

1/21/10

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	2008	2007	DIFF
REVENUE			
CONTRIBUTIONS AND GRANTS.....	7,269,657	3,682,720	3,586,937
PROGRAM SERVICE REVENUE.....	505,948	613,562	-107,614
INVESTMENT INCOME.....	-181,751	21,802	-203,553
OTHER REVENUE.....	1,286	142,470	-141,184
TOTAL REVENUE.....	7,595,140	4,460,554	3,134,586
EXPENSES			
SALARIES, OTHER COMPENSATION, EMPLOYEE B	2,786,214	2,149,632	636,582
OTHER EXPENSES.....	2,597,867	2,317,760	280,107
TOTAL EXPENSES.....	5,384,081	4,467,392	916,689
NET ASSETS OR FUND BALANCES			
REVENUE LESS EXPENSES.....	2,211,059	-6,838	2,217,897
TOTAL ASSETS AT END OF YEAR.....	21,941,328	17,888,005	4,053,323
TOTAL LIABILITIES AT END OF YEAR.....	5,853,659	4,169,610	1,684,049
NET ASSETS OR FUND BALANCES AT END OF YE	16,087,669	13,718,395	2,369,274

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	2008	2007	DIFF
REVENUE			
INTEREST.....	46,765	21,802	24,963
DIVIDENDS.....	52,274	0	52,274
GROSS AMOUNT FROM SALE OF ASSETS.....	2,739,288	0	2,739,288
OTHER INCOME.....	717,472	825,913	-108,441
GROSS CONTRIBUTIONS, GIFTS, & GRANTS.....	7,269,657	3,682,720	3,586,937
COST OR OTHER BASIS OF ASSETS SOLD.....	3,204,828	0	3,204,828
TOTAL INCOME.....	7,620,628	4,530,435	3,090,193
EXPENSES AND DISBURSEMENTS			
COMPENSATION OF OFFICERS, ETC.....	348,548	184,132	164,416
OTHER SALARIES AND WAGES.....	1,962,382	1,754,288	208,094
INTEREST.....	194,375	183,656	10,719
TAXES.....	205,264	168,199	37,065
RENTS.....	260,814	229,806	31,008
DEPRECIATION AND DEPLETION.....	123,306	95,581	27,725
OTHER DEDUCTIONS.....	2,314,880	1,921,611	393,269
TOTAL DEDUCTIONS.....	5,409,569	4,537,273	872,296
EXCESS OF RECEIPTS OVER DISBURSEMENTS....	2,211,059	-6,838	2,217,897
FILING FEE			
FILING FEE.....	0	0	0
BALANCE DUE.....	0	0	0
SCHEDULE L			
BEGINNING ASSETS.....	17,888,005	17,510,111	377,894
BEGINNING LIABILITIES & NET WORTH.....	17,888,005	17,510,111	377,894
ENDING ASSETS.....	21,941,328	17,888,005	4,053,323
ENDING LIABILITIES & NET WORTH.....	21,941,328	17,888,005	4,053,323

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**FORM 990, PART IX, LINE 24
OTHER EXPENSES**

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
AUTO	32,625.	32,615.		10.
CONSULTANTS	61,732.	35,240.	4,047.	22,445.
EQUIPMENT	17,009.	14,584.	817.	1,608.
FOOD COST	968,757.	968,638.	119.	
MAIL HOUSE SERVICES	99,821.			99,821.
OTHER	30,767.	1,931.	22,087.	6,749.
POSTAGE AND SHIPPING	3,870.	2,675.	587.	608.
PRINTING AND PUBLICATIONS	3,596.	2,740.	535.	321.
PROFESSIONAL FEES	50,329.	42,553.	7,776.	
PROGRAM SERVICES	265,713.	265,654.		59.
REPAIRS & MAINTENANCE	34,618.	24,456.	6,736.	3,426.
SUPPLIES	151,440.	144,518.	5,148.	1,774.
TELEPHONE	20,922.	16,806.	1,982.	2,134.
TOTAL	\$ 1,741,199.	\$ 1,552,410.	\$ 49,834.	\$ 138,955.

**SCHEDULE D, PART V
ENDOWMENT FUNDS**

	CURRENT YEAR	PRIOR YEAR	TWO YRS. BACK	THREE YRS. BACK	FOUR YRS. BACK
BEGINNING OF YEAR BALANCE	704,397.	0.	0.	0.	0.
CONTRIBUTIONS					
INVESTMENT EARNINGS (LOSSES)	-122,967.				
GRANTS OR SCHOLARSHIPS					
EXPEND. FOR FACILITIES & PROGS					
ADMINISTRATIVE EXPENSES					
END OF YEAR BALANCE	581,430.	0.	0.	0.	0.

Return of Organization Exempt From Income Tax

2008

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

For the **2008** calendar year, or tax year beginning **7/01**, **2008**, and ending **6/30**, **2009**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See specific instructions.	SENIOR COMMUNITY CENTERS OF SAN DIEGO 525 14TH STREET, 2ND FLOOR ADMIN SAN DIEGO, CA 92101	D Employer Identification Number 95-2850121 E Telephone number (619) 235-6572 G Gross receipts \$ 10,825,456.
F Name and address of principal officer: PAUL DOWNEY SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ HTTP://SERVINGSENIORS.ORG		K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of Formation: 1970		M State of legal domicile: CA	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>PROVIDING SENIORS WITH NUTRITION AND OTHER SERVICES.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	26
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5	Total number of employees (Part V, line 2a)	5	78
	6	Total number of volunteers (estimate if necessary)	6	400
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	3,682,720.	7,269,657.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	613,562.	505,948.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,802.	-181,751.
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	142,470.	1,286.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,460,554.	7,595,140.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,149,632.	2,786,214.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>351,352.</u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,317,760.	2,597,867.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,467,392.	5,384,081.
19	Revenue less expenses. Subtract line 18 from line 12	-6,838.	2,211,059.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
	21	Total liabilities (Part X, line 26)	17,888,005.	21,941,328.
	22	Net assets or fund balances. Subtract line 21 from line 20	4,169,610.	5,853,659.
			13,718,395.	16,087,669.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ _____ Signature of officer	Date	
	▶ PAUL DOWNEY Type or print name and title.	PRESIDENT & CEO	

Paid Preparer's Use Only	Preparer's signature ▶ STEVEN W. NORTHCOTE	Date 1/21/10	Check if self-employed ▶ <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions) P00085554
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ LEAF & COLE, LLP 2810 CAMINO DEL RIO SOUTH, SUITE 200 SAN DIEGO, CA 92108-3820	EIN ▶ 95-2076568	Phone no. ▶ 619.294.7200	

May the IRS discuss this return with the preparer shown above? (see instructions) **Yes** **No**

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

PROVIDING SENIORS WITH NUTRITION AND OTHER SERVICES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

Yes No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

Yes No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,213,357. including grants of \$) (Revenue \$ 345,081.)

NUTRITION-SERVES OVER 1,000 MEALS DAILY TO LOW INCOME SENIORS AT THREE CENTERS. THE ORGANIZATION ALSO DELIVERS HOT MEALS TO HOME-BOUND SENIORS.

4b (Code:) (Expenses \$ 1,181,392. including grants of \$) (Revenue \$)

HEALTH AND SOCIAL SERVICES-SOCIAL WORKERS ASSIST SENIORS WITH ENTITLEMENTS SUCH AS SOCIAL SECURITY AND MEDICARE, HOUSING, PHYSICAL AND MENTAL HEALTH CARE, SUBSTANCE ABUSE AND OTHER ISSUES EFFECTING THEIR OVERALL WELL BEING.

4c (Code:) (Expenses \$ 478,616. including grants of \$) (Revenue \$ 160,867.)

HOUSING-THE ORGANIZATION PROVIDES DIRECT HOUSING SERVICES FOR HOMELESS SENIORS. IN ADDITION THE ORGANIZATION PROVIDES SUPPORTIVE HOUSING SERVICES FOR RESIDENTS OF MARKET SQUARE MANOR.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 4,873,365. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A.</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If 'Yes,' complete Schedule C, Part II.</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If 'Yes,' complete Schedule C, Part III.</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If 'Yes,' complete Schedule F, Part I.</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III.</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If 'Yes,' complete Schedule G, Part I.</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
20 Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H.</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? <i>If 'Yes,' complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II.</i>	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III.</i>		X

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Form 990 (2008)

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>	37	X

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Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1 a	10		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1 b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
1 c			
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2 a	78		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X
2 b			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3 a			
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
3 b			
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4 a			
b	If 'Yes,' enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 b			
c	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5 c			
6 a	Did the organization solicit any contributions that were not tax deductible?		X
6 a			
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
6 b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7 a			
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 c			
d	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
7 d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7 g			
h	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
7 h			
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9 a			
b	Did the organization make any distribution to a donor, donor advisor, or related person?		
9 b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a	
b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from other members or shareholders	11 a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b	

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Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
<i>For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>			
1 a	Enter the number of voting members of the governing body		
1 b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? <i>SEE. SCH. O.</i>	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 b	Each committee with authority to act on behalf of the governing body?	X	
9 a	Does the organization have local chapters, branches, or affiliates?		X
9 b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990. <i>SEE. SCHEDULE O.</i>		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O.</i>		X

Section B. Policies

		Yes	No
12 a	Does the organization have a written conflict of interest policy? <i>If 'No,' go to line 13.</i>	X	
12 b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12 c	Does the organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in Schedule O how this is done. SEE. SCHEDULE O.</i>	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
15 a	The organization's CEO, Executive Director, or top management official?	X	
15 b	Other officers of key employees of the organization? <i>SEE. SCHEDULE O.</i> Describe the process in Schedule O. (see instructions)	X	
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16 b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

- 17** List the states with which a copy of this Form 990 is required to be filed ► CA
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. *SEE SCHEDULE O*
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ► LEA CRUZ 525 14TH STREET, 2ND FL, SAN DIEGO, CA 92101 (619) 235-6572

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DALE GOLDMAN DIRECTOR	0.2	X					0.	0.	0.	
NANCY VAUGHAN DIRECTOR	0.2	X					0.	0.	0.	
SUSAN BOYLE, ESQ DIRECTOR	0.2	X					0.	0.	0.	
JONATHAN HELLER DIRECTOR	0.2	X					0.	0.	0.	
NYKIA WILSON DIRECTOR	0.2	X					0.	0.	0.	
LISA MEDNICK DIRECTOR	0.2	X					0.	0.	0.	
ROSALIE GEREVAS DIRECTOR	0.2	X					0.	0.	0.	
KATE ENGLER CHAIRMAN	0.2	X					0.	0.	0.	
WILL BEAMER VICE-CHAIR FIN	0.2	X					0.	0.	0.	
V. SCOTT CAIRNS DIRECTOR	0.2	X					0.	0.	0.	
SUSAN A CHANNICK DIRECTOR	0.2	X					0.	0.	0.	
RANDI ROSEN DIRECTOR	0.2	X					0.	0.	0.	
CHRIS GOLD DIRECTOR	0.2	X					0.	0.	0.	
SUSAN GONICK DIRECTOR	0.2	X					0.	0.	0.	
MARY O'TOUSA DIRECTOR	0.2	X					0.	0.	0.	
TANA L CLEAVES DIRECTOR	0.2	X					0.	0.	0.	
DARLYN DAVENPORT DIRECTOR	0.2	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont.)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JANET WINNICK DIRECTOR	0.2	X					0.	0.	0.	
THOMAS SMITH DIRECTOR	0.2	X					0.	0.	0.	
MAUREEN PIWOWARSKI COO & SECRETARY	40			X	X		138,949.	0.	0.	
PAUL DOWNEY PRESIDENT & CEO	40			X			209,599.	0.	0.	
SHEILA POTIKER DIRECTOR	0.2	X					0.	0.	0.	
ARLENE PRATER, ESQ DIRECTOR	0.2	X					0.	0.	0.	
MARK SHERWIN DIRECTOR	0.2	X					0.	0.	0.	
TIAH REPPAS, CPA DIRECTOR	0.2	X					0.	0.	0.	
MARGE SCHMALE VICE-CHAIR B.D.	0.2	X					0.	0.	0.	
JANET STANNARD DIRECTOR	0.2	X					0.	0.	0.	
KATHY PARKER DIRECTOR	0.2	X					0.	0.	0.	
JOY VACCARI DIRECTOR	0.2	X					0.	0.	0.	
ANNE DE MEULES MYERS DIRECTOR	0.2	X					0.	0.	0.	
1 b Total							348,548.	0.	0.	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual.	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person.		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of Services	(C) Compensation
KEYSTONE MANAGEMENT GROUP 943 10TH AVENUE SAN DIEGO, CA 92101	RENT PAYMENTS THP	202,975.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ **1**

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer Identification number 95-2850121
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Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DEBI ZUMTOBEL DIRECTOR	0.2	X					0.	0.	0.	

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e	2,483,367.			
	f All other contributions, gifts, grants, and similar amounts not included above	1 f	4,786,290.			
	g Noncash contribns included in lns 1a-1f: ... \$		171,187.			
h Total. Add lines 1a-1f			7,269,657.			
PROGRAM SERVICE REVENUE	2 a SENIOR SERVICES		Business Code			
			624200	345,081.	345,081.	
	b HOUSING SERVICES		624200	160,867.	160,867.	
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
g Total. Add lines 2a-2f			505,948.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)			283,789.		283,789.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents		(i) Real			
			(ii) Personal			
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory		(i) Securities	2,739,288.		
			(ii) Other			
	b Less: cost or other basis and sales expenses			3,204,828.		
	c Gain or (loss)			-465,540.		
	d Net gain or (loss)			-465,540.		-465,540.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a	26,774.		
	b Less: direct expenses		b	25,488.		
	c Net income or (loss) from fundraising events			1,286.		1,286.
	9 a Gross income from gaming activities. See Part IV, line 19		a			
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances		a				
b Less: cost of goods sold		b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a -----						
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			7,595,140.	505,948.	0.	-180,465.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	348,548.	273,139.	48,161.	27,248.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))	0.	0.	0.	0.
7 Other salaries and wages	1,962,382.	1,792,367.	24,614.	145,401.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	270,020.	236,302.	10,801.	22,917.
9 Other employee benefits				
10 Payroll taxes	205,264.	185,164.	5,542.	14,558.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	260,814.	255,955.	4,859.	
17 Travel	23,609.	19,471.	1,865.	2,273.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	194,375.	194,375.		
21 Payments to affiliates	232,000.	232,000.		
22 Depreciation, depletion, and amortization	126,065.	114,065.	12,000.	
23 Insurance	19,805.	18,117.	1,688.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>FOOD COST</u>	968,757.	968,638.	119.	
b <u>PROGRAM SERVICES</u>	265,713.	265,654.		59.
c <u>SUPPLIES</u>	151,440.	144,518.	5,148.	1,774.
d <u>MAIL HOUSE SERVICES</u>	99,821.			99,821.
e <u>CONSULTANTS</u>	61,732.	35,240.	4,047.	22,445.
f All other expenses	193,736.	138,360.	40,520.	14,856.
25 Total functional expenses. Add lines 1 through 24f	5,384,081.	4,873,365.	159,364.	351,352.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1	Cash — non-interest-bearing		1
	2	Savings and temporary cash investments	1,218,918.	2 963,144.
	3	Pledges and grants receivable, net	1,753,613.	3 1,058,732.
	4	Accounts receivable, net		4
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	491,663.	5 40,830.
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6
	7	Notes and loans receivable, net	11,717,306.	7 12,305,000.
	8	Inventories for sale or use	37,344.	8 34,876.
	9	Prepaid expenses and deferred charges	31,807.	9 38,104.
	10a	Land, buildings, and equipment: cost basis	10a 5,769,409.	
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 846,071.	10c 4,923,338.
	11	Investments — publicly-traded securities	1,388,980.	11 2,062,286.
	12	Investments — other securities. See Part IV, line 11		12
	13	Investments — program-related. See Part IV, line 11		13
	14	Intangible assets		14 5,518.
	15	Other assets. See Part IV, line 11	914,193.	15 509,500.
16	Total assets. Add lines 1 through 15 (must equal line 34)	17,888,005.	16 21,941,328.	
LIABILITIES	17	Accounts payable and accrued expenses	90,300.	17 213,626.
	18	Grants payable		18
	19	Deferred revenue	186,755.	19 525,308.
	20	Tax-exempt bond liabilities		20
	21	Escrow account liability. Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	3,200,000.	23 4,325,000.
	24	Unsecured notes and loans payable		24
	25	Other liabilities. Complete Part X of Schedule D	692,555.	25 789,725.
	26	Total liabilities. Add lines 17 through 25	4,169,610.	26 5,853,659.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27	Unrestricted net assets	3,234,450.	27 6,014,383.
	28	Temporarily restricted net assets	9,726,737.	28 9,317,638.
	29	Permanently restricted net assets	757,208.	29 755,648.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, and equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	Total net assets or fund balances.	13,718,395.	33 16,087,669.	
34	Total liabilities and net assets/fund balances.	17,888,005.	34 21,941,328.	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b	If 'Yes,' did the organization undergo the required audit or audits?	X	

BAA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer identification number 95-2850121
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Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 exempt 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)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III – Functionally integrated
 - d Type III – Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii) a family member of a person described in (i) above?		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
3 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.						
4 Total. Add lines 1-3.						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10.						
12 Gross receipts from related activities, etc. (see instructions).					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)).	14	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f.	15	%
16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	2,353,918.	2,565,969.	4,674,366.	3,682,720.	7,236,507.	20,513,480.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.	1,390,455.	1,409,249.	229,182.	613,562.	505,948.	4,148,396.
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
6 Total. Add lines 1-5.	3,744,373.	3,975,218.	4,903,548.	4,296,282.	7,742,455.	24,661,876.
7a Amounts included on lines 1, 2, 3 received from disqualified persons.	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6.)						24,661,876.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6.	3,744,373.	3,975,218.	4,903,548.	4,296,282.	7,742,455.	24,661,876.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	172,659.	213,432.	378,465.	21,802.	283,824.	1,070,182.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						0.
c Add lines 10a and 10b.	172,659.	213,432.	378,465.	21,802.	283,824.	1,070,182.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV.	331,379.	297,767.	360,433.	142,470.	59,924.	1,191,973.
13 Total support. (add lines 9, 10c, 11, and 12.)						26,924,031.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)).	15	91.6 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g.	16	88.1 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)).	17	4.0 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h.	18	5.1 %

19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

1/21/10

02:59PM

PART III, LINE 12 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>	<u>2005</u>	<u>2004</u>
OTHER REVENUE	33,150.	6,229.	41,814.	16,149.	55,978.
SPECIAL EVENTS	26,774.	136,241.	318,619.	281,618.	275,401.
TOTAL	<u>\$ 59,924.</u>	<u>\$ 142,470.</u>	<u>\$ 360,433.</u>	<u>\$ 297,767.</u>	<u>\$ 331,379.</u>

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ and 990-PF**
▶ **See separate instructions.**

OMB No. 1545-0047

2008

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule –

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-9 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1a-2 regarding art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	704,397.				
b Contributions					
c Investment earnings or losses	-122,967.				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	581,430.				

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	X	
(ii) related organizations		X
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?		X

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land		2,500,000.		2,500,000.
b Buildings		1,750,000.	12,760.	1,737,240.
c Leasehold improvements		604,408.	243,981.	360,427.
d Equipment		915,001.	589,330.	325,671.
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				4,923,338.

BAA

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Total.

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Includes Total row.

Part IX Other Assets (See Form 990, Part X, line 15) N/A

Table with 2 columns: (a) Description, (b) Book value. Includes Total row.

Part X Other Liabilities (See Form 990, Part X, line 25)

Table with 2 columns: (a) Description of Liability, (b) Amount. Rows include Federal Income Taxes, ACCRUED INTEREST PAYABLE, ACCRUED VACATION, PAYROLL LIABILITIES, and Total.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)		7,595,140.
2	Total expenses (Form 990, Part IX, column (A), line 25)		5,384,081.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		2,211,059.
4	Net unrealized gains (losses) on investments		167,985.
5	Donated services and use of facilities		
6	Investment expenses		-9,660.
7	Prior period adjustments		
8	Other (Describe in Part XIV) ... SEE PART XIV		-110.
9	Total adjustments (net). Add lines 4-8		158,215.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		2,369,274.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	7,778,892.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains on investments	2a	167,985.	
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIV) ... SEE PART XIV	2d	25,427.	
	e Add lines 2a through 2d	2e		193,412.
3	Subtract line 2e from line 1		3	7,585,480.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investments expenses not included on Form 990, Part VIII, line 7b	4a	9,660.	
	b Other (Describe in Part XIV)	4b		
	c Add lines 4a and 4b	4c		9,660.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		5	7,595,140.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	5,177,569.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Losses reported on Form 990, Part IX, line 25	2c		
	d Other (Describe in Part XIV) ... SEE PART XIV	2d	25,488.	
	e Add lines 2a through 2d	2e		25,488.
3	Subtract line 2e from line 1		3	5,152,081.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIV) ... SEE PART XIV	4b	232,000.	
	c Add lines 4a and 4b	4c		232,000.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	5,384,081.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

1/21/10

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**SCHEDULE D, PART XI, LINE 8
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

CHS - REALIZED LOSS IN MSMA, LP.....	\$	-77.
CHSHC - REALIZED LOSS IN CHS, LP.....		-68.
RELATED PARTY INTEREST INCOME.....		35.
	TOTAL	<u>\$ -110.</u>

**SCHEDULE D, PART XII, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

CHSHC - REALIZED LOSSES FROM CHS, LP.....	\$	-68.
INTEREST INCOME FOR RELATED ENTITIES.....		35.
PRIOR YEAR ADJUSTMENT.....		49.
SHC - REALIZED LOSSES FROM MSMA, LP.....		-77.
SPECIAL EVENT EXPENSE.....		25,488.
	TOTAL	<u>\$ 25,427.</u>

**SCHEDULE D, PART XIII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S**

SPECIAL EVENTS EXPENSES.....	\$	25,488.
	TOTAL	<u>\$ 25,488.</u>

**SCHEDULE D, PART XIII, LINE 4C
OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S**

CONTRIBUTION TO LIMITED PARTNERSHIP.....	\$	232,000.
	TOTAL	<u>\$ 232,000.</u>

SCHEDULE G
(Form 990 or 990-EZ)

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ **Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.**

**Open to Public
Inspection**

Name of the organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Mail solicitations | <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <input checked="" type="checkbox"/> Email solicitations | <input checked="" type="checkbox"/> Solicitation of government grants |
| <input checked="" type="checkbox"/> Phone solicitations | <input checked="" type="checkbox"/> Special fundraising events |
| <input checked="" type="checkbox"/> In-person solicitations | |

2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col.(i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
LAUTMAN	FUNDRAISER		X	230,498.	47,443.	183,055.
Total	▶			230,498.	47,443.	183,055.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
	VIRTUAL EVENT (event type)	(event type)	(total number)	(Add col. (a) through col. (c))
1	Gross receipts	26,774.		26,774.
2	Less: Charitable contributions			
3	Gross revenue (line 1 minus line 2)	26,774.		26,774.
DIRECT EXPENSES	4	Cash prizes		
	5	Non-cash prizes		
	6	Rent/facility costs		
	7	Other direct expenses	25,488.	25,488.
	8	Direct expense summary. Add lines 4- through 7 in column (d)		
9	Net income summary. Combine lines 3 and 8 in column (d)			1,286.

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
	(Add col. (a) through col. (c))			
1	Gross revenue			
DIRECT EXPENSES	2	Cash prizes		
	3	Non-cash prizes		
	4	Rent/facility costs		
	5	Other direct expenses		
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)			
8	Net gaming income summary. Combine lines 1 and 7 in column (d)			

	YES	NO
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If 'No,' Explain: ----- -----		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If 'Yes,' Explain: ----- -----		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		YES	NO
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility.....	13a	%	
b An outside facility.....	13b	%	
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
Name: ▶ -----			
Address: ▶ -----			
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?.....	15a		
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____.			
c If 'Yes,' enter name and address:			
Name: ▶ -----			
Address: ▶ -----			
16 Gaming manager information			
Name: ▶ -----			
Gaming manager compensation ▶ \$ _____			
Description of services provided: ▶ -----			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?.....	17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ▶ \$ _____			

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees**

2008

Department of the Treasury
Internal Revenue Service

**Attach to Form 990. To be completed by organizations that
answered 'Yes' to Form 990, Part IV, line 23.**

**Open to Public
Inspection**

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Part I Questions Regarding Compensation

	Yes	No
1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.....	1 b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?.....	2	
3 Indicate which, if any, of the following organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:		
a Receive a severance payment or change of control payment?.....	4 a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?.....	4 b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?.....	4 c	X
If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?.....	5 a	X
b Any related organization?.....	5 b	X
If 'Yes' to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?.....	6 a	X
b Any related organization?.....	6 b	X
If 'Yes' to line 6a or 6b, describe in Part III.		
7 For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III.....	7	X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.....	8	X

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other compensation				
PAUL DOWNEY	(i)	209,599.	0.	0.	0.	0.	209,599.	184,132.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Attach to Form 990 or Form 990-EZ.
▶ To be completed by organizations that answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer identification number 95-2850121
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
NEPTUNE INVEST LTD - DAVENPORT		X	1,125,000.	1,134,625.		X	X		X	
Total				▶ \$	1,134,625.					

Part III Grants or Assistance Benefitting Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

**SCHEDULE M
(Form 990)**

Non-Cash Contributions

OMB No. 1545-0047

2008

► To be completed by organizations that answered 'Yes'
on Form 990, Part IV, lines 29 or 30.

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Attach to Form 990.

Name of the organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial	X	3	138,919.	MARKET RENTS
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (LEGAL FEES)	X	1	32,268.	BASE FEES
26 Other ► (.....)				
27 Other ► (.....)				
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If 'Yes,' describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If 'Yes,' describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
GMWSWC, LLC 525 14TH STREET, STE 200 SAN DIEGO, CA 92101 95-2850121	REAL ESTATE	CA	0.	4,564,863.	NA

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
SENIOR HOUSING CORPORATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101 33-0909249	LOW/MODERATE INCOME HOUSING	CA	501 (C) (3)	501 (A) (2)	N/A
CITY HEIGHTS SENIOR HOUSING CORPORATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101 20-4303474	LOW/MODERATE INCOME HOUSING	CA	501 (C) (3)	501 (A) (2)	N/A
WEST SENIOR WELLNESS CENTER 525 14TH STREET, STE 200 SAN DIEGO, CA 92101 27-0297631	CARRYING ON SCC OF SD'S CHARITABLE PURPOSE	CA	501 (C) (3)	501 (A) (2)	N/A

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?		(I) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	
							Yes	No		Yes	No
MARKET SQUARE MANOR 5993 AVENIDA ENCINAS CARLSBAD, CA 92008 33-0939545	ASSOCIATES, S, SUITE 101 REAL ESTATE	LP CA	SHC - PT 2	RELATED	-98,947.	-227,180.	X		0.	X	
CITY HEIGHTS SQUARE 5993 AVENIDA ENCINAS CARLSBAD, CA 92008 20-3616099	LP S, STE 101 REAL ESTATE	LP CA	CHSHC -PT2	RELATED	-110.	231,890.		X	0.	X	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.

1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity.....		X
b Gift, grant, or capital contribution to other organization(s).....	X	
c Gift, grant, or capital contribution from other organization(s).....		X
d Loans or loan guarantees to or for other organization(s).....	X	
e Loans or loan guarantees by other organization(s).....		X
f Sale of assets to other organization(s).....		X
g Purchase of assets from other organization(s).....		X
h Exchange of assets.....		X
i Lease of facilities, equipment, or other assets to other organization(s).....		X
j Lease of facilities, equipment, or other assets from other organization(s).....		X
k Performance of services or membership or fundraising solicitations for other organization(s).....		X
l Performance of services or membership or fundraising solicitations by other organization(s).....		X
m Sharing of facilities, equipment, mailing lists, or other assets.....		X
n Sharing of paid employees.....		X
o Reimbursement paid to other organization for expenses.....		X
p Reimbursement paid by other organization for expenses.....		X
q Other transfer of cash or property to other organization(s).....	X	
r Other transfer of cash or property from other organization(s).....		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(1) SENIOR HOUSING CORPORATION	B	1,844,750.
(2) SENIOR HOUSING CORPORATION	D	3,200,000.
(3) SENIOR HOUSING CORPORATION	Q	50.
(4) CITY HEIGHTS SENIOR HOUSING CORPORATION	B	232,000.
(5) CITY HEIGHTS SENIOR HOUSING CORPORATION	D	9,105,000.
(6)		

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Dispropor- tionate allocations?		(G) Code V-UBI amount in Box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS

BYLAWS WERE CHANGED DURING THE YEAR

FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C

THE BOARD SIGNS CONFLICT OF INTEREST POLICY ANNUALLY.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEE

THE BOARD REVIEWS ANNUALLY IN AN EXECUTIVE SESSION THE ACHEIVEMENTS AND GOALS OF THE EXECUTIVE DIRECTOR HAS ACCOMPLISHED DURING THE YEAR AND THE BOARD DECISED THE COMPENSATION OF EXECTUIVE DIRECTOR BASED ON PERFORMANCE AND BUDGET.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON REQUEST

**Depreciation and Amortization
(Including Information on Listed Property)**

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

Name(s) shown on return

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Identifying number

95-2850121

Business or activity to which this form relates

FORM 990/990-PF

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 the instructions for a higher limit for certain businesses.	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
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 instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
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 2007 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	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 2009. 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.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	123,306.

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	
18	If you are electing 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 2008 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 2008 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 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 instructions	22	123,306.
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	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No 24b If 'Yes,' is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No								
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions).....								25
26 Property used more than 50% in a qualified business use:								
27 Property used 50% or less in a qualified business use:								
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.....							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.....								29

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles).....												
31 Total commuting miles driven during the year.....												
32 Total other personal (noncommuting) miles driven.....												
33 Total miles driven during the year. Add lines 30 through 32.....												
34 Was the vehicle available for personal use during off-duty hours?.....												
35 Was the vehicle used primarily by a more than 5% owner or related person?.....												
36 Is another vehicle available for personal use?.....												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?.....		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.....		
39 Do you treat all use of vehicles by employees as personal use?.....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?.....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.).....		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions):					
LOAN COSTS	4/11/09	8,277.		1	2,759.
43 Amortization of costs that began before your 2008 tax year.....					43
44 Total. Add amounts in column (f). See the instructions for where to report.....					44 2,759.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer identification number 95-2850121
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. 525 14TH STREET, 2ND FLOOR ADMIN	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN DIEGO, CA 92101	

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

● The books are in the care of. ▶ LEA CRUZ -----

Telephone No. ▶ (619) 235-6572 ----- FAX No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box. ▶ . If it is for part of the group, check this box. ▶ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 10, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ▶ calendar year 20__ or
- ▶ tax year beginning 7/01, 20 08, and ending 6/30, 20 09.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

TAXABLE YEAR **2008** **California Exempt Organization Annual Information Return**

FORM **199**

Calendar year 2008 or fiscal year beginning month **07** day **01** year **2008**, and ending month **06** day **30** year **2009**

A First Return Filed? Yes No **B** Type of organization Exempt under Section 23701 D (insert letter) IRC Section 4947(a)(1) trust CORP # **D-0679863**

Corporation/Organization Name **SENIOR COMMUNITY CENTERS OF SAN DIEGO** FEIN **95-2850121**

Address **525 14TH STREET, 2ND FLOOR ADMIN** City **SAN DIEGO, CA 92101** State ZIP Code

C Amended Return? Yes No
D Are you a subordinate/affiliate in a group exemption? Yes No
a Is this a group filing for affiliates? See General Instruction L. Yes No
b If 'Yes,' enter the number of affiliates. _____
c Are all affiliates included? Yes No (If 'No,' attach a list. See instructions.)
d Is this a separate return filed by an organization covered by a group ruling? Yes No
e Federal Group Exemption Number. _____
f Is a roster of subordinates attached? Yes No
E Final return? Dissolved Surrendered (Withdrawn) Merged/Reorganized (attach explanation)
 If a box is checked, enter date. _____
F Check the box if the organization filed: **1** 990T **2** 990PF **3** 990H
G If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. See General Instruction F. No filing fee is required.

H Accounting method used: **1** Cash **2** Accrual **3** Other
I If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If 'Yes,' complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations. Yes No
J Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If 'Yes,' complete an explanation and attach copies of revised documents. Yes No
K Is the organization exempt under R&TC Section 23701g? Yes No
 If 'Yes,' enter amount of gross receipts from nonmember sources. \$ _____
L Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No
M Is the organization a Limited Liability Corporation? Yes No
N Did the organization file Form 100 or Form 109 to report taxable income? Yes No

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8.	● 1	3,555,799.
	2 Gross dues and assessments from members and affiliates.	● 2	
	3 Gross contributions, gifts, grants, and similar amounts received. SEE SCH. B	● 3	7,269,657.
	4 Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction C.	● 4	10,825,456.
	5 Cost of goods sold.	● 5	
	6 Cost or other basis, and sales expenses of assets sold.	● 6	3,204,828.
	7 Total costs. Add line 5 and line 6.	7	3,204,828.
	8 Total gross income. Subtract line 7 from line 4.	● 8	7,620,628.
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18.	● 9	5,409,569.
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	● 10	2,211,059.
Filing Fee	11 Filing fee \$10 or \$25. See General Instruction F.	11	
	12 Total Payments.	12	
	13 Penalties and Interest. See General Instruction J.	13	
	14 Use tax. See General Instruction K.	● 14	
	15 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result.	15	

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer	PRESIDENT & CEO	Title	Date	● Telephone (619) 235-6572
Preparer's signature	STEVEN W. NORTHCOTE	Date	1/21/10	● Preparer's SSN/PTIN P00085554
Firm's name (or yours, if self-employed) and address	LEAF & COLE, LLP 2810 CAMINO DEL RIO SOUTH, SUITE 200 SAN DIEGO, CA 92108-3820			● FEIN 95-2076568 ● Telephone 619.294.7200

May the FTB discuss this return with the preparer shown above? See instructions. Yes No

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information. See Specific Line Instructions.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions.	● 1	
	2	Interest	● 2	46,765.
	3	Dividends	● 3	52,274.
	4	Gross rents	● 4	
	5	Gross royalties	● 5	
	6	Gross amount received from sale of assets (See Instructions)	● 6	2,739,288.
	7	Other income. Attach schedule. SEE. STATEMENT 1	● 7	717,472.
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.	8	3,555,799.
	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule	● 9	
Expenses and Disbursements	10	Disbursements to or for members	● 10	
	11	Compensation of officers, directors, and trustees. Attach schedule. SEE. STATEMENT 2	● 11	348,548.
	12	Other salaries and wages	● 12	1,962,382.
	13	Interest	● 13	194,375.
	14	Taxes	● 14	205,264.
	15	Rents	● 15	260,814.
	16	Depreciation and depletion (See Instructions)	● 16	123,306.
	17	Other. Attach schedule. SEE. STATEMENT 3	● 17	2,314,880.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	5,409,569.

Schedule L Balance Sheets

	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		1,218,918.	●	963,144.
2 Net accounts receivable		1,753,613.	●	1,058,732.
3 Net notes receivable. Attach schedule. ST. 4		12,208,969.	●	12,345,830.
4 Inventories		37,344.	●	34,876.
5 Federal and state government obligations			●	
6 Investments in other bonds. Attach sch.			●	
7 Investments in stock. Attach schedule. STMT. 5		1,388,980.	●	1,722,094.
8 Mortgage loans (number of loans _____)			●	
9 Other investments. Attach schedule		486,394.	●	345,840.
10 a Depreciable assets	1,056,946.		3,269,409.	
b Less accumulated depreciation	722,765.	334,181.	846,071.	2,423,338.
11 Land			●	2,500,000.
12 Other assets. Attach schedule. STM. 6		459,606.	●	547,474.
13 Total assets		17,888,005.		21,941,328.
Liabilities and net worth				
14 Accounts payable		90,300.	●	213,626.
15 Contributions, gifts, or grants payable			●	
16 Bonds and notes payable. Attach schedule. ST. 7			●	4,325,000.
17 Mortgages payable		3,200,000.	●	
18 Other liabilities. Attach schedule. STM. 8		879,310.		1,315,033.
19 Capital stock or principle fund		13,718,395.	●	16,087,669.
20 Paid-in or capital surplus. Attach reconciliation			●	
21 Retained earnings or income fund			●	
22 Total liabilities and net worth		17,888,005.		21,941,328.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1	Net income per books	●	2,369,274.	7	Income recorded on books this year not included in this return.		
2	Federal income tax	●		8	Deductions in this return not charged against book income this year.		
3	Excess of capital losses over capital gains	●		9	Total. Add line 7 and line 8	●	167,875.
4	Income not recorded on books this year. Attach schedule	●		10	Net income per return.		
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●			Subtract line 9 from line 6	●	-9,660.
6	Total.						158,215.
	Add line 1 through line 5		2,369,274.				2,211,059.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

CALIFORNIA COPY

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ and 990-PF**
▶ **See separate instructions.**

OMB No. 1545-0047

2008

Name of the organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule –

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer identification number 95-2850121
--	---

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CITY OF SAN DIEGO ----- 9335 HAZARD WAY ----- SAN DIEGO, CA 92123 -----	\$ 2,475,780.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	BANK OF AMERICA FOUNDATION ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 42,583.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	UNITED WAY ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 14,185.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	NEAL SCHMALE ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 118,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	UNION BANK OF CALIFORNIA ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	HD SUPPLY FACILITIES MAINT. ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	MR & MRS PAUL STANNARD 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	SEMPRA ENERGY 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	GARY & MARY WEST FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 3,036,588.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	CA WELLNESS FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 133,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	CA ENDOWMENT 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 148,770.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	IRENE WAHSEL 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 81,694.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	KELLY CAPITAL 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	ALLGAUER FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	DONALD & DARLENE SHILEY 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	TAPER FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	QUALCOMM INCORPORATED 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	MARY & STANLEY SMITH CHRITBLE TRUST 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	STRANAHAN FOUNDATION ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
20	KAISER PERMANENTE COMM BENEFITS ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
21	WELLS FARGO FOUNDATION ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
22	CHANGE A LIFE FOUNDATION ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
23	ROBERT M GOLDEN FOUNDATION ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
24	JEROME H TURK ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	PEG URVOAS 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	ELIZABETH KEADLE 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	CITIGROUP FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	SAMUEL & KATHERINE FRENCH FUND 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	MARGARET A CARGILL FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	PRICE FAMILY CHARITABLE FUND 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	U.S. BANK 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	MCCARTHY FAMILY FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	MAZON: A JEWISH RESPONSE FOR HUNGER 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	CAROLE L FINCH 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 6,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35	HOME AID SAN DIEGO 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
36	CECO 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	FANNIE MAE FOUNDATION 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
38	CYNTHIA FATICA 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
39	ARNOLD FISCHER 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
40	FRED HALLETT 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
41	ROBERT E PRICE 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
42	SD DOWNTOWN BREAKFAST ROTARY CLUB 525 14TH STREET, STE 200 SAN DIEGO, CA 92101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization SENIOR COMMUNITY CENTERS OF SAN DIEGO	Employer identification number 95-2850121
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Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43	HORTON HOUSE ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 47,870.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
44	MARKET SQUARE MANOR, LP ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 82,439.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
45	ST JOSEPH'S CATHEDRAL ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 8,610.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
46	LUCE FORWARD ATTORNEY AT LAW ----- 525 14TH STREET, STE 200 ----- SAN DIEGO, CA 92101 -----	\$ 32,268.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

SENIOR COMMUNITY CENTERS OF SAN DIEGO

Employer identification number

95-2850121

Part II Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
43	DONATED FACILITIES	\$ 47,870.	
44	DONATED FACILITES	\$ 82,439.	
45	DONATED FACILITIES	\$ 8,610.	
46	PRO BONO LEGAL FEES	\$ 32,268.	
		\$	
		\$	

BAA

Name of organization: SENIOR COMMUNITY CENTERS OF SAN DIEGO
 Employer identification number: 95-2850121

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry.)

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once – see instructions.) \$ N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
BUILDING IMPROVE	12/31/90	25,737.	20,998.	S/L	38	817.	
BUILDING IMPROVE	12/31/90	142,259.	116,067.	S/L	38	4,516.	
WATER HEATER	6/27/95	2,400.	2,400.	S/L	10		
DOOR, SECURITY L	6/27/95	1,190.	1,190.	S/L	10		
TILE/CARPET	6/08/95	7,853.	7,852.	S/L	10		
NEW OUTSIDE SIGN	12/15/99	4,014.	3,785.	S/L	10	227.	
ELECTRICAL	12/15/99	1,289.	1,216.	S/L	10	73.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15	123,306.	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	123,306.
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
LOAN COSTS	4/11/09	8,277.			1	2,759.
20 Total. Add the amounts in column (g).....					20	2,759.
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
AIR CONDITIONING	12/15/99	16,251.	15,329.	S/L	10	922.	
BRDWAY DOORS	3/29/00	14,635.	13,638.	S/L	10	1,000.	
WINDOW COVERINGS	6/28/00	4,140.	3,824.	S/L	10	315.	
DESKS/CHAIRS	10/13/95	293.	293.	S/L	5		
PC NETWORK SYSTE	6/07/96	12,758.	12,758.	S/L	5		
VCR: HSU110 MITS	6/28/96	226.	226.	S/L	5		
TV: TS2542 MAGNA	6/30/96	300.	300.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
PHONE SYSTEM: CO	6/30/96	11,407.	11,407.	S/L	5		
PC EQMT/SFWARE I	10/07/96	429.	429.	S/L	5		
2 SONY CELLULAR	3/10/97	472.	472.	S/L	5		
PC HARD DRIVE, M	6/30/97	513.	513.	S/L	5		
REFRIGERATOR, RO	9/11/97	439.	439.	S/L	5		
NOTEBK, EPS: (1) PE	11/19/97	2,098.	2,098.	S/L	5		
SOFTWARE, WD5.1	1/31/98	430.	430.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year	
20 Total. Add the amounts in column (g).....						20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
NOTEBK, EPS: (2)	2/13/98	4,341.	4,341.	S/L	5		
HARDWARE, (6) MEM	2/18/98	1,637.	1,637.	S/L	5		
HARDWARE, (4) ME	5/31/98	208.	208.	S/L	5		
PRINTER/SCANNER,	5/31/98	500.	500.	S/L	5		
NOTEBKS, EPS: ME	6/09/98	582.	582.	S/L	5		
CHAIRS, TASK, (1	6/11/98	1,284.	1,284.	S/L	5		
CHAIRS, TASK, AR	6/11/98	450.	450.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
SOFTWARE: DONOR P	6/15/98	6,291.	6,291.	S/L	5		
PC HW: HD, PORT,	6/29/98	2,583.	2,583.	S/L	5		
PC, PENT II, 233	6/30/98	1,640.	1,640.	S/L	5		
SOFTWARE: MIP AC	6/30/98	10,930.	10,930.	S/L	5		
PRINTER, LASERJE	2/23/99	400.	400.	S/L	5		
REFRIGERATORS	6/23/99	12,727.	12,727.	S/L	5		
RETERM CABINET,	6/23/99	14,596.	14,596.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
OVAN, MICROWAVE	6/23/99	1,580.	1,580.	S/L	5		
OVAN, MICROWAVE	6/28/99	3,107.	3,107.	S/L	5		
PC, PARKARD BELL	6/28/99	1,110.	1,110.	S/L	5		
WORKSTATION	6/30/99	8,189.	8,189.	S/L	5		
COMPUTER/MONITOR	9/24/99	1,185.	1,185.	S/L	5		
COMP FIREWALL	2/28/00	629.	629.	S/L	5		
TABLES & CHAIRS	6/25/00	9,920.	9,920.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....					20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
PHONE SYS UPGRAD	3/29/00	3,877.	3,877.	S/L	5		
PHONE SYS UPGRAD	5/10/00	2,127.	2,127.	S/L	5		
SERVER	3/06/00	4,303.	4,303.	S/L	5		
DELL COMPUTER	3/06/00	1,184.	1,184.	S/L	5		
DELL COMPUTER	3/06/00	1,184.	1,184.	S/L	5		
REFRIGERATOR, 2-	8/23/94	2,322.	2,322.	S/L	5		
TOASTER, TOASTMA	10/31/94	535.	535.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. FORM 199

Table with Corporation name (SENIOR COMMUNITY CENTERS OF SAN DIEGO) and California corporation number (D-0679863).

Part I Election to Expense Certain Property Under IRC Section 179

Table for Part I with 13 rows. Line 1: \$25,000; Line 3: \$200,000; Line 13: 13.

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

Table for Part II with 15 rows. Columns: (a) Description, (b) Date, (c) Cost, (d) Depreciation allowed, (e) Depreciation method, (f) Life or rate, (g) Depreciation for this year, (h) Additional first year depreciation.

Part III Summary

Table for Part III with 3 rows. Line 16: Total depreciation claimed for federal purposes; Line 17: Depreciation adjustment.

Part IV Amortization

Table for Part IV with 22 rows. Columns: (a) Description, (b) Date, (c) Cost, (d) Amortization allowed, (e) R&TC section, (f) Period or percentage, (g) Amortization for this year.

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
TABLES, 60"	6/30/95	1,201.	1,201.	S/L	5		
TREADMILL, BIKE,	5/28/99	4,565.	4,565.	S/L	5		
CAR, MITSUBIS,	6/18/98	7,095.	7,095.	S/L	5		
VAN, FORD E-150,	6/23/00	19,324.	19,324.	S/L	5		
COMPUTER EQUIPME	6/30/00	2,539.	2,539.	S/L	5		
COMPUTER EQUIPME	3/06/00	226.	226.	S/L	5		
OFFICE DIVIDERS	6/30/00	3,000.	3,000.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year	
20 Total. Add the amounts in column (g).....						20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
WEB SITE	6/30/00	5,100.	5,100.	S/L	5		
OTHER EQUIP	6/30/00	290.	290.	S/L	5		
VIDEO CAMERA (DI	3/27/01	860.	860.	S/L	5		
PHONE SYSTEM	6/27/01	10,296.	10,295.	S/L	5		
DELL COMPUTER-SE	6/28/01	2,562.	2,560.	S/L	5		
AIM-S-NETWORK	8/18/00	2,385.	2,386.	S/L	5		
DELL COMP	12/31/00	935.	936.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000									
2 Total cost of Section 179 property placed in service.....	2										
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000									
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4										
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:45%;">6 (a) Description of property</th> <th style="width:20%;">(b) Cost (business use only)</th> <th style="width:35%;">(c) Elected cost</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost						
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost									
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10										
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13										

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation	
	DELL COMP	1/21/01	863.	865.	S/L	5			
	DELL COMP	1/21/01	863.	865.	S/L	5			
	DELL COMP	1/21/01	863.	865.	S/L	5			
	EXECUTIVE DESKS	6/15/01	4,500.	4,500.	S/L	5			
	FLOOR MACHINE	1/11/01	2,483.	2,485.	S/L	5			
	VAN, DODGE DAKOT	2/25/02	33,074.	33,074.	S/L	5			
	WATER HEATERS	12/28/01	3,326.	3,326.	S/L	7			
15	Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year	
20	Total. Add the amounts in column (g).....						20	
21	Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21	
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
APPLIANCES	10/08/01	896.	896.	S/L	5		
DELL COMPUTER (2)	6/24/02	2,182.	2,182.	S/L	5		
DELL COMPUTER (3)	10/01/01	2,270.	2,270.	S/L	5		
FOOD PROCESSOR	11/29/01	2,391.	2,391.	S/L	5		
FOOD SLICER	11/29/01	2,150.	2,150.	S/L	5		
CONVECTION STEAM	11/29/01	10,638.	10,638.	S/L	5		
STACK CONVECTION	11/29/01	5,120.	5,120.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
BLAST CHILLER	11/29/01	10,126.	10,126.	S/L	5		
RANGE WITH OVEN	11/29/01	2,868.	2,868.	S/L	5		
RANGE 6 O.B.	11/29/01	1,267.	1,267.	S/L	5		
ICE MAKER-MODULA	11/29/01	2,688.	2,688.	S/L	5		
FOOD WARMER	11/29/01	1,715.	1,715.	S/L	5		
WIRE BASKETS	11/29/01	2,243.	2,243.	S/L	5		
TILTING SKILLET	11/29/01	4,163.	4,163.	S/L	5		
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....					20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	

2008 Corporation Depreciation and Amortization

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Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
MISC FURNITURE	6/27/02	10,124.	10,124.	S/L	5		
DOORS	11/30/01	5,230.	5,230.	S/L	7		
KITCHEN IMPROVEM	11/30/02	9,104.	7,347.	S/L	10	911.	
PHONE SYSTEM	6/30/03	7,511.	7,511.	S/L	5		
PHONE SYSTEM	8/15/03	3,045.	2,994.	S/L	5	51.	
OUTDOOR SIGNS/DO	6/30/04	16,994.	13,596.	S/L	5	3,398.	
SERVER - BROADWA	6/09/04	2,639.	2,156.	S/L	5	483.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....					20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. FORM 199

Table with 2 columns: Corporation name (SENIOR COMMUNITY CENTERS OF SAN DIEGO) and California corporation number (D-0679863)

Part I Election to Expense Certain Property Under IRC Section 179

Table with 5 columns for lines 1-13. Line 1: \$25,000; Line 3: \$200,000. Includes sub-table for lines 6-7 with columns (a) Description, (b) Cost, (c) Elected cost.

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

Table with 8 columns: (a) Description, (b) Date, (c) Cost, (d) Depreciation allowed, (e) Depreciation method, (f) Life or rate, (g) Depreciation for this year, (h) Additional first year depreciation. Rows include OUTDOOR FURNITUR, WINDOW BLINDS, JIB CRANE & BASK, etc.

Part III Summary

Table with 2 columns for lines 16-18. Line 16: Total depreciation claimed for federal purposes. Line 17: Depreciation adjustment.

Part IV Amortization

Table with 7 columns: (a) Description, (b) Date, (c) Cost, (d) Amortization allowed, (e) R&TC section, (f) Period or percentage, (g) Amortization for this year. Lines 20-22.

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. FORM 199

Table with 2 columns: Corporation name (SENIOR COMMUNITY CENTERS OF SAN DIEGO) and California corporation number (D-0679863)

Part I Election to Expense Certain Property Under IRC Section 179

Table with 5 columns for lines 1-13. Line 1: \$25,000; Line 3: \$200,000; Line 13: 13

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

Table with 8 columns: (a) Description of property, (b) Date acquired, (c) Cost or other basis, (d) Depreciation allowed or allowable in earlier years, (e) Depreciation method, (f) Life or rate, (g) Depreciation for this year, (h) Additional first year depreciation. Includes rows for VAN, MEALSTAR, GROEN, etc.

Part III Summary

Table with 2 columns for lines 16-18. Line 16: Total depreciation claimed for federal purposes; Line 18: Depreciation adjustment.

Part IV Amortization

Table with 7 columns: (a) Description of property, (b) Date acquired, (c) Cost or other basis, (d) Amortization allowed or allowable in earlier years, (e) R&TC section, (f) Period or percentage, (g) Amortization for this year. Includes lines 20-22.

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
EXCHANGE SERVER	5/13/06	5,175.	2,226.	S/L	5	1,033.	
LAPTOP	2/14/06	2,054.	992.	S/L	5	411.	
SERVER - PFSR	12/25/05	4,847.	2,423.	S/L	5	969.	
COOK CHILL KETTLE	6/27/06	84,988.	33,996.	S/L	5	16,998.	
ERGO SERVER TABL	6/26/06	9,919.	3,968.	S/L	5	1,984.	
145 FILL TRAY SE	6/26/06	18,851.	7,540.	S/L	5	3,770.	
MEAL TRUCK ADD'L	9/25/05	3,027.	2,254.	S/L	4	773.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
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5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost)..... 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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
FOUNTAIN	3/31/06	28,325.	6,374.	S/L	10	2,833.	
GREASE TRAP	6/13/06	1,500.	1,500.	S/L	2		
REFRIGERATORS	12/22/06	34,074.	10,222.	S/L	5	6,815.	
REFRIGERATORS	1/18/07	27,505.	7,793.	S/L	5	5,501.	
REFRIGERATORS	3/02/07	20,526.	5,473.	S/L	5	4,105.	
CLEANING EQUIPME	6/29/07	3,754.	747.	S/L	5	751.	
2008 FORD E-150	6/20/08	22,260.		S/L	5	4,451.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....						15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....						20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22

2008 Corporation Depreciation and Amortization

3885

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Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
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Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
FIREWALL VPN	7/14/07	1,429.	262.	S/L	5	286.	
NUTRITION COMPUT	8/01/07	1,121.	168.	S/L	5	224.	
LAPTOP	10/18/07	2,462.	328.	S/L	5	492.	
LAPTOPS	1/31/08	5,112.	426.	S/L	5	1,022.	
COMPUTER	5/18/08	724.	12.	S/L	5	145.	
SLICER SEMI AUTO	6/16/08	5,883.		S/L	5	1,177.	
DOUBLE DECK OVEN	6/16/08	7,004.		S/L	5	1,401.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	16
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	17
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	18

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....					20	20
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	21
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	22

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
UTILITY CART	6/20/08	522.		S/L	5	104.	
NEW AGE PAN RACK	6/20/08	1,483.		S/L	5	297.	
COOLER RACK	6/20/08	1,435.		S/L	5	287.	
UTILITY CARTS	6/20/08	26,955.		S/L	5	5,391.	
ROBOT COUPE	6/20/08	7,872.		S/L	5	1,574.	
UTILITY CARTS	6/20/08	1,047.		S/L	5	209.	
COMPUTER FOR DEV	2/12/09	1,284.		S/L	5	86.	
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....					15		

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	17
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	18
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20 Total. Add the amounts in column (g).....					20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....					21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....					22	

2008 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W. **FORM 199**

Corporation name SENIOR COMMUNITY CENTERS OF SAN DIEGO	California corporation number D-0679863
--	---

Part I Election to Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California.....	1	\$25,000
2 Total cost of Section 179 property placed in service.....	2	
3 Threshold cost of Section 179 property before reduction in limitation.....	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-.....	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property (elected Section 179 cost).....	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 prior taxable years.....	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5.....	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 2009. Add lines 9 and 10, less line 12.....	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

14 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation	
SLICERS & DICERS	7/03/08	1,013.		S/L	5	186.		
NEW COMPUTRITION	2/19/09	46,077.		S/L	5	3,072.		
CIP - WS WELLNES	6/30/09	314,863.		S/L	40			
BUILDING - WSW C	4/14/09	1,750,000.		S/L	40	12,760.		
LAND - WS WELLNE	4/14/09	2,500,000.			0			
SAN DIEGO RETAUR	6/30/09	99,226.		S/L	5			
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h).....							15	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g).....	16	18
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22.....	17	
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.).....	18	

Part IV Amortization

19 (a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year	
20 Total. Add the amounts in column (g).....						20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44.....						21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12.....						22	

CLIENT 01-115

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

1/21/10

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**STATEMENT 1
FORM 199, PART II, LINE 7
OTHER INCOME**

INCOME FROM SPECIAL EVENTS.....	\$	26,774.
OTHER INVESTMENT INCOME.....		184,750.
TOTAL	\$	<u>211,524.</u>

**STATEMENT 2
FORM 199, PART II, LINE 11
COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES**

CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DALE GOLDMAN 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	\$ 0.	\$ 0.	\$ 0.
NANCY VAUGHAN 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
SUSAN BOYLE, ESQ 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
JONATHAN HELLER 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
NYKIA WILSON 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
LISA MEDNICK 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
ROSALIE GEREVAS 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
KATE ENGLER 525 14TH STREET SAN DIEGO, CA 92101	CHAIRMAN 0.20	0.	0.	0.
WILL BEAMER 525 14TH STREET SAN DIEGO, CA 92101	VICE-CHAIR FIN 0.20	0.	0.	0.

1/21/10

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STATEMENT 2 (CONTINUED)
FORM 199, PART II, LINE 11
COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
V. SCOTT CAIRNS 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	\$ 0.	\$ 0.	0.
SUSAN A CHANNICK 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
RANDI ROSEN 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
CHRIS GOLD 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
SUSAN GONICK 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
MARY O'TOUSA 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
TANA L CLEAVES 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
DARLYN DAVENPORT 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
JANET WINNICK 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
THOMAS SMITH 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
MAUREEN PIWOWARSKI 525 14TH STREET, STE 200 SAN DIEGO, CA 92104	COO & SECRETARY 40.00	138,949.	4,683.	0.
PAUL DOWNEY 525 14TH STREET SAN DIEGO, CA 92101	PRESIDENT & CEO 40.00	209,599.	6,997.	0.

1/21/10

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STATEMENT 2 (CONTINUED)
FORM 199, PART II, LINE 11
COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
SHEILA POTIKER 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	\$ 0.	\$ 0.	\$ 0.
ARLENE PRATER, ESQ 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
MARK SHERWIN 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
TIAH REPPAS, CPA 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
MARGE SCHMALE 525 14TH STREET SAN DIEGO, CA 92101	VICE-CHAIR B.D. 0.20	0.	0.	0.
JANET STANNARD 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
KATHY PARKER 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
JOY VACCARI 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
ANNE DE MEULES MYERS 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
DEBI ZUMTOBEL 525 14TH STREET SAN DIEGO, CA 92101	DIRECTOR 0.20	0.	0.	0.
TOTAL		<u>\$ 348,548.</u>	<u>\$ 11,680.</u>	<u>\$ 0.</u>

**STATEMENT 3
FORM 199, PART II, LINE 17
OTHER EXPENSES**

AMORTIZATION.....	\$	2,759.
AUTO.....		32,625.
CONSULTANTS.....		61,732.
EQUIPMENT.....		17,009.
FOOD COST.....		968,757.
INSURANCE.....		19,805.
MAIL HOUSE SERVICES.....		99,821.
OTHER.....		30,767.
PAYMENTS TO AFFILIATES.....		232,000.
PENSION PLAN CONTRIBUTIONS.....		270,020.
POSTAGE AND SHIPPING.....		3,870.
PRINTING AND PUBLICATIONS.....		3,596.
PROFESSIONAL FEES.....		50,329.
PROGRAM SERVICES.....		265,713.
REPAIRS & MAINTENANCE.....		34,618.
SPECIAL EVENT EXPENSES.....		25,488.
SUPPLIES.....		151,440.
TELEPHONE.....		20,922.
TRAVEL.....		23,609.
	TOTAL	<u>\$ 2,314,880.</u>

**STATEMENT 4
FORM 199, SCHEDULE L, LINE 3
NET NOTES RECEIVABLE**

<u>RECEIVABLES REPORTED SEPARATELY</u>		<u>BALANCE DUE</u>
BORROWER'S NAME:	CITY HEIGHTS SQUARE L.P.	
PURPOSE OF LOAN:	DEVELOPMENT COSTS	
ORIGINAL AMOUNT:	\$ 491,663.	
BALANCE DUE:		\$ 40,830.
TOTAL RECEIVABLES REPORTED SEPARATELY		\$ 40,830.

<u>NOTES AND LOANS REPORTED SEPARATELY</u>		<u>BALANCE DUE</u>	<u>DOUBTFUL ACCOUNTS ALLOWANCE</u>
BORROWER'S NAME:	MARKET SQUARE MANOR, LP		
BORROWER'S TITLE:			
DATE OF NOTE:	2/08/2002		
MATURITY DATE:	2/08/2020		
REPAYMENT TERMS:	AVAILABLE FUNDS		
INTEREST RATE:	5.60%		
SECURITY PROVIDED:	DEED OF TRUST		
PURPOSE OF LOAN:	DEVELOPMENT COSTS		
BORROWER RELATIONSHIP:			
CONSIDERATION:	CASH		
CONSIDERATION FMV:			
ORIGINAL AMOUNT:	\$ 1,000,000.		
BALANCE DUE:		\$ 1,000,000.	
DOUBTFUL ACCT. ALLOW.:			\$ 0.
BORROWER'S NAME:	MARKET SQUARE MANOR, LP		
BORROWER'S TITLE:			
DATE OF NOTE:	12/04/2001		

**STATEMENT 4 (CONTINUED)
FORM 199, SCHEDULE L, LINE 3
NET NOTES RECEIVABLE**

<u>NOTES AND LOANS REPORTED SEPARATELY</u>	<u>BALANCE DUE</u>	<u>DOUBTFUL ACCOUNTS ALLOWANCE</u>
MATURITY DATE: 12/06/2006		
REPAYMENT TERMS: RESIDUAL RECEIPTS		
INTEREST RATE: 5.05%		
SECURITY PROVIDED: DEED OF TRUST		
PURPOSE OF LOAN: LAND PURCHASE		
BORROWER RELATIONSHIP:		
CONSIDERATION: LAND		
CONSIDERATION FMV:		
ORIGINAL AMOUNT: \$ 2,200,000.		
BALANCE DUE:	\$ 2,200,000.	
DOUBTFUL ACCT. ALLOW.:		\$ 0.
BORROWER'S NAME: CITY HEIGHTS SQUARE LP		
BORROWER'S TITLE:		
DATE OF NOTE: 2/16/2006		
MATURITY DATE: 2/15/2061		
REPAYMENT TERMS: ANNUAL WHEN IN SERVICE		
INTEREST RATE: 3.00%		
SECURITY PROVIDED: DEED OF TRUST		
PURPOSE OF LOAN: PROJECT DEVELOPMENT		
BORROWER RELATIONSHIP:		
CONSIDERATION:		
CONSIDERATION FMV:		
ORIGINAL AMOUNT: \$ 9,105,000.		
BALANCE DUE:	\$ 9,105,000.	
DOUBTFUL ACCT. ALLOW.:		\$ 0.
TOTAL NET NOTES AND LOANS REPORTED SEPARATELY		\$ 12,305,000.
TOTAL NET RECEIVABLES		<u>\$ 12,345,830.</u>

**STATEMENT 5
FORM 199, SCHEDULE L, LINE 7
INVESTMENTS IN STOCKS**

INVESTMENT IN BONDS.....	\$ 1,149,439.
INVESTMENT IN EQUITY FUND.....	0.
INVESTMENT IN WEBMD.....	572,655.
TOTAL	<u>\$ 1,722,094.</u>

**STATEMENT 6
FORM 199, SCHEDULE L, LINE 12
OTHER ASSETS**

ACCRUED INTEREST RECEIVABLE.....	497,246.
DEPOSITS.....	6,606.
INTANGIBLE ASSET.....	5,518.

CLIENT 01-115

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

1/21/10

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STATEMENT 6 (CONTINUED)
FORM 199, SCHEDULE L, LINE 12
OTHER ASSETS

PREPAID EXPENSES AND DEFERRED CHARGES.....	38,104.
TOTAL	<u>\$ 547,474.</u>

STATEMENT 7
FORM 199, SCHEDULE L, LINE 16
BONDS AND NOTES PAYABLE

<u>OTHER NOTES PAYABLE</u>	<u>BALANCE DUE</u>
LENDER'S NAME: FEDERAL HOME LOAN BANK OF SF	
DATE OF NOTE: 2/08/2002	
MATURITY DATE: 2/08/2017	
REPAYMENT TERMS: PAYABLE IF NOT IN COMPLIANCE	
INTEREST RATE: 5.6	
SECURITY PROVIDED: DEED OF TRUST	
PURPOSE OF LOAN: DEVELOP MARKET SQUARE MANOR	
DESC. OF CONSIDERATION: CASH	
ORIGINAL AMOUNT: 1,000,000.	
BALANCE DUE:	1,000,000.
LENDER'S NAME: REDEVELOPMENT AGENCY OF SD	
DATE OF NOTE: 12/04/2001	
MATURITY DATE: 12/04/2056	
REPAYMENT TERMS: PAYABLE IF NOT IN COMPLIANCE	
INTEREST RATE: 5.05	
SECURITY PROVIDED: DEED OF TRUST	
PURPOSE OF LOAN: DEVELOP MARKET SQUARE MANOR	
DESC. OF CONSIDERATION: LAND	
ORIGINAL AMOUNT: 2,200,000.	
BALANCE DUE:	2,200,000.
LENDER'S NAME: NEPTUNE INVESTMENTS LTD., LP	
DATE OF NOTE: 4/13/2009	
MATURITY DATE: 10/13/2009	
REPAYMENT TERMS: PRINC & INTEREST ON MATURITY	
INTEREST RATE: 4	
SECURITY PROVIDED: DEED OF TRUST	
PURPOSE OF LOAN: PURCHASE OF LAND AND BUILDING	
DESC. OF CONSIDERATION: LAND AND A BUILDING	
ORIGINAL AMOUNT: 1,125,000.	
BALANCE DUE:	1,125,000.
TOTAL OTHER NOTES PAYABLE	<u>\$ 4,325,000.</u>
TOTAL NOTES AND BONDS PAYABLE	<u>\$ 4,325,000.</u>

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**STATEMENT 8
FORM 199, SCHEDULE L, LINE 18
OTHER LIABILITIES**

ACCRUED INTEREST PAYABLE	506,871.
ACCRUED VACATION	160,278.
DEFERRED REVENUE	525,308.
PAYROLL LIABILITIES	122,576.
TOTAL	<u>\$ 1,315,033.</u>

**STATEMENT 9
FORM 199, SCHEDULE M-1, LINE 7
INCOME RECORDED ON BOOKS NOT ON RETURN**

INTEREST INCOME FOR RELATED PARTIES	\$ 35.
UNREALIZED GAINS	167,985.
UNREALIZED LOSS - CHSHC, LP	-68.
UNREALIZED LOSS - SHC, LP	-77.
TOTAL	<u>\$ 167,875.</u>

**STATEMENT 10
FORM 199, SCHEDULE M-1, LINE 8
DEDUCTIONS ON RETURN NOT ON BOOKS**

INVESTMENT EXPENSES	\$ -9,660.
TOTAL	<u>\$ -9,660.</u>

IN
MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

WEBSITE ADDRESS:
<http://ag.ca.gov/charities/>

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1. IRS extensions will be honored.



State Charity Registration Number <u>015232</u> SENIOR COMMUNITY CENTERS OF SAN DIEGO <small>Name of Organization</small> <u>525 14TH STREET, 2ND FLOOR ADMIN</u> <small>Address (Number and Street)</small> <u>SAN DIEGO, CA 92101</u> <small>City or Town State ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>D-0679863</u> Federal Employer ID No. <u>95-2850121</u>
---	---

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A – ACTIVITIES

For your most recent full accounting period (beginning 7/01/08 ending 6/30/09) list:
 Gross annual revenue \$ 7,595,140. Total assets \$ 21,941,328.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer 'yes' to any of the questions below, you must attach a separate sheet providing an explanation and details for each 'yes' response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During this reporting period, did non-program expenditures exceed 50% of gross revenues?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If 'yes,' provide an attachment listing the name, address, and telephone number of the service provider.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number. SEE STATEMENT 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7 During this reporting period, did the organization hold a raffle for charitable purposes? If 'yes,' provide an attachment indicating the number of raffles and the date(s) they occurred.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Does the organization conduct a vehicle donation program? If 'yes,' provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Organization's area code and telephone number (619) 235-6572

Organization's e-mail address SERVINGSENIORS@SERVINGSENIORS.ORG

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer <u>PAUL DOWNEY</u>	Printed Name <u>PAUL DOWNEY</u>	Title <u>PRESIDENT & CEO</u>	Date
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1/21/10

02:59PM

**STATEMENT 1
FORM RRF-1, PART B, LINE 6
GOVERNMENT AGENCY THAT PROVIDED FUNDING**

COUNTY OF SAN DIEGO
AGING AND INDEPENDENCE SERVICES
9335 HAZARD WAY
SAN DIEGO CA 92123
JUDY WONG 619-235-6572

COUNTY OF SAN DIEGO
COUNTY ADMINISTRATION CENTER
1600 PACIFIC HIGHWAY

CLIENT 01-115

SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

1/21/10

02:59PM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
FORM 199										
AMORTIZATION										
168	LOAN COSTS	4/11/09		8,277				S/L	1	2,759
TOTAL AMORTIZATION				8,277		0	0			2,759
AUTO / TRANSPORT EQUIPMENT										
59	CAR, MITSUBIS, EXPO,93	6/18/98		7,095			7,095	S/L	5	0
60	VAN, FORD E-150, 2000	6/23/00		19,324			19,324	S/L	5	0
76	VAN, DODGE DAKOTA	2/25/02		33,074			33,074	S/L	5	0
106	VAN, 2005 FORD E-150	6/09/05		22,116			13,638	S/L	5	4,423
107	MEALSTAR DELIVERY TRUCK	5/23/05		31,105			19,181	S/L	5	6,221
119	MEAL TRUCK ADD'L COSTS	9/25/05		3,027			2,254	S/L	4	773
126	2008 FORD E-150 VAN	6/20/08		22,260				S/L	5	4,451
TOTAL AUTO / TRANSPORT EQUI				138,001		0	94,566			15,868
BUILDINGS										
144	BUILDING - WSW CENTER	4/14/09		1,750,000				S/L	40	12,760
TOTAL BUILDINGS				1,750,000		0	0			12,760
IMPROVEMENTS										
1	BUILDING IMPROVEMENTS	12/31/90		25,737			20,998	S/L	37.5	817
2	BUILDING IMPROVEMENTS	12/31/90		142,259			116,067	S/L	37.5	4,516
3	WATER HEATER	6/27/95		2,400			2,400	S/L	10	0
4	DOOR, SECURITY LOBBY	6/27/95		1,190			1,190	S/L	10	0
5	TILE/CARPET	6/08/95		7,853			7,852	S/L	10	0
6	NEW OUTSIDE SIGNAGE	12/15/99		4,014			3,785	S/L	10	227
7	ELECTRICAL	12/15/99		1,289			1,216	S/L	10	73
8	AIR CONDITIONING	12/15/99		16,251			15,329	S/L	10	922
9	BRDWAY DOORS	3/29/00		14,635			13,638	S/L	10	1,000
10	WINDOW COVERINGS	6/28/00		4,140			3,824	S/L	10	315
77	WATER HEATERS	12/28/01		3,326			3,326	S/L	7	0
93	DOORS	11/30/01		5,230			5,230	S/L	7	0
94	KITCHEN IMPROVEMENTS	11/30/02		9,104			7,347	S/L	10	911
97	OUTDOOR SIGNS/DONOR WALL	6/30/04		16,994			13,596	S/L	5	3,398
100	WINDOW BLINDS - PFSR	6/30/04		2,498			2,000	S/L	5	498

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105	WINDOW TINTING	6/30/04		2,800			2,239	S/L	5	561
120	FOUNTAIN	3/31/06		28,325			6,374	S/L	10	2,833
121	GREASE TRAP	6/13/06		1,500			1,500	S/L	1.8	0
143	CIP - WS WELLNESS CENTER	6/30/09		314,863				S/L	40	0
TOTAL IMPROVEMENTS				604,408		0	227,911			16,071
LAND										
145	LAND - WS WELLNESS CENTER	4/14/09		2,500,000						0
TOTAL LAND				2,500,000		0	0			0
MACHINERY AND EQUIPMENT										
11	DESKS/CHAIRS	10/13/95		293			293	S/L	5	0
12	PC NETWORK SYSTEM	6/07/96		12,758			12,758	S/L	5	0
13	VCR: HSU110 MITSUBISHI	6/28/96		226			226	S/L	5	0
14	TV: TS2542 MAGNAVOX	6/30/96		300			300	S/L	5	0
15	PHONE SYSTEM: COMM+	6/30/96		11,407			11,407	S/L	5	0
16	PC EQMT/SFWARE INSTALL	10/07/96		429			429	S/L	5	0
17	2 SONY CELLULAR PHONES	3/10/97		472			472	S/L	5	0
18	PC HARD DRIVE, MB, MEM	6/30/97		513			513	S/L	5	0
19	REFRIGERATOR, ROPER	9/11/97		439			439	S/L	5	0
20	NOTEBK, EPS:(1)PENTIUM	11/19/97		2,098			2,098	S/L	5	0
21	SOFTWARE, WD5.1	1/31/98		430			430	S/L	5	0
22	NOTEBK, EPS:(2) PENTIUM	2/13/98		4,341			4,341	S/L	5	0
23	HARDWARE,(6)MEM UPGRADE	2/18/98		1,637			1,637	S/L	5	0
24	HARDWARE, (4) MEM UPGRADE	5/31/98		208			208	S/L	5	0
25	PRINTER/SCANNER, BANNER	5/31/98		500			500	S/L	5	0
26	NOTEBKS, EPS: MEM UPGRADE	6/09/98		582			582	S/L	5	0
27	CHAIRS, TASK, (11) BUR	6/11/98		1,284			1,284	S/L	5	0
28	CHAIRS, TASK, ARM (3) BUR	6/11/98		450			450	S/L	5	0
29	SOFTWARE:DONOR PREF	6/15/98		6,291			6,291	S/L	5	0
30	PC HW: HD, PORT, BU TAPE	6/29/98		2,583			2,583	S/L	5	0
31	PC, PENT II, 233, 32MEG	6/30/98		1,640			1,640	S/L	5	0
32	SOFTWARE: MIP ACCOUNTING	6/30/98		10,930			10,930	S/L	5	0
33	PRINTER, LASERJET110	2/23/99		400			400	S/L	5	0
34	REFRIGERATORS	6/23/99		12,727			12,727	S/L	5	0
35	RETHEM CABINET, CARTER-	6/23/99		14,596			14,596	S/L	5	0
36	OVAN, MICROWAVE AMANA RC2	6/23/99		1,580			1,580	S/L	5	0

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
37	OVAN, MICROWAVE PANASNE	6/28/99		3,107			3,107	S/L	5	0
38	PC, PARKARD BELL PENT II	6/28/99		1,110			1,110	S/L	5	0
39	WORKSTATION	6/30/99		8,189			8,189	S/L	5	0
40	COMPUTER/MONITOR	9/24/99		1,185			1,185	S/L	5	0
41	COMP FIREWALL	2/28/00		629			629	S/L	5	0
42	TABLES & CHAIRS	6/25/00		9,920			9,920	S/L	5	0
43	PHONE SYS UPGRADE	3/29/00		3,877			3,877	S/L	5	0
44	PHONE SYS UPGRADE	5/10/00		2,127			2,127	S/L	5	0
45	SERVER	3/06/00		4,303			4,303	S/L	5	0
46	DELL COMPUTER	3/06/00		1,184			1,184	S/L	5	0
47	DELL COMPUTER	3/06/00		1,184			1,184	S/L	5	0
48	REFRIGERATOR, 2-DR	8/23/94		2,322			2,322	S/L	5	0
49	TOASTER, TOASTMASTER	10/31/94		535			535	S/L	5	0
50	MEAL CARD SWIPE	4/06/95		5,040			5,040	S/L	5	0
51	TOASTER, TOASTMASTER	6/19/95		508			508	S/L	5	0
52	CART, THRIFT-1, 2 SHELF	6/27/95		297			297	S/L	5	0
53	POLISHER, POWRFLITE	6/30/95		965			965	S/L	5	0
54	POLISHER ATTACHMENTS	6/30/95		143			143	S/L	5	0
55	VAC, WET/DRY, POWRFLITE	6/29/95		460			460	S/L	5	0
56	REFRIGERATOR, 2-DR	6/30/95		1,991			1,991	S/L	5	0
57	TABLES, 60"	6/30/95		1,201			1,201	S/L	5	0
58	TREADMILL, BIKE, WGHTS	5/28/99		4,565			4,565	S/L	5	0
61	COMPUTER EQUIPMENT	6/30/00		2,539			2,539	S/L	5	0
62	COMPUTER EQUIPMENT	3/06/00		226			226	S/L	5	0
63	OFFICE DIVIDERS	6/30/00		3,000			3,000	S/L	5	0
64	WEB SITE	6/30/00		5,100			5,100	S/L	5	0
65	OTHER EQUIP	6/30/00		290			290	S/L	5	0
66	VIDEO CAMERA (DIGITAL)	3/27/01		860			860	S/L	5	0
67	PHONE SYSTEM	6/27/01		10,296			10,295	S/L	5	0
68	DELL COMPUTER-SERVER	6/28/01		2,562			2,560	S/L	5	0
69	AIM-S-NETWORK	8/18/00		2,385			2,386	S/L	5	0
70	DELL COMP	12/31/00		935			936	S/L	5	0
71	DELL COMP	1/21/01		863			865	S/L	5	0
72	DELL COMP	1/21/01		863			865	S/L	5	0
73	DELL COMP	1/21/01		863			865	S/L	5	0
74	EXECUTIVE DESKS (3)	6/15/01		4,500			4,500	S/L	5	0
75	FLOOR MACHINE	1/11/01		2,483			2,485	S/L	5	0
78	APPLIANCES	10/08/01		896			896	S/L	5	0
79	DELL COMPUTER (2)	6/24/02		2,182			2,182	S/L	5	0

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SENIOR COMMUNITY CENTERS OF SAN DIEGO

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80	DELL COMPUTER (3)	10/01/01		2,270			2,270	S/L	5	0
81	FOOD PROCESSOR	11/29/01		2,391			2,391	S/L	5	0
82	FOOD SLICER	11/29/01		2,150			2,150	S/L	5	0
83	CONVECTION STEAMER	11/29/01		10,638			10,638	S/L	5	0
84	STACK CONVECTION OVEN	11/29/01		5,120			5,120	S/L	5	0
85	BLAST CHILLER	11/29/01		10,126			10,126	S/L	5	0
86	RANGE WITH OVEN	11/29/01		2,868			2,868	S/L	5	0
87	RANGE 6 O.B.	11/29/01		1,267			1,267	S/L	5	0
88	ICE MAKER-MODULAR CUBER	11/29/01		2,688			2,688	S/L	5	0
89	FOOD WARMER	11/29/01		1,715			1,715	S/L	5	0
90	WIRE BASKETS	11/29/01		2,243			2,243	S/L	5	0
91	TILTING SKILLET	11/29/01		4,163			4,163	S/L	5	0
92	MISC FURNITURE	6/27/02		10,124			10,124	S/L	5	0
95	PHONE SYSTEM	6/30/03		7,511			7,511	S/L	5	0
96	PHONE SYSTEM	8/15/03		3,045			2,994	S/L	5	51
98	SERVER - BROADWAY	6/09/04		2,639			2,156	S/L	5	483
99	OUTDOOR FURNITURE - PFSR	6/30/04		12,537			10,028	S/L	5	2,509
101	JIB CRANE & BASKET	6/30/04		21,051			16,840	S/L	5	4,211
102	HOT FOOD TABLE - 5 WELLS	6/30/04		1,406			1,124	S/L	5	282
103	WIRE BASKETS	6/30/04		3,414			2,732	S/L	5	682
104	WATER SOFTNERS - BOILERS	6/30/04		4,407			3,524	S/L	5	883
108	GROEN TILT SKILLET	6/29/05		11,308			6,786	S/L	5	2,262
109	GROEN STEAMER W/ H2O FILT	6/29/05		12,036			7,221	S/L	5	2,407
110	FURNITURE-DINING & REC	6/29/05		20,879			12,873	S/L	5	4,174
111	TRAULSEN ROLL IN REFER	6/29/05		4,489			2,769	S/L	5	898
112	GARLAND CONVECTION OVEN	6/29/05		7,375			4,585	S/L	5	1,475
113	EXCHANGE SERVER	5/13/06		5,175			2,226	S/L	5	1,033
114	LAPTOP	2/14/06		2,054			992	S/L	5	411
115	SERVER - PFSR	12/25/05		4,847			2,423	S/L	5	969
116	COOK CHILL KETTLE W/ COMP	6/27/06		84,988			33,996	S/L	5	16,998
117	ERGO SERVER TABLE TOP	6/26/06		9,919			3,968	S/L	5	1,984
118	145 FILL TRAY SEALER	6/26/06		18,851			7,540	S/L	5	3,770
122	REFRIGERATORS	12/22/06		34,074			10,222	S/L	5	6,815
123	REFRIGERATORS	1/18/07		27,505			7,793	S/L	5	5,501
124	REFRIGERATORS	3/02/07		20,526			5,473	S/L	5	4,105
125	CLEANING EQUIPMENT	6/29/07		3,754			747	S/L	5	751
127	FIREWALL VPN	7/14/07		1,429			262	S/L	5	286
128	NUTRITION COMPUTER	8/01/07		1,121			168	S/L	5	224
129	LAPTOP	10/18/07		2,462			328	S/L	5	492

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130	LAPTOPS	1/31/08		5,112			426	S/L	5	1,022
131	COMPUTER	5/18/08		724			12	S/L	5	145
132	SLICER SEMI AUTOMATIC	6/16/08		5,883				S/L	5	1,177
133	DOUBLE DECK OVEN	6/16/08		7,004				S/L	5	1,401
134	UTILITY CART	6/20/08		522				S/L	5	104
135	NEW AGE PAN RACKS	6/20/08		1,483				S/L	5	297
136	COOLER RACK	6/20/08		1,435				S/L	5	287
137	UTILITY CARTS	6/20/08		26,955				S/L	5	5,391
138	ROBOT COUPE	6/20/08		7,872				S/L	5	1,574
139	UTILITY CARTS	6/20/08		1,047				S/L	5	209
140	COMPUTER FOR DEVELOPMENT	2/12/09		1,284				S/L	5	86
141	SLICERS & DICERS	7/03/08		1,013				S/L	5	186
142	NEW COMPUTRITION PROGRAM	2/19/09		46,077				S/L	5	3,072
146	SAN DIEGO RESTAURANT ADD'N	6/30/09		99,226				S/L	5	0
TOTAL MACHINERY AND EQUIPME				777,001		0	400,288			78,607
TOTAL DEPRECIATION				<u>5,769,410</u>		<u>0</u>	<u>722,765</u>			<u>123,306</u>
GRAND TOTAL AMORTIZATION				8,277		0	0			2,759
GRAND TOTAL DEPRECIATION				<u>5,769,410</u>		<u>0</u>	<u>722,765</u>			<u>123,306</u>

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TOTAL AMORTIZATION				8,277		0	0			2,759
AUTO / TRANSPORT EQUIPMENT										
59	CAR, MITSUBIBIS, EXPO,93	6/18/98		7,095			7,095	S/L	5	0
60	VAN, FORD E-150, 2000	6/23/00		19,324			19,324	S/L	5	0
76	VAN, DODGE DAKOTA	2/25/02		33,074			33,074	S/L	5	0
106	VAN, 2005 FORD E-150	6/09/05		22,116			13,638	S/L	5	4,423
107	MEALSTAR DELIVERY TRUCK	5/23/05		31,105			19,181	S/L	5	6,221
119	MEAL TRUCK ADD'L COSTS	9/25/05		3,027			2,254	S/L	4	773
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TOTAL AUTO / TRANSPORT EQUI				138,001		0	94,566			15,868
BUILDINGS										
144	BUILDING - WSW CENTER	4/14/09		1,750,000				S/L	40	12,760
TOTAL BUILDINGS				1,750,000		0	0			12,760
IMPROVEMENTS										
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3	WATER HEATER	6/27/95		2,400			2,400	S/L	10	0
4	DOOR, SECURITY LOBBY	6/27/95		1,190			1,190	S/L	10	0
5	TILE/CARPET	6/08/95		7,853			7,852	S/L	10	0
6	NEW OUTSIDE SIGNAGE	12/15/99		4,014			3,785	S/L	10	227
7	ELECTRICAL	12/15/99		1,289			1,216	S/L	10	73
8	AIR CONDITIONING	12/15/99		16,251			15,329	S/L	10	922
9	BRDWAY DOORS	3/29/00		14,635			13,638	S/L	10	1,000
10	WINDOW COVERINGS	6/28/00		4,140			3,824	S/L	10	315
77	WATER HEATERS	12/28/01		3,326			3,326	S/L	7	0
93	DOORS	11/30/01		5,230			5,230	S/L	7	0
94	KITCHEN IMPROVEMENTS	11/30/02		9,104			7,347	S/L	10	911
97	OUTDOOR SIGNS/DONOR WALL	6/30/04		16,994			13,596	S/L	5	3,398
100	WINDOW BLINDS - PFSR	6/30/04		2,498			2,000	S/L	5	498

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143	CIP - WS WELLNESS CENTER	6/30/09		314,863				S/L	40	0
	TOTAL IMPROVEMENTS			604,408		0	227,911			16,071
	LAND									
145	LAND - WS WELLNESS CENTER	4/14/09		2,500,000						0
	TOTAL LAND			2,500,000		0	0			0
	MACHINERY AND EQUIPMENT									
11	DESKS/CHAIRS	10/13/95		293			293	S/L	5	0
12	PC NETWORK SYSTEM	6/07/96		12,758			12,758	S/L	5	0
13	VCR: HSU110 MITSUBISHI	6/28/96		226			226	S/L	5	0
14	TV: TS2542 MAGNAVOX	6/30/96		300			300	S/L	5	0
15	PHONE SYSTEM: COMM+	6/30/96		11,407			11,407	S/L	5	0
16	PC EQMT/SFWARE INSTALL	10/07/96		429			429	S/L	5	0
17	2 SONY CELLULAR PHONES	3/10/97		472			472	S/L	5	0
18	PC HARD DRIVE, MB, MEM	6/30/97		513			513	S/L	5	0
19	REFRIGERATOR, ROPER	9/11/97		439			439	S/L	5	0
20	NOTEBK, EPS:(1)PENTIUM	11/19/97		2,098			2,098	S/L	5	0
21	SOFTWARE, WD5.1	1/31/98		430			430	S/L	5	0
22	NOTEBK, EPS:(2) PENTIUM	2/13/98		4,341			4,341	S/L	5	0
23	HARDWARE,(6)MEM UPGRADE	2/18/98		1,637			1,637	S/L	5	0
24	HARDWARE, (4) MEM UPGRADE	5/31/98		208			208	S/L	5	0
25	PRINTER/SCANNER, BANNER	5/31/98		500			500	S/L	5	0
26	NOTEBKS, EPS: MEM UPGRADE	6/09/98		582			582	S/L	5	0
27	CHAIRS, TASK, (11) BUR	6/11/98		1,284			1,284	S/L	5	0
28	CHAIRS, TASK, ARM (3) BUR	6/11/98		450			450	S/L	5	0
29	SOFTWARE:DONOR PREF	6/15/98		6,291			6,291	S/L	5	0
30	PC HW: HD, PORT, BU TAPE	6/29/98		2,583			2,583	S/L	5	0
31	PC, PENT II, 233, 32MEG	6/30/98		1,640			1,640	S/L	5	0
32	SOFTWARE: MIP ACCOUNTING	6/30/98		10,930			10,930	S/L	5	0
33	PRINTER, LASERJET110	2/23/99		400			400	S/L	5	0
34	REFRIGERATORS	6/23/99		12,727			12,727	S/L	5	0
35	RETHEM CABINET, CARTER-	6/23/99		14,596			14,596	S/L	5	0
36	OVAN, MICROWAVE AMANA RC2	6/23/99		1,580			1,580	S/L	5	0

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SENIOR COMMUNITY CENTERS OF SAN DIEGO

95-2850121

1/21/10

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
37	OVAN, MICROWAVE PANASNE	6/28/99		3,107			3,107	S/L	5	0
38	PC, PARKARD BELL PENT II	6/28/99		1,110			1,110	S/L	5	0
39	WORKSTATION	6/30/99		8,189			8,189	S/L	5	0
40	COMPUTER/MONITOR	9/24/99		1,185			1,185	S/L	5	0
41	COMP FIREWALL	2/28/00		629			629	S/L	5	0
42	TABLES & CHAIRS	6/25/00		9,920			9,920	S/L	5	0
43	PHONE SYS UPGRADE	3/29/00		3,877			3,877	S/L	5	0
44	PHONE SYS UPGRADE	5/10/00		2,127			2,127	S/L	5	0
45	SERVER	3/06/00		4,303			4,303	S/L	5	0
46	DELL COMPUTER	3/06/00		1,184			1,184	S/L	5	0
47	DELL COMPUTER	3/06/00		1,184			1,184	S/L	5	0
48	REFRIGERATOR, 2-DR	8/23/94		2,322			2,322	S/L	5	0
49	TOASTER, TOASTMASTER	10/31/94		535			535	S/L	5	0
50	MEAL CARD SWIPE	4/06/95		5,040			5,040	S/L	5	0
51	TOASTER, TOASTMASTER	6/19/95		508			508	S/L	5	0
52	CART, THRIFT-1, 2 SHELF	6/27/95		297			297	S/L	5	0
53	POLISHER, POWRFLITE	6/30/95		965			965	S/L	5	0
54	POLISHER ATTACHMENTS	6/30/95		143			143	S/L	5	0
55	VAC, WET/DRY, POWRFLITE	6/29/95		460			460	S/L	5	0
56	REFRIGERATOR, 2-DR	6/30/95		1,991			1,991	S/L	5	0
57	TABLES, 60"	6/30/95		1,201			1,201	S/L	5	0
58	TREADMILL, BIKE, WGHTS	5/28/99		4,565			4,565	S/L	5	0
61	COMPUTER EQUIPMENT	6/30/00		2,539			2,539	S/L	5	0
62	COMPUTER EQUIPMENT	3/06/00		226			226	S/L	5	0
63	OFFICE DIVIDERS	6/30/00		3,000			3,000	S/L	5	0
64	WEB SITE	6/30/00		5,100			5,100	S/L	5	0
65	OTHER EQUIP	6/30/00		290			290	S/L	5	0
66	VIDEO CAMERA (DIGITAL)	3/27/01		860			860	S/L	5	0
67	PHONE SYSTEM	6/27/01		10,296			10,295	S/L	5	0
68	DELL COMPUTER-SERVER	6/28/01		2,562			2,560	S/L	5	0
69	AIM-S-NETWORK	8/18/00		2,385			2,386	S/L	5	0
70	DELL COMP	12/31/00		935			936	S/L	5	0
71	DELL COMP	1/21/01		863			865	S/L	5	0
72	DELL COMP	1/21/01		863			865	S/L	5	0
73	DELL COMP	1/21/01		863			865	S/L	5	0
74	EXECUTIVE DESKS (3)	6/15/01		4,500			4,500	S/L	5	0
75	FLOOR MACHINE	1/11/01		2,483			2,485	S/L	5	0
78	APPLIANCES	10/08/01		896			896	S/L	5	0
79	DELL COMPUTER (2)	6/24/02		2,182			2,182	S/L	5	0

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SENIOR COMMUNITY CENTERS OF SAN DIEGO

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
80	DELL COMPUTER (3)	10/01/01		2,270			2,270	S/L	5	0
81	FOOD PROCESSOR	11/29/01		2,391			2,391	S/L	5	0
82	FOOD SLICER	11/29/01		2,150			2,150	S/L	5	0
83	CONVECTION STEAMER	11/29/01		10,638			10,638	S/L	5	0
84	STACK CONVECTION OVEN	11/29/01		5,120			5,120	S/L	5	0
85	BLAST CHILLER	11/29/01		10,126			10,126	S/L	5	0
86	RANGE WITH OVEN	11/29/01		2,868			2,868	S/L	5	0
87	RANGE 6 O.B.	11/29/01		1,267			1,267	S/L	5	0
88	ICE MAKER-MODULAR CUBER	11/29/01		2,688			2,688	S/L	5	0
89	FOOD WARMER	11/29/01		1,715			1,715	S/L	5	0
90	WIRE BASKETS	11/29/01		2,243			2,243	S/L	5	0
91	TILTING SKILLET	11/29/01		4,163			4,163	S/L	5	0
92	MISC FURNITURE	6/27/02		10,124			10,124	S/L	5	0
95	PHONE SYSTEM	6/30/03		7,511			7,511	S/L	5	0
96	PHONE SYSTEM	8/15/03		3,045			2,994	S/L	5	51
98	SERVER - BROADWAY	6/09/04		2,639			2,156	S/L	5	483
99	OUTDOOR FURNITURE - PFSR	6/30/04		12,537			10,028	S/L	5	2,509
101	JIB CRANE & BASKET	6/30/04		21,051			16,840	S/L	5	4,211
102	HOT FOOD TABLE - 5 WELLS	6/30/04		1,406			1,124	S/L	5	282
103	WIRE BASKETS	6/30/04		3,414			2,732	S/L	5	682
104	WATER SOFTNERS - BOILERS	6/30/04		4,407			3,524	S/L	5	883
108	GROEN TILT SKILLET	6/29/05		11,308			6,786	S/L	5	2,262
109	GROEN STEAMER W/ H2O FILT	6/29/05		12,036			7,221	S/L	5	2,407
110	FURNITURE-DINING & REC	6/29/05		20,879			12,873	S/L	5	4,174
111	TRAULSEN ROLL IN REFER	6/29/05		4,489			2,769	S/L	5	898
112	GARLAND CONVECTION OVEN	6/29/05		7,375			4,585	S/L	5	1,475
113	EXCHANGE SERVER	5/13/06		5,175			2,226	S/L	5	1,033
114	LAPTOP	2/14/06		2,054			992	S/L	5	411
115	SERVER - PFSR	12/25/05		4,847			2,423	S/L	5	969
116	COOK CHILL KETTLE W/ COMP	6/27/06		84,988			33,996	S/L	5	16,998
117	ERGO SERVER TABLE TOP	6/26/06		9,919			3,968	S/L	5	1,984
118	145 FILL TRAY SEALER	6/26/06		18,851			7,540	S/L	5	3,770
122	REFRIGERATORS	12/22/06		34,074			10,222	S/L	5	6,815
123	REFRIGERATORS	1/18/07		27,505			7,793	S/L	5	5,501
124	REFRIGERATORS	3/02/07		20,526			5,473	S/L	5	4,105
125	CLEANING EQUIPMENT	6/29/07		3,754			747	S/L	5	751
127	FIREWALL VPN	7/14/07		1,429			262	S/L	5	286
128	NUTRITION COMPUTER	8/01/07		1,121			168	S/L	5	224
129	LAPTOP	10/18/07		2,462			328	S/L	5	492

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130	LAPTOPS	1/31/08		5,112			426	S/L	5	1,022
131	COMPUTER	5/18/08		724			12	S/L	5	145
132	SLICER SEMI AUTOMATIC	6/16/08		5,883				S/L	5	1,177
133	DOUBLE DECK OVEN	6/16/08		7,004				S/L	5	1,401
134	UTILITY CART	6/20/08		522				S/L	5	104
135	NEW AGE PAN RACKS	6/20/08		1,483				S/L	5	297
136	COOLER RACK	6/20/08		1,435				S/L	5	287
137	UTILITY CARTS	6/20/08		26,955				S/L	5	5,391
138	ROBOT COUPE	6/20/08		7,872				S/L	5	1,574
139	UTILITY CARTS	6/20/08		1,047				S/L	5	209
140	COMPUTER FOR DEVELOPMENT	2/12/09		1,284				S/L	5	86
141	SLICERS & DICERS	7/03/08		1,013				S/L	5	186
142	NEW COMPUTRITION PROGRAM	2/19/09		46,077				S/L	5	3,072
146	SAN DIEGO RESTAURANT ADD'N	6/30/09		99,226				S/L	5	0
TOTAL MACHINERY AND EQUIPME				777,001		0	400,288			78,607
TOTAL DEPRECIATION				<u>5,769,410</u>		<u>0</u>	<u>722,765</u>			<u>123,306</u>
GRAND TOTAL AMORTIZATION				8,277		0	0			2,759
GRAND TOTAL DEPRECIATION				<u>5,769,410</u>		<u>0</u>	<u>722,765</u>			<u>123,306</u>