

Return of Organization Exempt From Income Tax

2003

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning July 1, 2003, and ending June 30, 2004

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

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

C Name of organization
St. Andrew Bay Center, Inc.

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. Box 1320

City or town, state or country, and ZIP + 4
Lynn Haven, FL 32444

D Employer identification number
59 0951529

E Telephone number
(850) 265-2951

F Accounting method: Cash Accrual
 Other (specify) ▶

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

H and **I** are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

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

H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)

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

G Website: ▶

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

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

I Group Exemption Number ▶

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1530040**

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

1 Contributions, gifts, grants, and similar amounts received					
Revenue	a Direct public support	1a	152543		
	b Indirect public support	1b			
	c Government contributions (grants)	1c	50761		
	d Total (add lines 1a through 1c) (cash ¹⁵⁰⁰¹⁵ non-cash \$ 53289)			1d	203304
	2 Program service revenue including government fees and contracts (from Part VII, line 93)			2	1274104
	3 Membership dues and assessments			3	
	4 Interest on savings and temporary cash investments			4	2055
	5 Dividends and interest from securities			5	
	6a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7 Other investment income (describe ▶)			7	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a			
	b Less: cost or other basis and sales expenses	8b			
	c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d		
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	44984			
b Less: direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events (subtract line 9b from line 9a)			9c	44984	
10a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11 Other revenue (from Part VII, line 103)			11	5593	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	1530040	
Expenses	13 Program services (from line 44, column (B))	13		1217574	
	14 Management and general (from line 44, column (C))	14		206095	
	15 Fundraising (from line 44, column (D))	15		45563	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17		1469232	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		60808	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		705586	
	20 Other changes in net assets or fund balances (attach explanation)	20		28253	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		794647	

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Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule).				
25	Compensation of officers, directors, etc				
26	Other salaries and wages	835273	703860	111701	19712
27	Pension plan contributions				
28	Other employee benefits	72174	62408	8301	1465
29	Payroll taxes	69681	57983	9943	1755
30	Professional fundraising fees				
31	Accounting fees	7200		7200	
32	Legal fees				
33	Supplies	48795	40900	2350	5545
34	Telephone	11100	8318	2782	
35	Postage and shipping	2423	730	1693	
36	Occupancy	23809	17644	6165	
37	Equipment rental and maintenance	5128	3821	1307	
38	Printing and publications				
39	Travel				
40	Conferences, conventions, and meetings				
41	Interest	30928	13187	17741	
42	Depreciation, depletion, etc. (attach schedule)	50098	45646	4452	
43	Other expenses not covered above (itemize): a				
	b see attached	312623	263077	32460	17086
	c				
	d				
	e				
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15 .	1469232	1217574	206095	45563

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

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

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

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

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

What is the organization's primary exempt purpose? ▶ _____

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)

a	Provides supports & services for individuals with disabilities. _____ _____ _____ (Grants and allocations \$ _____)	1217574
b	_____ _____ _____ (Grants and allocations \$ _____)	
c	_____ _____ _____ (Grants and allocations \$ _____)	
d	_____ _____ _____ (Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	1217574

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

				(A)		(B)
				Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.						
Assets	45 Cash—non-interest-bearing			266016	45	294054
	46 Savings and temporary cash investments				46	
	47a Accounts receivable	47a	134853			
	b Less allowance for doubtful accounts	47b	600	123099	47c	134253
	48a Pledges receivable	48a				
	b Less allowance for doubtful accounts	48b		63288	48c	89041
	49 Grants receivable				49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a Other notes and loans receivable (attach schedule).	51a				
	b Less allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			2579	53	4104
	54 Investments—securities (attach schedule).				54	
	55a Investments—land, buildings, and equipment basis	55a				
	b Less accumulated depreciation (attach schedule).	55b			55c	
56 Investments—other (attach schedule)				56		
57a Land, buildings, and equipment basis	57a	170442				
b Less accumulated depreciation (attach schedule).	57b	400466	762924	57c	769976	
58 Other assets (describe ▶ _____)				58		
59 Total assets (add lines 45 through 58) (must equal line 74)			1217906	59	1291428	
Liabilities	60 Accounts payable and accrued expenses			85724	60	95990
	61 Grants payable				61	
	62 Deferred revenue			18125	62	18326
	63 Loans from officers, directors, trustees, and key employees (attach schedule).				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)			408471	64b	382465
	65 Other liabilities (describe ▶ _____)				65	
66 Total liabilities (add lines 60 through 65)			512320	66	496781	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted				67	
	68 Temporarily restricted			63288	68	91541
	69 Permanently restricted			642298	69	703106
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21).			705586	73	794647	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)			1217906	74	1291428	

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

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

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

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

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

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

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

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

Part VI Other Information (See page 28 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		✓
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures See line 81 instructions 81a _____		
b	Did the organization file Form 1120-POL for this year?		
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b _____		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members 85c _____		
d	Section 162(e) lobbying and political expenditures 85d _____		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e _____		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f _____		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a _____		
b	Gross receipts, included on line 12, for public use of club facilities 86b _____		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a _____		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b _____		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 _____, section 4912 _____, section 4955 _____		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction.		✓
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. _____		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization. _____		
90a	List the states with which a copy of this return is filed Florida		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90b staff 41		
91	The books are in care of St. Andrew Bay Center, Inc. Telephone no () Located at 1804 Carolina Ave. Lynn Haven, AL ZIP + 4 32444		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 _____		

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Private Client					10412
b CRF Contract					105136
c Client Product sales & service					120080
d					
e					
f Medicare/Medicaid payments					936867
g Fees and contracts from government agencies					101609
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					2055
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					44984
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Miscellaneous					5593
b Government Contributions					50761
c Public Contributions					152543
d					
e					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E))					1530040

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

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

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

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

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 information furnished by filer.

Please Sign Here

Signature of officer: *[Handwritten Signature]*

Type or print name and title: **B. Jan Pearce, Executive Director**

Paid Preparer's Use Only

Preparer's signature: *[Handwritten Signature]*

Firm's name (or yours if self-employed), address, and ZIP + 4: **Amanda R. Nichols, Staff Accountant
PO Box 1320 Lynn Haven, FL 33499**



SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2003

Department of the Treasury
Internal Revenue Service

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

Name of the organization

St. Andrew Bay Center, Inc.

Employer identification number

59 : 0951529

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

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

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

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

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

Yes No

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)

1

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)

- a** Sale, exchange, or leasing of property?
- b** Lending of money or other extension of credit?
- c** Furnishing of goods, services, or facilities?
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e** Transfer of any part of its income or assets?

3a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)

b Do you have a section 403(b) annuity plan for your employees?

4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

		✓
2a		✓
2b		✓
2c		✓
2d		✓
2e		✓
3a		✓
3b		✓
4		✓

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

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

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

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

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

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

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c
d Add: Amounts from column (e) for lines:	18 _____	19 _____			
	22 _____	26b _____			26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year					
(2002) _____ (2001) _____ (2000) _____ (1999) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2002) _____ (2001) _____ (2000) _____ (1999) _____					
c Add. Amounts from column (e) for lines:	15 _____	16 _____			
	17 _____	20 _____	21 _____		
d Add Line 27a total _____ and line 27b total _____					27c
e Public support (line 27c total minus line 27d total)					27d
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e).					27e
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15					27h %

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

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	✓	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	N	A
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement)	N	A
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	✓	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	N	A
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	N	A
d Copies of all material used by the organization or on its behalf to solicit contributions?	✓	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		✓
b Admissions policies?		✓
c Employment of faculty or administrative staff?		✓
d Scholarships or other financial assistance?	N	A
e Educational policies?		✓
f Use of facilities?		✓
g Athletic programs?	N	A
h Other extracurricular activities?		✓
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	✓	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		✓
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	✓	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

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

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

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

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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

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

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

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

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i)	Cash	51a(i)	
(ii)	Other assets	a(ii)	
b Other transactions			
(i)	Sales or exchanges of assets with a noncharitable exempt organization	b(i)	
(ii)	Purchases of assets from a noncharitable exempt organization	b(ii)	
(iii)	Rental of facilities, equipment, or other assets	b(iii)	
(iv)	Reimbursement arrangements	b(iv)	
(v)	Loans or loan guarantees	b(v)	
(vi)	Performance of services or membership or fundraising solicitations	b(vi)	
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		c	
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

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

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

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

St. Andrew Bay Center, Inc.
Form 990
Line 20

59-0951529
For the Year Ended
June 30, 2004

\$28,253

Prior year adjustment due to addition error.

Part II - Statement of Functional Expenses
Line 43 - Other Expenses

	(A) Total	(B) Program Service	(C) Management & General	(D) Fund Raising
Client Pay	82,897	82,897		
Client Activities	660	660		
Insurance	49,227	38,123	11,104	
Workers' Compensation	41,421	35,658	4,898	865
Employee Background Screening	2,249	1,175	1,074	
Staff Education & Training	3,052	1,064	1,988	
Membership & Subscriptions	6,329	4,187	2,142	
Recognition & Awards	888	457	431	
Office Expense	6,842	2,968	3,874	
Mileage Reimbursement	25,329	24,711	618	
Bad Debts	3,432		3,432	
Bank Charges	495		495	
Vehicle Maintenance & Gasoline	12,888	12,773	115	
Repairs & Maintenance	6,360	5,882	478	
In-Kind Donations- Supplies	13,423	0		13,423
Donated Services	49,108	48,608	500	
Miscellaneous	4,104	568	786	2,750
Advertising	3,919	3,346	525	48
	<u>312,623</u>	<u>263,077</u>	<u>32,460</u>	<u>17,086</u>
	312,623			

St. Andrew Bay Center, Inc.
Form 990

59-0951529
For the Year Ended
June 30, 2004

Part IV - Balance Sheet
Line 64b - Notes Payable

<u>To Whom Payable</u>	<u>Balance at Beginning of Year</u>	<u>Balance at End of Year</u>
Regions Bank	3,919	0
Peoples Bank	9,068	4,895
James Finch	<u>395,484</u>	<u>377,570</u>
	<u>408,471</u>	<u>382,465</u>

St. Andrew Bay Center, Inc.
Form 990

59-0951529
For the Year Ended
June 30, 2004

Part V - List of Board of I

Diane Stewart President	1022 W. 23rd St. P. O. Box 59950 Panama City, Fl. 32412
Trey Hall Vice President	1601 Wildridge Rd, Lynn Haven, Fl. 32444
Steve Rudloff Treasurer	2901 Fairmont Dr. Panama City, Fl. 32405
Traci Powell Secretary	2604 Island View Dr. Panama City FL 32405
Carlotta Moniz Board Member	P. O. Box 1579 Panama City FL 32401
Duane Bishop Board Member	2821 Clearview Ave. Panama City FL 32405
Marie Corbin Board Member	P. O. Box 1210 Lynn Haven, Fl. 32444
Randall Lewis Board Member	1404 Lincoln Ave. P. O. Box 15302 Panama City, Fl. 3240
Lauren McLeroy Board Member	P. O. Box 26 Panama City, Fl. 32402
Sherri Malloy Board Member	442 Grace Ave. Panama City, FL. 32401
Cortez Patrick Board Member	1335 Grace Ave. Panama City, Fl. 32401
Robert Radcliff Board Member	902 Joan Lane Panama City, Fl. 32404
Sally Stanley Board Member	2300 Coral Drive Lynn Haven, Fl. 32444
Joyce Tassone Board Member	P. O. Box 1495 Lynn Haven FL 32444
Susan Tull Board Member	3246 Country Club Drive Lynn Haven, Fl. 32444
Woody Woodard Board Member	2003 Windjammer Lynn Haven, Fl. 32444

Aug. 04 2004 02:38PM P2

FAX NO. : 850-871-0354

FROM : ANN HARDMAN CPA

ST. ANDREW BAY CENTER
DEPRECIATION REPORT

Page 1
FOR THE YEAR ENDED JUNE 30, 2004.

PLACED IN SERVICE	LIFE	METHOD	COST			DEPRECIATION				
			BALANCE 07/01/03	ADDITIONS	RETIREMENTS	BALANCE 07/01/03	ADDITIONS	RETIREMENTS		
***** REAL PROPERTY *****										
ORIGINAL BUILDING	01-Oct-78	20.00	SL	60,888.21			60,888.21		60,888.21	
FRAME BUILDING-CLASSROO	01-Oct-78	20.00	SL	34,167.30			34,167.30		34,167.30	
CLASSROOM IMPROVEMENTS	01-Oct-79	16.00	SL	780.00			780.00		780.00	
WORK CENTER & FENCE	01-Oct-79	12.00	SL	20,565.92			20,565.92		20,565.92	
WALKWAY COVER	31-Jul-85	10.00	SL	1,400.00			1,400.00		1,400.00	
BUILDING	01-Mar-85	20.00	SL	61,322.64			56,224.49	3,066.13	59,290.62	
ROOF	15-Apr-86	5.00	SL	6,780.00			6,780.00		6,780.00	
GREENHOUSE	07-Jul-87	15.00	SL	5,546.13			5,546.13		5,546.13	
WELL SYSTEM	01 Mar-92	10 00	SL	4,000.00			4,000.00		4,000.00	
BUILDING-ALA AVE	18-Nov-97	20.00	SL	70,000.00			19,833.33	3,500 00	23,333.33	
BUILDING ADT	03-Dec-02	31.50	SL	420,000.00			7,777.78	13,333.33	21,111 11	
PORCH/NURSERY WALKWAYS	03 Dec-02	10.00	SL	2,800 00			163 33	280.00	443 33	
WALLPAPER	12-Dec-02	5.00	SL	1,649 23			192 41	329 85	522.26	
TOTAL REAL PROPERTY				689,899 43	0.00	0.00	218,318.90	20,509.31	0 00	238,828.21

ST. ANDREW BAY CENTER
DEPRECIATION REPORT

PLACED IN SERVICE	LIFE	METHOD	*****COST*****			*****DEPRECIATION*****		
			BALANCE 07/01/03	ADDITIONS	RETIREMENTS	BALANCE 07/01/03	ADDITIONS	RETIREMENTS
***** FURNITURE, FIXTURES, & EQUIPMENT *****								
AIR CONDITIONER/HEATER	10-Aug-88	5.00 SL	510.00			510.00		510.00
2 FEDDERS AIR CONDITIONER	02-May-94	5.00 SL	1,199.90			1,199.90		1,199.90
SAMSUNG TELEPHONE SYS	13-Jun-95	5.00 SL	2,715.44			2,715.44		2,715.44
ICE MACHINE	19-Jun-97	5.00 SL	1,795.00			1,795.00		1,795.00
2 MAYTAG DISHWASHERS	14-Jan-97	5.00 SL	1,007.90			1,007.90		1,007.90
2 AIR CONDITIONS	05-May-98	5.00 SL	1,437.00			1,437.00		1,437.00
ICE MAKER	19-Aug-99	5.00 SL	649.99			649.99		628.33
COMPUTER DESK/HUTCH	29-Oct-99	5.00 SL	798.00			798.00	130.00	744.80
VERTICAL BLINDS/AD OFF	03-Nov-99	5.00 SL	924.00			924.00	159.60	744.80
3 DELL COMPUTERS	15-Nov-99	5.00 SL	3,534.00			3,534.00	184.80	862.40
3 PRINTERS/2 LAS/1 INK	26-Nov-99	5.00 SL	529.86			529.86	706.80	3,298.40
7 2-WAY RADIOS	08-Jun-00	5.00 SL	1,901.60			1,901.60	379.73	485.70
12 6 FT FOLDING TABLES	13-Jun-00	5.00 SL	1,020.00			1,020.00	105.97	1,552.97
2 GATEWAY COMPUTERS	28-Jun-01	5.00 SL	2,388.00			2,388.00	380.32	833.00
2 GATEWAY COMPUTERS	28-Jan-02	5.00 SL	2,228.00			2,228.00	629.00	1,432.80
2 GATEWAY COMPUTERS	14-Mar-02	5.00 SL	1,398.00			1,398.00	955.20	1,076.87
2 GATEWAY COMPUTERS	07-Jun-02	5.00 SL	1,417.00			1,417.00	477.60	652.40
						330.63	283.40	614.03

ST. ANDREW BAY CENTER
DEPRECIATION REPORT

PLACED IN SERVICE	LIFE	METHOD	*****COST*****			*****DEPRECIATION*****					
			BALANCE 07/01/03	ADDITIONS	RETIREMENTS	BALANCE 06/30/04	ADDITIONS	RETIREMENTS	BALANCE 06/30/04		
***** FURNITURE, FIXTURES, & EQUIPMENT (CONTINUED) *****											
ADT FURNITURE	1-Dec-02	10.00	SL	14,934.46			14,934.46	871.18	1,493.45		2,364.63
2 GATEWAY COMPUTERS	23-Jan-03	5.00	SL	3,037.98			3,037.98	253.17	607.60		860.77
7 TVs	23-Jan-03	5.00	SL	1,188.10			1,188.10	99.01	237.62		336.63
DOLPHIN STATUE	8-Feb-03			3,000.00			3,000.00				
PN FURNITURE	1-Apr-03	10.00	SL	5,342.70			5,342.70	133.57	534.27		667.84
CARPET	1-Apr-03	10.00	SL	2,930.00			2,930.00	73.25	293.00		366.25
HEAT/AIR	8 Apr-03	10.00	SL	6,916.00			6,916.00	172.90	691.60		864.50
COMDIAL PHONE SYSTEM	14-Apr-03	5.00	SL	3,398.50			3,398.50	169.93	679.70		849.63
CEILING	22-Apr-03	10.00	SL	2,775.00			2,775.00	46.25	277.50		323.75
NETWORK	21-Apr 03	5.00	SL	639.38			639.38	21.31	127.88		149.19
7.5 TON AIR CONDITIONER	28 Jun-04	5.00	SL		5,433.00		5,433.00		0.00		0.00
TOTAL FURNITURE, FIXTURES & EQUIPMENT				69,615.81	5,433.00	0.00	75,048.81	19,329.82	8,300.30	0.00	27,630.12
***** RECREATION EQUIPMENT *****											
RECREATION EQUIPMENT	01-Jan-80	5.00	SL	130.00			130.00	130.00			130.00
***** INDUSTRIAL ARTS EQUIPMENT *****											
SWIVEL CHAIRS	09 Jul-87	15.00	SL	3,150.00			3,150.00	3,150.00			3,150.00
MOBLE WARDROBES	09-Jul-87	15.00	SL	1,683.00			1,683.00	1,683.00			1,683.00
WORKSHOP DOORS	09-Jul-87	15.00	SL	516.00			516.00	516.00			516.00
EQUIPMENT	09-Jul-87	15.00	SL	1,823.36			1,823.36	1,823.40			1,823.40
STEELTOP BENCHES	09-Jul-87	15.00	SL	1,095.64			1,095.64	1,095.64			1,095.64
41 CANDY MACHINES	15-Dec-93	15.00	SL	29,000.00			29,000.00	18,527.75	1,933.33		20,461.08
SPOT CLEANER EXTRACTOR	31-May 01	5.00	SL	1,003.63			1,003.63	418.19	200.73		618.92
				38,271.63	0.00	0.00	38,271.63	27,213.98	2,134.06	0.00	29,348.04

ST. ANDREW BAY CENTER
 DEPRECIATION REPORT

PLACED IN SERVICE	LIFE	METHOD	*****COST*****			*****DEPRECIATION*****		
			BALANCE 07/01/03	ADDITIONS	RETIREMENTS	BALANCE 07/01/03	ADDITIONS	RETIREMENTS
***** NURSERY EQUIPMENT *****								
NURSERY EQUIPMENT	01-Jan-80	5.00	SL	5,125.83			5,125.83	5,125.83
RXSMOWER WITH BAG	26 Jun-87	4.00	SL	1,574.40			1,574.40	1,574.40
5X10 UTILITY TRAILER	27-Nov-89	5.00	SL	550.00			550.00	550.00
6X10 UTILITY TRAILER	23-Apr-90	5.00	SL	650.00			650.00	650.00
YAMAHA TRACTOR	18 Aug-92	5.00	SL	3,542.00			3,542.00	3,542.00
8HP Blower SLB 8621C	08 Feb-94	5.00	SL	646.00			646.00	646.00
JD COMM W/B S/P MOWER	28 Jun-94	5.00	SL	703.20			703.20	703.20
JOHN DEERE LX188 MOWER	07-Jul-97	5.00	SL	3,600.00			3,600.00	3,600.00
12 NURSERY CARTS	09-Aug-99	5.00	SL	1,781.28			1,365.66	356.26
C 62 PRESTO LIFT	09 Aug-99	5.00	SL	2,870.51			2,200.72	574.10
				21,043.22	0.00	0.00	19,957.81	930.36
***** VEHICLES *****								
1989 FORD E150	24-Oct-89	5.00	SL	11,468.52			11,468.52	11,468.52
1988 Voyager SE	27-Jun-94	5.00	SL	5,500.00	5,500.00		5,500.00	0.00
1992 FORD VAN	02-May-97	5.00	SL	13,500.00			13,500.00	13,500.00
WHEEL CHAIR LIFT	11-Jul-97	5.00	SL	4,176.70			4,176.70	4,176.70
1991 FORD VAN	09-Jun-98	5.00	SL	6,000.00			6,000.00	6,000.00
1996 PLYMOUTH VOYAGER	25 Jun-99	3.00	SL	8,840.60	8,840.60		8,840.61	0.00
1996 DODGE CARAVAN	26-Jun-99	3.00	SL	8,824.00			8,824.00	8,824.00
1999 GMC Cargo Van	21-May-01	5.00	SL	17,198.65			7,166.10	3,439.73
2000 Ford E350 (Wheelchair Van)	15-Jun-01	5.00	SL	26,073.50			10,863.96	5,214.70
2002 CHEVROLET VAN	21-Jun-02	5.00	SL	17,090.85			3,418.17	3,418.17
2001 OLDSMOBILE WGN	17 Nov-03	3.00	SL		13,077.95			2,542.93
2002 PONTIAC WGN	17-Nov-03	3.00	SL		13,077.95			2,542.93
2003 FORD WGN	22-Apr-04	4.00	SL		25,560.95			1,065.04
				118,672.82	51,716.85	14,340.60	79,758.06	18,223.51
TOTAL PROPERTY				937,632.91	57,149.85	14,340.60	364,708.57	50,097.54

400,465.50