03	393				393	5	MO S/L	59	78
65	Phone system	11/15/03	3,000				3,000	7	MO S/L	71	429
66	HP 6110 color printer (MK's)	8/22/03	287				287	3	MO S/L	32	95
67	Totaline air conditioner	6/11/03	454				454	5	MO S/L	53	30
	Sold/Scrapped	4/30/04									
69	Repiping of Shelter	2/24/03	3,173				3,173	40	MO S/L	66	79
70	Dell computer	4/16/04	776				776	5	MO S/L	0	104
71	Dell computer	4/16/04	776				776	5	MO S/L	0	104
72	Carpeting	10/06/04	1,723				1,723	3	MO S/L	0	144

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
73	Alarm	10/15/04	1,695				1,695	3 MO S/L	0	141
74	Carpeting	10/25/04	558				558	3 MO S/L	0	31
75	Sears Refrigerator	7/28/04	680				680	5 MO S/L	0	57
76	Bunk beds #5	10/28/04	598				598	2 MO S/L	0	50
77	Water pump	8/05/04	835				835	3 MO S/L	0	116
78	Water pump and relay box	11/29/04	601				601	3 MO S/L	0	17
	Total Other Depreciation		<u>491,328</u>				<u>491,328</u>		<u>94,833</u>	<u>15,676</u>
	Total ACRS and Other Depreciation		<u>491,328</u>				<u>491,328</u>		<u>94,833</u>	<u>15,676</u>
	Grand Totals		491,328				491,328		94,833	15,676
	Less: Dispositions		<u>206,753</u>				<u>206,753</u>		<u>13,757</u>	<u>1,535</u>
	Net Grand Totals		<u>284,575</u>				<u>284,575</u>		<u>81,076</u>	<u>14,141</u>