

Forms 990 / 990-EZ Return Summary

For calendar year 2016, or tax year beginning **07/01/16** , and ending **06/30/17**

58-1907913

SAFE HARBOR CHILDREN'S CENTER, INC.

Net Asset / Fund Balance at Beginning of Year		<u>4,642,491</u>
Revenue		
Contributions	<u>2,614,328</u>	
Program service revenue	<u>744,569</u>	
Investment income	<u>5,172</u>	
Capital gain / loss	<u>-4,635</u>	
Fundraising / Gaming:		
Gross revenue	<u>8,851</u>	
Direct expenses	<u>10,482</u>	
Net income	<u>-1,631</u>	
Other income	<u>0</u>	
Total revenue		<u>3,357,803</u>
Expenses		
Program services	<u>1,891,137</u>	
Management and general	<u>142,299</u>	
Fundraising	<u>20,044</u>	
Total expenses		<u>2,053,480</u>
Excess / (deficit)		<u>1,304,323</u>
Changes		<u>-27,800</u>
Net Asset / Fund Balance at End of Year		<u>5,919,014</u>

Reconciliation of Revenue	
Total revenue per financial statements	<u>3,357,803</u>
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u>3,357,803</u>

Reconciliation of Expenses	
Total expenses per financial statements	<u>2,081,280</u>
Less:	
Donated services	<u>27,800</u>
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u>2,053,480</u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>4,920,927</u>	<u>6,022,525</u>	
Liabilities	<u>278,436</u>	<u>103,511</u>	
Net assets	<u>4,642,491</u>	<u>5,919,014</u>	<u>1,276,523</u>

Miscellaneous Information

Amended return _____
Return / extended due date 11/15/17
Failure to file penalty _____

Arline & Wiggins, CPAs, LLC
1606 Reynolds St
Brunswick, GA 31520-6731
912-265-1020

March 12, 2018

CONFIDENTIAL

SAFE HARBOR CHILDREN'S CENTER, INC.
P.O. BOX 1313
BRUNSWICK, GA 31520

Dear Leslie:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Arline & Wiggins, CPAs, LLC

Filing Instructions

SAFE HARBOR CHILDREN'S CENTER, INC.

Exempt Organization / Private Foundation Tax Return(s)

Taxable Year Ended June 30, 2017

Federal Filing Instructions

None is required. Your Form 990 for the year ended 6/30/17 shows no balance due.

You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

Arline & Wiggins, CPAs, LLC
1606 Reynolds St
Brunswick, GA 31520-6731

If previously signed and returned no further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing of your return.

Georgia Return Filing Instructions

Signed copies of the federal forms 990/990EZ or 990-PF for the tax year ended 6/30/17 must be filed with the Georgia Department of Revenue. Mail the return AS SOON AS POSSIBLE to:

Georgia Department of Revenue
Processing Center
P.O. Box 740395
Atlanta, GA 30374-0395

SAFE HARBOR CHILDREN'S CENTER, INC.
P.O. BOX 1313
BRUNSWICK, GA 31520

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027



Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning 7/01, 2016, and ending 6/30, 20 17

2016

Department of the Treasury
Internal Revenue Service

u Do not send to the IRS. Keep for your records.
u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Name of exempt organization

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer identification number

58-1907913

Name and title of officer

**LESLIE HARTMAN
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b	3,357,803
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **ARLINE & WIGGINS, CPAS, LLC** to enter my PIN **52411** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } Date } **02/20/18**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

58919818376
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } **JOEL K ARLINE CPA** Date } **02/20/18**

**ERO Must Retain This Form — See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2016)

Form **990**

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 07/01/16, and ending 06/30/17

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **SAFE HARBOR CHILDREN'S CENTER, INC.**
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address): **P.O. BOX 1313** Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: **BRUNSWICK GA 31520**

D Employer identification number: **58-1907913**
E Telephone number: **912-267-6000**
G Gross receipts \$: **3,794,142**

F Name and address of principal officer: **LESLIE HARTMAN**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () **t** (insert no.) 4947(a)(1) or 527

J Website: **WWW.SAFEHARBORCENTERINC.ORG** **H(c)** Group exemption number **u**

K Form of organization: Corporation Trust Association Other **u** **L** Year of formation: **1990** **M** State of legal domicile: **GA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	51
	6 Total number of volunteers (estimate if necessary)	6	251
	7a Total unrelated business revenue from Part VIII, column (C), line 12	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 4,564,124	Current Year 2,614,328
	9 Program service revenue (Part VIII, line 2g)	819,978	744,569
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16,209	537
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,145	-1,631
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,403,456	3,357,803
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,202,309	1,391,334
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) u 20,044		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	622,035	662,146	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,824,344	2,053,480	
19 Revenue less expenses. Subtract line 18 from line 12	3,579,112	1,304,323	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 4,920,927	End of Year 6,022,525
	21 Total liabilities (Part X, line 26)	278,436	103,511
	22 Net assets or fund balances. Subtract line 21 from line 20	4,642,491	5,919,014

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: **LESLIE HARTMAN** Date: **EXECUTIVE DIRECTOR**
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **JOEL K ARLINE CPA** Preparer's signature: **JOEL K ARLINE CPA** Date: **03/12/18** Check if self-employed PTIN: **P00639233**
 Firm's name: **ARLINE & WIGGINS, CPAS, LLC** Firm's EIN: **45-5317527**
 Firm's address: **1606 REYNOLDS ST BRUNSWICK, GA 31520-6731** Phone no.: **912-265-1020**

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

PROVIDING SAFE AND SECURE SHELTER TO PROTECT CHILDREN AND YOUTH AT RISK. SERVICES PROVIDED INCLUDE: IMMEDIATE SAFE SHELTER, CRISIS INTERVENTION, AND THERAPEUTIC ASSESSMENT.

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ **1,891,137** including grants of \$) (Revenue \$ **744,569**)

SAFE HARBOR CHILDREN'S CENTER, INC. (THE CENTER) PROVIDES A SAFE AND SECURE STATE LICENSED EMERGENCY SHELTER FACILITY FOR CHILDREN AND YOUTH WHO ARE ABUSED, NEGLECTED, RUNAWAY OR HOMELESS. THE CENTER'S MISSION IS TO PROVIDE SHELTER AND THERAPEUTIC SERVICES TO CHILDREN ANY AGE UNDER 18 WHO HAVE BEEN ABUSED, ABANDONED OR NEGLECTED; WHO ARE HOMELESS OR HAVE RUN AWAY FROM HOME; OR WHO ARE OTHERWISE AT RISK OR FEEL THREATENED. THE SAFE HARBOR FAMILY PRESERVATION PROGRAM HELPS FAMILIES ALLEVIATE CRISIS AND MAINTAIN THE SAFETY OF CHILDREN IN THEIR OWN HOMES. THE PROGRAM INCLUDES IN-HOME COUNSELING, PARENT SUPPORT AND EDUCATION, INDIVIDUAL COUNSELING, TRANSPORTATION, AND CHILDCARE. STREET BEAT IS A STREET OUTREACH PROGRAM FOR REACHING OUT TO TEENS LIVING

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

4e Total program service expenses **1,891,137**

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 <i>Schedule B, Schedule of Contributors</i> (see instructions)?	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, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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, for escrow or custodial account liability, 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, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</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 United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government 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 of grants or other assistance to or for domestic individuals 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</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), 501(c)(4), and 501(c)(29) 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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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>		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>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	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
4b	If "Yes," enter the name of the foreign country: u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

	1a	14	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		14		
b Enter the number of voting members included in line 1a, above, who are independent	1b	14		
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?			2	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?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	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?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u GA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **u**

LESLIE HARTMAN
BRUNSWICK

P.O. BOX 1313

GA 31521

912-267-6000

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- 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) of 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) BRUCE DIXON	2.00									
PAST CHAIRMAN	0.00	X		X			0	0	0	
(2) MARK ROBINSON	2.00									
VICE CHAIRMAN	0.00	X		X			0	0	0	
(3) TIMME FEININGER	2.00									
SECRETARY	0.00	X		X			0	0	0	
(4) VALERIE WHITEHEAD	2.00									
DIRECTOR	0.00	X					0	0	0	
(5) SHERRY GIBBS	2.00									
DIRECTOR	0.00	X					0	0	0	
(6) MARISSA TINDALE	2.00									
DIRECTOR	0.00	X					0	0	0	
(7) DR. LEE HEERY	2.00									
DIRECTOR	0.00	X					0	0	0	
(8) JOHN WINDOLF	4.00									
CHAIRMAN	0.00	X		X			0	0	0	
(9) JEFF MISNER	4.00									
TREASURER	0.00	X		X			0	0	0	
(10) PAULO ALBUQUERQUE	2.00									
DIRECTOR	0.00	X					0	0	0	
(11) ALISON BOUTS	2.00									
DIRECTOR	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(12) RACHEL RUSSELL	2.00									
DIRECTOR	0.00	X					0	0	0	
(13) ALICE SELMAN	2.00									
DIRECTOR	0.00	X					0	0	0	
(14) CARRIE WESSEL	2.00									
DIRECTOR	0.00	X					0	0	0	
(15) LESLIE HARTMAN	40.00									
EXECUTIVE DIRECTOR	0.00			X			90,193	0	0	
1b Sub-total							90,193			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							90,193			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u 0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u 0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	784,092				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,830,236				
	g Noncash contributions included in lines 1a-1f: \$		531,674				
	h Total. Add lines 1a-1f	u	2,614,328				
Program Service Revenue	2a PROGRAM INCOME	Busn. Code	744,569	744,569			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f	u	744,569				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	5,172			5,172	
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental exps.					
	c Rental inc. or (loss)						
	d Net rental income or (loss)	u					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis & sales exps.		421,222			
	c Gain or (loss)		423,231	2,626			
	d Net gain or (loss)	u	-2,009	-2,626			
	e Net gain or (loss)	u	-4,635	-4,635			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a		8,851			
		b Less: direct expenses	b	10,482			
		c Net income or (loss) from fundraising events	u	-1,631			-1,631
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities	u					
10a 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	u					
Miscellaneous Revenue	11a	Busn. Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d	u					
12 Total revenue. See instructions.	u	3,357,803	739,934	0	3,541		

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).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	90,193	76,664	13,529	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,147,015	1,110,859	31,706	4,450
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	57,089	26,937	28,330	1,822
10 Payroll taxes	97,037	93,297	3,551	189
11 Fees for services (non-employees):				
a Management				
b Legal	5,477	5,477		
c Accounting	13,095	3,285	9,155	655
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	94,534	94,534		
12 Advertising and promotion	15,312	7,451	2,281	5,580
13 Office expenses	38,903	29,609	9,038	256
14 Information technology				
15 Royalties				
16 Occupancy	112,612	104,774	7,838	
17 Travel	13,572	13,529	43	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	309		309	
20 Interest	2,829	2,817	12	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	71,063	71,063		
23 Insurance	61,260	27,709	30,708	2,843
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RESIDENT EXPENSES	180,337	180,337		
b SUPPLIES	17,873	12,769	1,028	4,076
c TRANSPORTATION	13,478	12,759	719	
d DUES AND SUBSCRIPTIONS	8,643	6,311	2,332	
e All other expenses	12,849	10,956	1,720	173
25 Total functional expenses. Add lines 1 through 24e	2,053,480	1,891,137	142,299	20,044
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	175,806	1	149,044
	2	Savings and temporary cash investments	2,172,841	2	12,208
	3	Pledges and grants receivable, net	1,501,045	3	966,812
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	740	7	
	8	Inventories for sale or use		8	2,505
	9	Prepaid expenses and deferred charges	8,786	9	11,380
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	5,406,207		
	10b	Less: accumulated depreciation	572,953	10c	4,833,254
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	2,978	14	9,318
	15	Other assets. See Part IV, line 11	460,967	15	38,004
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,920,927	16	6,022,525	
Liabilities	17	Accounts payable and accrued expenses	230,482	17	55,870
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other 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	47,954	23	47,641
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	278,436	26	103,511
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,232,154	27	5,184,874
	28	Temporarily restricted net assets	3,410,337	28	734,140
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), 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, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	4,642,491	33	5,919,014	
34	Total liabilities and net assets/fund balances	4,920,927	34	6,022,525	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,357,803
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,053,480
3	Revenue less expenses. Subtract line 2 from line 1	3	1,304,323
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,642,491
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	-27,800
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,919,014

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	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	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

58-1907913

Federal Statements

FYE: 6/30/2017

Statement 1 - Form 4562, Line 42 - Amortization

<u>Description</u>	<u>Amortization Beg Date</u>	<u>Amortizable Amount</u>	<u>Code Section</u>	<u>Period / Percent</u>	<u>Current Year Amortization</u>
CLOSING COST - DONATION BUILDING	12/02/16	\$ 5,797	461	5.0	\$ 676
REFINANCE LOAN FEES	6/30/17	2,014	461	5.0	34
TOTAL		<u>\$ 7,811</u>			<u>\$ 710</u>

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2016

Department of the Treasury
Internal Revenue Service

u Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer identification number

58-1907913

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: (For lines 1 through 12, check only one box.)

- 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 (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	569,505	749,692	1,284,182	4,564,124	2,614,328	9,781,831
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	569,505	749,692	1,284,182	4,564,124	2,614,328	9,781,831
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.						9,781,831

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	569,505	749,692	1,284,182	4,564,124	2,614,328	9,781,831
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,858	2,896	2,222	997	5,172	14,145
9 Net income from unrelated business activities, whether or not the business is regularly carried on		1,896				1,896
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				4,363	8,851	13,214
11 Total support. Add lines 7 through 10						9,811,086

12 Gross receipts from related activities, etc. (see instructions) 12 744,569

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.70 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.76 %

16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2015. 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

17a 10%-facts-and-circumstances test—2016. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2015. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2016.** 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—2015.** If the organization did not check a box on line 14 or line 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 Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME **\$ 4,363**

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

Employer identification number

SAFE HARBOR CHILDREN'S CENTER, INC.

58-1907913

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer identification number

58-1907913

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	\$ 566,913	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	\$ 65,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	\$ 432,819	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SAFE HARBOR CHILDREN'S CENTER, INC.	Employer identification number 58-1907913
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Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	FURNITURE/SUPPLIES	\$ 57,813
3	GIFT CARDS/SUPPLIES	\$ 1,200
3	STOCK	\$ 397,551
.....	\$
.....	\$
.....	\$

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

Employer identification number

SAFE HARBOR CHILDREN'S CENTER, INC.

58-1907913

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d... 2a Total number of conservation easements, 2b Total acreage restricted..., 2c Number of conservation easements..., 2d Number of conservation easements..., 3 Number of conservation easements modified..., 4 Number of states where property..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116..., 1b If the organization elected, as permitted under SFAS 116..., 2 If the organization received or held works of art..., 2a Revenue included..., 2b Assets included...

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

- 3** Using the organization's acquisition, 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 XIII.
- 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 Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on 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 XIII 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, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment **u**
 - b** Permanent endowment **u**
 - c** Temporarily restricted endowment **u**
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 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 | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		339,540		339,540
b Buildings		4,062,647	168,189	3,894,458
c Leasehold improvements		349,049	205,346	143,703
d Equipment		311,908	83,500	228,408
e Other		343,063	115,918	227,145
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)			u	4,833,254

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) u	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u		

2. Liability for uncertain tax positions. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

u Attach to Form 990.

u Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer identification number

58-1907913

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		108,832	
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded	X	2	422,842	
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				
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 u ()				
26 Other u ()				
27 Other u ()				
28 Other u ()				

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

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

u Attach to Form 990 or 990-EZ.

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer identification number

58-1907913

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE CENTER'S MISSION IS TO PROVIDE SHELTER AND THERAPEUTIC SERVICES TO CHILDREN ANY AGE UNDER 18 WHO HAVE BEEN ABUSED, ABANDONED OR NEGLECTED; WHO ARE HOMELESS OR HAVE RUN AWAY FROM HOME; OR WHO ARE OTHERWISE AT RISK OR FEEL THREATENED.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

ON THE STREETS. THE PROGRAM PROVIDES NUTRITION AND HYGIENE KITS, SEXUAL EXPLOITATION LITERATURE, AND PROVIDES SUPPORT FOR THOSE YOUTH WHO WANT TO COME OFF THE STREETS. THE MISSION IS TO INCREASE YOUNG PEOPLE'S SAFETY, WELL-BEING AND SELF-SUFFICIENCY AND TO HELP THEM BUILD PERMANENT CONNECTIONS WITH CARING ADULTS WITH THE GOAL OF GETTING OFF THE STREETS. PROJECT SAFE PLACE, AN OUTREACH OF THE CENTER, IS DESIGNED TO REACH YOUTH IN THE EARLY STAGE OF CRISIS. THE PROGRAM WORKS BY CREATING A NETWORK OF "SAFE PLACES", BUSINESS AND PUBLIC LOCATIONS THAT DISPLAY THE SAFE PLACE LOGO ON THEIR PREMISES. ANY YOUTH IN TROUBLE KNOWS THAT HE OR SHE CAN ENTER A LOCATION BEARING THE SIGN AND REQUEST HELP. AN EMPLOYEE WILL PROVIDE THE YOUTH WITH A SECURE PLACE TO WAIT WHILE THE CENTER IS CONTACTED. THE CENTER THEN DISPATCHES A TRAINED VOLUNTEER TO THE SAFE PLACE SITE OFFER ASSISTANCE AND PROVIDE TRANSPORTATION TO THE CENTER FACILITY, IF NECESSARY.

THE CHILDREN'S ADVOCACY CENTER SERVES VICTIMS OF CHILD ABUSE THROUGHOUT THE BRUNSWICK JUDICIAL CIRCUIT. THE ADVOCACY CENTER PROVIDES REHABILITATIVE CARE TO MORE THAN 300 CHILD VICTIMS OF SEXUAL AND/OR SEVERE PHYSICAL ABUSE EVERY YEAR. SERVICES THROUGH THE ADVOCACY CENTER INCLUDE FORENSIC

Name of the organization

Employer identification number

SAFE HARBOR CHILDREN'S CENTER, INC.

58-1907913

INTERVIEWS, COUNSELING, MULTIDISCIPLINARY REVIEW, VICTIM'S ADVOCACY AND
CRIME VICTIM'S COMPENSATION PROGRAM.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
INDEPENDENT AUDITOR PREPARES AND PRESENTS FORM 990 TO THE BOARD OF
DIRECTORS AND THE EXECUTIVE DIRECTOR, ALONG WITH THE AUDITED FINANCIAL
STATEMENTS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ANY CONFLICTS OF INTEREST ARE DISCLOSED TO THE BOARD.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
REVIEWED ANNUALLY IN A CLOSED SESSSION OF THE FULL BOARD MEETING.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2016

Attachment Sequence No. **179**

SAFE HARBOR CHILDREN'S CENTER, INC.

Identifying number

58-1907913

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	500,000
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	2,010,000
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 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't 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	759
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	68,833

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	0
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 checked="" type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2016 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 2016 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	69,592
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, 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? Yes No 24b If "Yes," is the evidence written? Yes 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.

30 Total business/investment miles driven during the year (don't 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?
(a) Vehicle 1 (b) Vehicle 2 (c) Vehicle 3 (d) Vehicle 4 (e) Vehicle 5 (f) Vehicle 6

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 aren't more than 5% owners or related persons (see instructions).

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," don't 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 2016 tax year (see instructions):
SEE STATEMENT 1 7,811 710
43 Amortization of costs that began before your 2016 tax year 43 761
44 Total. Add amounts in column (f). See the instructions for where to report 44 1,471

58-1907913

Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:										
2	Safe Harbor Center/Hamer House	5/01/03	8,240			8,240	0	-- Land	0	0
3	Center	12/31/90	85,516			85,516	25	MO S/L	85,516	0
4	Storage Shed	5/01/92	1,466			1,466	10	MO S/L	1,466	0
5	Shelving for Shed	5/13/99	493			493	5	MO S/L	493	0
6	Hamer House	5/01/03	67,419			67,419	30	MO S/L	29,589	2,248
7	Floors	5/01/03	5,840			5,840	5	MO S/L	5,840	0
8	Structure Improvement	5/01/03	24,590			24,590	15	MO S/L	19,945	1,639
9	Roof	5/01/03	9,900			9,900	20	MO S/L	6,023	495
10	Kitchen	5/01/03	3,200			3,200	20	MO S/L	1,947	160
11	Fence	5/01/03	1,212			1,212	15	MO S/L	1,064	81
12	Water Heater - HH	2/15/09	450			450	5	MO S/L	450	0
13	Computer Desk	6/25/91	200			200	5	MO S/L	200	0
14	4-Drawer File Cabinet	8/22/94	299			299	5	MO S/L	299	0
15	Computer Desk	9/18/95	574			574	5	MO S/L	574	0
19	4 Beds	11/10/97	954			954	5	MO S/L	954	0
20	4-Drawer Bureau	11/19/98	817			817	5	MO S/L	817	0
21	4-Drawer Bureau	11/04/99	357			357	5	MO S/L	357	0
22	Desk & Chair	2/15/01	300			300	7	MO S/L	300	0
23	Chair - HON	6/29/01	127			127	7	MO S/L	127	0
24	4-Drawer File Cabinet	1/03/02	1,050			1,050	7	MO S/L	1,050	0
25	12 Chairs	3/27/02	734			734	7	MO S/L	734	0
26	2 Nightstands	3/27/02	362			362	7	MO S/L	362	0
27	4 Ladder End Tables	3/27/02	296			296	7	MO S/L	296	0
28	5 Chairs	4/19/02	265			265	7	MO S/L	265	0
29	4 Drawer File Cabinet	1/01/03	259			259	7	MO S/L	259	0
31	Picnic Table	1/01/03	1,357			1,357	7	MO S/L	1,357	0
32	48" Book Shelves	1/01/03	663			663	7	MO S/L	663	0
35	Cherry Plaque	1/02/04	848			848	7	MO S/L	848	0
36	Office Furniture	3/05/04	519			519	7	MO S/L	519	0
40	Wall Decor - HH	2/15/09	825			825	5	MO S/L	825	0
42	Bunk Beds - HH	2/15/09	1,800			1,800	5	MO S/L	1,800	0
44	Mattresses - HH	2/15/09	1,600			1,600	5	MO S/L	1,600	0
45	Wood Settee - HH	2/15/09	250			250	5	MO S/L	250	0
46	Bunk Beds - HH	2/15/09	900			900	5	MO S/L	900	0
47	Twin Mattressess - HH	2/15/09	800			800	5	MO S/L	800	0
51	Twin Mattresses - HH	2/15/09	800			800	5	MO S/L	800	0
52	Bedside Table - HH	2/15/09	80			80	5	MO S/L	80	0
56	Shelf Unit - HH	2/15/09	150			150	5	MO S/L	150	0
57	Large Wood Table - HH	2/15/09	5,000			5,000	5	MO S/L	5,000	0
58	9 Wood Stools - HH	2/15/09	1,350			1,350	5	MO S/L	1,350	0
59	Treasure Chest - HH	2/15/09	100			100	5	MO S/L	100	0
60	Accessories - HH	2/15/09	1,515			1,515	5	MO S/L	1,515	0
61	Refrigerator	1/31/09	900			900	5	MO S/L	900	0
63	Sprinkler System	5/23/91	6,140			6,140	7	MO S/L	6,140	0
64	Fire Alarm System	6/03/91	1,820			1,820	7	MO S/L	1,820	0
65	Alert Alarm System	6/03/91	1,902			1,902	7	MO S/L	1,902	0
66	Carrier 2*1/2 Ton AC	12/30/91	2,400			2,400	7	MO S/L	2,400	0
67	Flood Lights	3/08/92	320			320	7	MO S/L	320	0
68	Irrigation System	10/16/97	6,509			6,509	7	MO S/L	6,509	0
73	Office Equipment	10/06/99	556			556	5	MO S/L	556	0
74	Printer	Sold/Scrapped: 6/30/17								
		10/15/99	524			524	5	MO S/L	524	0
77	HP Desk Jet Printer	Sold/Scrapped: 6/30/17								
		3/02/00	261			261	5	MO S/L	261	0
78	Freezer	Sold/Scrapped: 6/30/17								
		7/06/00	634			634	7	MO S/L	634	0
79	Memory Upgrade	Sold/Scrapped: 6/30/17								
		11/10/00	206			206	5	MO S/L	206	0
82	Dell Computer	Sold/Scrapped: 6/30/17								
		1/31/02	1,075			1,075	5	MO S/L	1,075	0
83	Dell Monitor	Sold/Scrapped: 6/30/17								
		1/31/02	229			229	5	MO S/L	229	0
84	HP Printer	Sold/Scrapped: 6/30/17								
		1/31/02	593			593	5	MO S/L	593	0
85	Air Conditioner	Sold/Scrapped: 6/30/17								
		8/16/02	3,144			3,144	7	MO S/L	3,144	0
86	2 Dell Computers	Sold/Scrapped: 6/30/17								
		10/28/02	2,098			2,098	5	MO S/L	2,098	0
87	Alarm System	Sold/Scrapped: 6/30/17								
		5/01/03	2,738			2,738	7	MO S/L	2,738	0

58-1907913

Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
88	Air Conditioner	5/01/03	4,809				4,809	7	MO S/L	4,809	0
89	Telephone System	5/01/03	3,652				3,652	5	MO S/L	3,652	0
	Sold/Scrapped: 6/30/17										
90	Sign	9/19/03	915				915	7	MO S/L	915	0
91	Outdoor Lighting	12/26/03	400				400	7	MO S/L	400	0
92	3 Monitors	1/01/04	2,925				2,925	5	MO S/L	2,925	0
	Sold/Scrapped: 6/30/17										
93	Dell Computers	3/05/04	1,760				1,760	5	MO S/L	1,760	0
	Sold/Scrapped: 6/30/17										
94	Dryer	6/14/04	341				341	7	MO S/L	341	0
	Sold/Scrapped: 6/30/17										
95	Stove	4/01/05	530				530	7	MO S/L	530	0
96	Refrigerator	6/07/05	603				603	7	MO S/L	603	0
97	File Cabinets	12/15/05	451				451	7	MO S/L	451	0
98	Grandair A/C	2/21/06	2,800				2,800	7	MO S/L	2,800	0
100	HP Computer	6/14/06	250				250	5	MO S/L	250	0
	Sold/Scrapped: 6/30/17										
101	2 Ton Grandair	10/25/06	2,800				2,800	7	MO S/L	2,800	0
103	Kenmore Washer	3/16/09	145				145	5	MO S/L	145	0
104	Kenmore Chest Freezer	8/13/08	370				370	5	MO S/L	370	0
105	Electric Double Oven	1/23/09	1,299				1,299	5	MO S/L	1,299	0
106	46" LCD TV	2/23/09	500				500	5	MO S/L	500	0
108	Flat Screen TV	2/15/09	500				500	5	MO S/L	500	0
109	Stove	2/15/09	400				400	5	MO S/L	400	0
110	Microwave	2/15/09	300				300	5	MO S/L	300	0
111	Cooktop	1/31/09	370				370	5	MO S/L	370	0
112	Cooktop	1/31/09	600				600	5	MO S/L	600	0
113	Dishwasher	1/31/09	500				500	5	MO S/L	500	0
114	2 Ton A/C	6/19/13	2,700				2,700	5	MO S/L	1,636	540
115	Renovations	6/27/91	19,634				19,634	20	MO S/L	19,634	0
116	New Door	6/27/91	1,182				1,182	20	MO S/L	1,182	0
117	Re-rough all Plumbing	6/27/91	7,999				7,999	20	MO S/L	7,999	0
118	Kitchen Cabinet	6/27/91	1,962				1,962	15	MO S/L	1,962	0
119	Attic Power Vent	1/05/93	580				580	15	MO S/L	580	0
121	Alarm in New Office	6/14/94	340				340	15	MO S/L	340	0
122	Building Addition	6/26/97	92,000				92,000	25	MO S/L	69,920	3,680
124	Building Addition	12/05/97	10,529				10,529	25	MO S/L	7,826	422
125	Tile Kitchen Floor	7/14/00	1,252				1,252	10	MO S/L	1,252	0
126	Carpet	10/23/00	1,400				1,400	10	MO S/L	1,400	0
127	Carpet Office	4/13/01	1,975				1,975	10	MO S/L	1,975	0
128	Renovations	9/30/03	3,050				3,050	15	MO S/L	2,592	204
129	Roof	2/06/04	2,900				2,900	20	MO S/L	1,800	145
130	Fence	4/02/04	400				400	15	MO S/L	327	26
131	Roof	8/15/05	7,698				7,698	20	MO S/L	4,202	385
132	Pave Sidewalk	8/26/05	512				512	15	MO S/L	370	34
133	Kitchen Cabinets	4/03/09	4,300				4,300	15	MO S/L	2,078	287
134	Wood Flooring - HH	4/03/09	1,099				1,099	10	MO S/L	797	110
135	Kitchen Countertops - HH	4/24/09	1,150				1,150	10	MO S/L	824	115
136	Tile Flooring - HH	2/06/09	580				580	15	MO S/L	287	38
137	Shower Units - HH	2/15/09	1,785				1,785	5	MO S/L	1,785	0
138	Toilets - HH	2/15/09	810				810	5	MO S/L	810	0
139	Vanities - HH	2/15/09	1,350				1,350	5	MO S/L	1,350	0
140	Kitchen Cabinets - HH	2/15/09	2,700				2,700	5	MO S/L	2,700	0
141	Lighting - HH	2/15/09	225				225	5	MO S/L	225	0
142	Ceiling Fans - HH	2/15/09	375				375	5	MO S/L	375	0
143	Wood Blinds - HH	2/15/09	980				980	5	MO S/L	980	0
144	Flooring - HH	2/15/09	2,016				2,016	5	MO S/L	2,016	0
145	Plumbing - HH	2/15/09	7,000				7,000	5	MO S/L	7,000	0
146	Lighting - HH	1/31/09	350				350	5	MO S/L	350	0
147	Hamer House Remodel	1/01/14	126,605				126,605	20	MO S/L	15,826	6,330
148	2003 Ford Truck	5/15/03	25,104				25,104	5	MO S/L	25,104	0
149	2013 Ford Econoline Van	12/31/13	24,544				24,544	5	MO S/L	12,272	4,909
150	2014 Honda Odyssey	12/31/13	30,799				30,799	5	MO S/L	15,400	6,160
153	Painting	12/01/01	2,000				2,000	7	MO S/L	2,000	0
154	Swingset	12/01/01	500				500	5	MO S/L	500	0
155	Painting	12/01/01	1,000				1,000	7	MO S/L	1,000	0
156	Gate	6/02/02	2,000				2,000	7	MO S/L	2,000	0
157	Surveillance	8/01/02	4,968				4,968	5	MO S/L	4,968	0
158	Dell Computers	8/15/06	1,196				1,196	5	MO S/L	1,196	0
	Sold/Scrapped: 6/30/17										
159	Sofa & Chair	1/21/08	750				750	5	MO S/L	750	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Sold/Scrapped: 6/30/17										
160	CCTV Equipment	3/12/12	20,822			20,822	10	MO S/L	9,023	2,082
161	Dell Computers	7/02/12	1,236			1,236	10	MO S/L	495	123
162	Dell Computers	7/24/12	883			883	10	MO S/L	346	88
163	Sofas	3/31/14	2,277			2,277	5	MO S/L	1,025	455
164	Leasehold Improvements	7/04/04	30,922			30,922	10	MO S/L	30,922	0
165	1001 Gloucester Street	6/17/15	290,000			290,000	0	-- Land	0	0
168	Office Computers & Software	7/22/14	2,883			2,883	5	MO S/L	1,105	577
169	Video Camera Equipment	4/21/15	8,039			8,039	7	MO S/L	1,340	1,148
170	A/C Unit - HH	4/30/15	2,961			2,961	7	MO S/L	494	423
171	Forensic Equipment Upgrade (Glynn)	5/01/15	5,828			5,828	7	MO S/L	971	833
172	Forensic Interview Equipment (Camden)	5/01/15	15,987			15,987	7	MO S/L	2,665	2,283
173	Dryer - HH	1/12/15	773			773	7	MO S/L	166	110
174	2003 Honda Accord	9/04/14	6,000			6,000	5	MO S/L	2,200	1,200
176	2 Flat Screen TVs - Noncash	7/21/14	1,000			1,000	5	MO S/L	383	200
177	Furniture - Noncash	12/18/14	6,926			6,926	7	MO S/L	1,484	990
178	Sofa, Chairs, Chests - Noncash	12/18/14	3,840			3,840	7	MO S/L	823	548
179	Pottery Barn Furniture - Noncash	12/18/14	2,462			2,462	7	MO S/L	527	352
180	Electronic Reading Devices - Noncash	1/29/15	2,000			2,000	5	MO S/L	567	400
181	Carpet - Noncash	12/18/14	4,532			4,532	10	MO S/L	680	453
182	Panasonic phone system	4/26/16	3,255			3,255	7	MO S/L	77	465
183	Sofa & tables for boys' house	1/27/16	3,391			3,391	7	MO S/L	202	484
184	Vinyl flooring - living room	12/31/15	3,907			3,907	10	MO S/L	195	391
185	Exam room floor leveling	8/24/15	3,216			3,216	10	MO S/L	268	322
Sold/Scrapped: 6/30/17										
186	HP 23" All in One Computer	7/29/15	516			516	10	MO S/L	47	52
187	Cooktop - girls' house	4/08/16	530			530	7	MO S/L	19	76
188	Computer for Case Manager	6/30/16	900			900	5	MO S/L	0	180
191	Paving & Curbs	6/05/17	49,484			49,484	20	MO S/L	0	206
192	Cabinets	6/05/17	128,027			128,027	39	MO S/L	0	274
193	Roofing	6/05/17	97,033			97,033	39	MO S/L	0	207
194	Interior/Exterior Doors	6/05/17	75,411			75,411	39	MO S/L	0	161
195	Windows	6/05/17	100,745			100,745	39	MO S/L	0	215
196	Painting	6/05/17	140,010			140,010	39	MO S/L	0	299
197	Flooring	6/05/17	108,411			108,411	39	MO S/L	0	232
198	Plumbing	6/05/17	110,026			110,026	39	MO S/L	0	235
199	Fire Sprinkler System	6/05/17	105,595			105,595	39	MO S/L	0	226
200	HVAC	6/05/17	207,731			207,731	39	MO S/L	0	444
201	Electrical	6/05/17	296,529			296,529	39	MO S/L	0	634
202	Fire Alarm	6/05/17	21,825			21,825	39	MO S/L	0	47
203	Handicap Lift	6/05/17	33,513			33,513	10	MO S/L	0	279
204	Property Fence/Wall	6/05/17	156,280			156,280	20	MO S/L	0	651
205	Sidewalks - Norwich & F St.	6/05/17	15,969			15,969	20	MO S/L	0	67
206	Building	6/05/17	2,064,182			2,064,182	39	MO S/L	0	4,411
208	Flooring - 3215 Shrine Rd.	2/23/17	4,950			4,950	10	MO S/L	0	165
209	2016 Ford Transit 350 Van	6/15/17	25,000			25,000	5	MO S/L	0	417
210	2013 Dodge Grand Caravan	1/20/17	13,266			13,266	5	MO S/L	0	1,106
211	Security System	4/10/17	78,727			78,727	7	MO S/L	0	2,812
212	Phone System	6/02/17	14,870			14,870	5	MO S/L	0	248
213	Irrigation System	5/08/17	6,725			6,725	7	MO S/L	0	160
214	Landscaping	5/08/17	75,129			75,129	20	MO S/L	0	626
215	Blinds - Admin Building	2/23/17	3,182			3,182	10	MO S/L	0	106
216	Blinds - New Shelter	5/08/17	16,872			16,872	10	MO S/L	0	281
217	Twin Captain's Bed - White	8/10/16	525			525	7	MO S/L	0	69
229	6 Drawer Dresser w/ mirror - white	8/10/16	650			650	7	MO S/L	0	85
230	6 Drawer Dresser w/ mirror - white	8/10/16	650			650	7	MO S/L	0	85
231	6 Drawer Dresser - White	8/10/16	500			500	7	MO S/L	0	65
232	6 Drawer Dresser - White	8/10/16	500			500	7	MO S/L	0	65
233	6 Drawer Dresser - White	8/10/16	500			500	7	MO S/L	0	65
234	6 Drawer Dresser - White	8/10/16	500			500	7	MO S/L	0	65
235	6 Drawer Dresser - White	8/10/16	500			500	7	MO S/L	0	65
236	Twin Captain's Bed - Pecan	8/10/16	525			525	7	MO S/L	0	69
248	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
249	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
250	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
251	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
252	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
253	6 Drawer Dresser - Pecan	8/10/16	500			500	7	MO S/L	0	65
254	Twin Captain's Bed - Pecan	8/10/16	525			525	7	MO S/L	0	69
255	Twin Captain's Bed - Pecan	8/10/16	525			525	7	MO S/L	0	69
256	Twin Captain's Bed - Pecan	8/10/16	525			525	7	MO S/L	0	69

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Asset	Description	Date		Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
		In Service	Cost								
257	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
258	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
259	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
260	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
261	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
262	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
263	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
264	Twin Captain's Bed - Pecan	8/10/16	525				525	7	MO S/L	0	69
265	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
266	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
267	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
268	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
269	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
270	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
271	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
272	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
273	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
274	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
275	Twin Captain's Bed - White	8/10/16	525				525	7	MO S/L	0	69
284	Office 1 Furniture	2/23/17	5,087				5,087	7	MO S/L	0	242
296	Executive Director - Office Furniture	2/23/17	9,700				9,700	7	MO S/L	0	462
297	Computer Room Furniture	4/18/17	6,719				6,719	7	MO S/L	0	160
305	Tutor Room - Tables & Chairs	4/18/17	3,714				3,714	7	MO S/L	0	88
306	Counseling Room 1 Furniture	4/18/17	1,582				1,582	7	MO S/L	0	38
307	Counseling Room 2 Furniture	4/18/17	1,582				1,582	7	MO S/L	0	38
308	Dining Room Furniture	4/18/17	16,828				16,828	7	MO S/L	0	401
309	Office Furniture (Ryan)	4/18/17	6,001				6,001	7	MO S/L	0	143
310	Office Furniture (Lutus)	4/18/17	7,529				7,529	7	MO S/L	0	179
311	Main Building Office Furniture	4/18/17	6,294				6,294	7	MO S/L	0	150
312	Boardroom Furniture	2/23/17	17,356				17,356	7	MO S/L	0	826
313	Reception - Office Furniture	2/23/17	5,018				5,018	7	MO S/L	0	239
314	Visitation Area - Office Furniture	2/23/17	4,519				4,519	7	MO S/L	0	215
315	Office 2 Furniture	2/23/17	5,087				5,087	7	MO S/L	0	242
316	Art Studio Furniture	2/23/17	1,159				1,159	7	MO S/L	0	55
317	Dell Computer - RH	3/20/17	914				914	5	MO S/L	0	46
318	Dell Computer - LA	3/20/17	914				914	5	MO S/L	0	46
319	Dell Laptop - BA	3/21/17	773				773	5	MO S/L	0	39
320	Food Processor	1/23/17	1,252				1,252	10	MO S/L	0	52
321	L Shaped Dishtable	1/23/17	5,100				5,100	10	MO S/L	0	213
322	Dishwasher	1/23/17	6,052				6,052	10	MO S/L	0	252
323	Reach-In Refrigerator	1/23/17	4,303				4,303	10	MO S/L	0	179
324	Two Compartment Sink	1/23/17	967				967	10	MO S/L	0	40
325	Reach-In Freezer	1/23/17	5,520				5,520	10	MO S/L	0	230
326	Ice Maker	1/23/17	2,059				2,059	10	MO S/L	0	86
327	Ice Bin	1/23/17	754				754	10	MO S/L	0	31
328	Heated Cabinet	1/23/17	2,369				2,369	10	MO S/L	0	99
329	Refrigerated Work Top	1/23/17	2,817				2,817	10	MO S/L	0	117
330	72" Range/Griddle	1/23/17	8,335				8,335	10	MO S/L	0	347
331	Exhaust Hood	1/23/17	18,168				18,168	10	MO S/L	0	757
332	Kitchen Worktable	1/23/17	583				583	10	MO S/L	0	24
333	Mop Sink	1/23/17	657				657	10	MO S/L	0	27
334	Kitchen Shelving	1/23/17	2,812				2,812	10	MO S/L	0	117
335	Misc. Kitchen Equipment	1/23/17	6,946				6,946	10	MO S/L	0	289
336	Refrigerator - Front Kitchen	12/01/16	1,370				1,370	10	MO S/L	0	80
337	4 Grayson Chairs	12/09/16	3,737				3,737	10	MO S/L	0	218
338	Media Console (Gray Wash)	1/04/17	1,274				1,274	10	MO S/L	0	64
339	Edgewood Coffee Table	1/04/17	594				594	10	MO S/L	0	30
340	Davis 3 Seat Sofa	12/09/16	2,718				2,718	10	MO S/L	0	159
341	Davis Chair	12/09/16	1,358				1,358	10	MO S/L	0	79
342	Bluestone Console Table	1/04/17	934				934	10	MO S/L	0	47
343	Bix Striped Wool Rug #1	12/09/16	1,189				1,189	10	MO S/L	0	69
344	4 Callie Chairs	12/09/16	2,717				2,717	10	MO S/L	0	158
345	Abbyson Wood TV Console	1/04/17	805				805	10	MO S/L	0	40
346	Gia Chair	12/09/16	2,038				2,038	10	MO S/L	0	119
347	Bix Striped Wool Rug #2	12/09/16	1,189				1,189	10	MO S/L	0	69
348	Gia Sofa	12/09/16	1,699				1,699	10	MO S/L	0	99
349	Gia Sofa	12/09/16	1,699				1,699	10	MO S/L	0	99
350	Computer - Tutor Room	4/24/17	685				685	5	MO S/L	0	23
351	60" Samsung LED TV	4/18/17	699				699	7	MO S/L	0	17
352	60" Samsung LED TV	4/18/17	699				699	7	MO S/L	0	17
353	Wifi System - Admin Building	5/08/17	2,253				2,253	7	MO S/L	0	54

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
355	Wifi Network	5/08/17	709				709	4	MO S/L	0	30
356	Computer System - Computer Room	5/08/17	5,837				5,837	7	MO S/L	0	139
357	Washer - MVWC565-FWO	4/18/17	500				500	10	MO S/L	0	8
358	Washer - MVWC565-FWO	4/18/17	500				500	10	MO S/L	0	8
359	Dryer - WED85 HEFW0	4/18/17	700				700	10	MO S/L	0	12
360	Dryer - WED85 HEFW0	4/18/17	700				700	10	MO S/L	0	12
361	Washer - WFW85HEFW	4/18/17	700				700	10	MO S/L	0	12
362	Washer - WFW85HEFW	4/18/17	700				700	10	MO S/L	0	12
363	36" Rolled Rim Terra Cotta pot	5/02/17	525				525	10	MO S/L	0	9
364	36" Rolled Rim Terra Cotta pot	5/02/17	525				525	10	MO S/L	0	9
365	Donation Building	12/02/16	41,300				41,300	0	-- Land	0	0
366	Donation Building - 1600 Norwich	12/02/16	73,700				73,700	39	MO S/L	0	1,102
368	PTZ Dome Camera	12/29/16	999				999	10	MO S/L	0	50
369	PTZ Camera Remote Controller	12/29/16	549				549	10	MO S/L	0	27
372	Network Video Recorder	12/29/16	1,999				1,999	10	MO S/L	0	100
373	Interview Room Equipment - CAC Jesup	12/29/16	1,351				1,351	10	MO S/L	0	68
375	Phone System - CAC Glynn	6/09/17	3,895				3,895	10	MO S/L	0	32
376	VideOversight Host Software	12/29/16	4,000			X	3,533	5	MOAmort	0	467
377	VideOversight Software - Interview Room	12/29/16	2,500			X	2,208	5	MOAmort	0	292
Total Other Depreciation			<u>5,425,839</u>				<u>5,425,080</u>			<u>520,367</u>	<u>69,592</u>
Total ACRS and Other Depreciation			<u>5,425,839</u>				<u>5,425,080</u>			<u>520,367</u>	<u>69,592</u>
Amortization:											
207	Closing Cost - Donation Building	12/02/16	5,797				5,797	5	MOAmort	0	676
374	Refinance Loan Fees	6/30/17	2,014				2,014	5	MOAmort	0	34
166	Start Up	12/01/01	9,655				9,655	7	MOAmort	9,655	0
167	Start Up	6/01/02	2,648				2,648	5	MOAmort	2,648	0
175	Closing Cost	6/18/15	3,801				3,801	5	MOAmort	823	761
			<u>23,915</u>				<u>23,915</u>			<u>13,126</u>	<u>1,471</u>
Grand Totals			5,449,754				5,448,995			533,493	71,063
Less: Dispositions and Transfers			19,632				19,632			16,684	322
Less: Start-up/Org Expense			0				0			0	0
Net Grand Totals			<u>5,430,122</u>				<u>5,429,363</u>			<u>516,809</u>	<u>70,741</u>

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Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
Other Depreciation:								
2	Safe Harbor Center/Hamer House	5/01/03	8,240	8,240	0	0	0	0
3	Center	12/31/90	85,516	85,516	85,516	0	0	0
4	Storage Shed	5/01/92	1,466	1,466	1,466	0	0	0
5	Shelving for Shed	5/13/99	493	493	493	0	0	0
6	Hamer House	5/01/03	67,419	67,419	29,589	2,248	2,248	0
7	Floors	5/01/03	5,840	5,840	5,840	0	0	0
8	Structure Improvement	5/01/03	24,590	24,590	19,945	1,639	1,639	0
9	Roof	5/01/03	9,900	9,900	6,023	495	495	0
10	Kitchen	5/01/03	3,200	3,200	1,947	160	160	0
11	Fence	5/01/03	1,212	1,212	1,064	81	81	0
12	Water Heater - HH	2/15/09	450	450	450	0	0	0
13	Computer Desk	6/25/91	200	200	200	0	0	0
14	4-Drawer File Cabinet	8/22/94	299	299	299	0	0	0
15	Computer Desk	9/18/95	574	574	574	0	0	0
19	4 Beds	11/10/97	954	954	954	0	0	0
20	4-Drawer Bureau	11/19/98	817	817	817	0	0	0
21	4-Drawer Bureau	11/04/99	357	357	357	0	0	0
22	Desk & Chair	2/15/01	300	300	300	0	0	0
23	Chair - HON	6/29/01	127	127	127	0	0	0
24	4-Drawer File Cabinet	1/03/02	1,050	1,050	1,050	0	0	0
25	12 Chairs	3/27/02	734	734	734	0	0	0
26	2 Nightstands	3/27/02	362	362	362	0	0	0
27	4 Ladder End Tables	3/27/02	296	296	296	0	0	0
28	5 Chairs	4/19/02	265	265	265	0	0	0
29	4 Drawer File Cabinet	1/01/03	259	259	259	0	0	0
31	Picnic Table	1/01/03	1,357	1,357	1,357	0	0	0
32	48" Book Shelves	1/01/03	663	663	663	0	0	0
35	Cherry Plaque	1/02/04	848	848	848	0	0	0
36	Office Furniture	3/05/04	519	519	519	0	0	0
40	Wall Decor - HH	2/15/09	825	825	825	0	0	0
42	Bunk Beds - HH	2/15/09	1,800	1,800	1,800	0	0	0
44	Mattresses - HH	2/15/09	1,600	1,600	1,600	0	0	0
45	Wood Settee - HH	2/15/09	250	250	250	0	0	0
46	Bunk Beds - HH	2/15/09	900	900	900	0	0	0
47	Twin Mattressess - HH	2/15/09	800	800	800	0	0	0
51	Twin Mattressess - HH	2/15/09	800	800	800	0	0	0
52	Bedside Table - HH	2/15/09	80	80	80	0	0	0
56	Shelf Unit - HH	2/15/09	150	150	150	0	0	0
57	Large Wood Table - HH	2/15/09	5,000	5,000	5,000	0	0	0
58	9 Wood Stools - HH	2/15/09	1,350	1,350	1,350	0	0	0
59	Treasure Chest - HH	2/15/09	100	100	100	0	0	0
60	Accessories - HH	2/15/09	1,515	1,515	1,515	0	0	0
61	Refrigerator	1/31/09	900	900	900	0	0	0
63	Sprinkler System	5/23/91	6,140	6,140	6,140	0	0	0
64	Fire Alarm System	6/03/91	1,820	1,820	1,820	0	0	0
65	Alert Alarm System	6/03/91	1,902	1,902	1,902	0	0	0
66	Carrier 2*1/2 Ton AC	12/30/91	2,400	2,400	2,400	0	0	0
67	Flood Lights	3/08/92	320	320	320	0	0	0
68	Irrigation System	10/16/97	6,509	6,509	6,509	0	0	0
73	Office Equipment	10/06/99	556	556	556	0	0	0
74	Printer	Sold/Scrapped: 6/30/17	524	524	524	0	0	0
77	HP Desk Jet Printer	Sold/Scrapped: 6/30/17	261	261	261	0	0	0
78	Freezer	7/06/00	634	634	634	0	0	0
79	Memory Upgrade	11/10/00	206	206	206	0	0	0
82	Dell Computer	Sold/Scrapped: 6/30/17	1,075	1,075	1,075	0	0	0
83	Dell Monitor	Sold/Scrapped: 6/30/17	229	229	229	0	0	0
84	HP Printer	Sold/Scrapped: 6/30/17	593	593	593	0	0	0
85	Air Conditioner	8/16/02	3,144	3,144	3,144	0	0	0
86	2 Dell Computers	10/28/02	2,098	2,098	2,098	0	0	0
87	Alarm System	Sold/Scrapped: 6/30/17	2,738	2,738	2,738	0	0	0

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Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
88	Air Conditioner	5/01/03	4,809	4,809	4,809	0	0	0
89	Telephone System	5/01/03	3,652	3,652	3,652	0	0	0
	Sold/Scrapped: 6/30/17							
90	Sign	9/19/03	915	915	915	0	0	0
91	Outdoor Lighting	12/26/03	400	400	400	0	0	0
92	3 Monitors	1/01/04	2,925	2,925	2,925	0	0	0
	Sold/Scrapped: 6/30/17							
93	Dell Computers	3/05/04	1,760	1,760	1,760	0	0	0
	Sold/Scrapped: 6/30/17							
94	Dryer	6/14/04	341	341	341	0	0	0
	Sold/Scrapped: 6/30/17							
95	Stove	4/01/05	530	530	530	0	0	0
96	Refrigerator	6/07/05	603	603	603	0	0	0
97	File Cabinets	12/15/05	451	451	451	0	0	0
98	Grandair A/C	2/21/06	2,800	2,800	2,800	0	0	0
100	HP Computer	6/14/06	250	250	250	0	0	0
	Sold/Scrapped: 6/30/17							
101	2 Ton Grandair	10/25/06	2,800	2,800	2,800	0	0	0
103	Kenmore Washer	3/16/09	145	145	145	0	0	0
104	Kenmore Chest Freezer	8/13/08	370	370	370	0	0	0
105	Electric Double Oven	1/23/09	1,299	1,299	1,299	0	0	0
106	46" LCD TV	2/23/09	500	500	500	0	0	0
108	Flat Screen TV	2/15/09	500	500	500	0	0	0
109	Stove	2/15/09	400	400	400	0	0	0
110	Microwave	2/15/09	300	300	300	0	0	0
111	Cooktop	1/31/09	370	370	370	0	0	0
112	Cooktop	1/31/09	600	600	600	0	0	0
113	Dishwasher	1/31/09	500	500	500	0	0	0
114	2 Ton A/C	6/19/13	2,700	2,700	1,636	540	540	0
115	Renovations	6/27/91	19,634	19,634	19,634	0	0	0
116	New Door	6/27/91	1,182	1,182	1,182	0	0	0
117	Re-rough all Plumbing	6/27/91	7,999	7,999	7,999	0	0	0
118	Kitchen Cabinet	6/27/91	1,962	1,962	1,962	0	0	0
119	Attic Power Vent	1/05/93	580	580	580	0	0	0
121	Alarm in New Office	6/14/94	340	340	340	0	0	0
122	Building Addition	6/26/97	92,000	92,000	69,920	3,680	3,680	0
124	Building Addition	12/05/97	10,529	10,529	7,826	422	422	0
125	Tile Kitchen Floor	7/14/00	1,252	1,252	1,252	0	0	0
126	Carpet	10/23/00	1,400	1,400	1,400	0	0	0
127	Carpet Office	4/13/01	1,975	1,975	1,975	0	0	0
128	Renovations	9/30/03	3,050	3,050	2,592	204	204	0
129	Roof	2/06/04	2,900	2,900	1,800	145	145	0
130	Fence	4/02/04	400	400	327	26	26	0
131	Roof	8/15/05	7,698	7,698	4,202	385	385	0
132	Pave Sidewalk	8/26/05	512	512	370	34	34	0
133	Kitchen Cabinets	4/03/09	4,300	4,300	2,078	287	287	0
134	Wood Flooring - HH	4/03/09	1,099	1,099	797	110	110	0
135	Kitchen Countertops - HH	4/24/09	1,150	1,150	824	115	115	0
136	Tile Flooring - HH	2/06/09	580	580	287	38	38	0
137	Shower Units - HH	2/15/09	1,785	1,785	1,785	0	0	0
138	Toilets - HH	2/15/09	810	810	810	0	0	0
139	Vanities - HH	2/15/09	1,350	1,350	1,350	0	0	0
140	Kitchen Cabinets - HH	2/15/09	2,700	2,700	2,700	0	0	0
141	Lighting - HH	2/15/09	225	225	225	0	0	0
142	Ceiling Fans - HH	2/15/09	375	375	375	0	0	0
143	Wood Blinds - HH	2/15/09	980	980	980	0	0	0
144	Flooring - HH	2/15/09	2,016	2,016	2,016	0	0	0
145	Plumbing - HH	2/15/09	7,000	7,000	7,000	0	0	0
146	Lighting - HH	1/31/09	350	350	350	0	0	0
147	Hamer House Remodel	1/01/14	126,605	126,605	15,826	6,330	6,330	0
148	2003 Ford Truck	5/15/03	25,104	25,104	25,104	0	0	0
149	2013 Ford Econoline Van	12/31/13	24,544	24,544	12,272	4,909	4,909	0
150	2014 Honda Odyssey	12/31/13	30,799	30,799	15,400	6,160	6,160	0
153	Painting	12/01/01	2,000	2,000	2,000	0	0	0
154	Swingset	12/01/01	500	500	500	0	0	0
155	Painting	12/01/01	1,000	1,000	1,000	0	0	0
156	Gate	6/02/02	2,000	2,000	2,000	0	0	0
157	Surveillance	8/01/02	4,968	4,968	4,968	0	0	0
158	Dell Computers	8/15/06	1,196	1,196	1,196	0	0	0
	Sold/Scrapped: 6/30/17							
159	Sofa & Chair	1/21/08	750	750	750	0	0	0

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Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
Sold/Scrapped: 6/30/17								
160	CCTV Equipment	3/12/12	20,822	20,822	9,023	2,082	2,082	0
161	Dell Computers	7/02/12	1,236	1,236	495	123	123	0
162	Dell Computers	7/24/12	883	883	346	88	88	0
163	Sofas	3/31/14	2,277	2,277	1,025	455	455	0
164	Leasehold Improvements	7/04/04	30,922	30,922	30,922	0	0	0
165	1001 Gloucester Street	6/17/15	290,000	290,000	0	0	0	0
168	Office Computers & Software	7/22/14	2,883	2,883	1,105	577	577	0
169	Video Camera Equipment	4/21/15	8,039	8,039	1,340	1,148	1,148	0
170	A/C Unit - HH	4/30/15	2,961	2,961	494	423	423	0
171	Forensic Equipment Upgrade (Glynn)	5/01/15	5,828	5,828	971	833	833	0
172	Forensic Interview Equipment (Camden)	5/01/15	15,987	15,987	2,665	2,283	2,283	0
173	Dryer - HH	1/12/15	773	773	166	110	110	0
174	2003 Honda Accord	9/04/14	6,000	6,000	2,200	1,200	1,200	0
176	2 Flat Screen TVs - Noncash	7/21/14	1,000	1,000	383	200	200	0
177	Furniture - Noncash	12/18/14	6,926	6,926	1,484	990	990	0
178	Sofa, Chairs, Chests - Noncash	12/18/14	3,840	3,840	823	548	548	0
179	Pottery Barn Furniture - Noncash	12/18/14	2,462	2,462	527	352	352	0
180	Electronic Reading Devices - Noncash	1/29/15	2,000	2,000	567	400	400	0
181	Carpet - Noncash	12/18/14	4,532	4,532	680	453	453	0
182	Panasonic phone system	4/26/16	3,255	3,255	77	465	465	0
183	Sofa & tables for boys' house	1/27/16	3,391	3,391	202	484	484	0
184	Vinyl flooring - living room	12/31/15	3,907	3,907	195	391	391	0
185	Exam room floor leveling	8/24/15	3,216	3,216	268	322	322	0
Sold/Scrapped: 6/30/17								
186	HP 23" All in One Computer	7/29/15	516	516	47	52	52	0
187	Cooktop - girls' house	4/08/16	530	530	19	76	76	0
188	Computer for Case Manager	6/30/16	900	900	0	180	180	0
191	Paving & Curbs	6/05/17	49,484	49,484	0	206	206	0
192	Cabinets	6/05/17	128,027	128,027	0	274	274	0
193	Roofing	6/05/17	97,033	97,033	0	207	207	0
194	Interior/Exterior Doors	6/05/17	75,411	75,411	0	161	161	0
195	Windows	6/05/17	100,745	100,745	0	215	215	0
196	Painting	6/05/17	140,010	140,010	0	299	299	0
197	Flooring	6/05/17	108,411	108,411	0	232	232	0
198	Plumbing	6/05/17	110,026	110,026	0	235	235	0
199	Fire Sprinkler System	6/05/17	105,595	105,595	0	226	226	0
200	HVAC	6/05/17	207,731	207,731	0	444	444	0
201	Electrical	6/05/17	296,529	296,529	0	634	634	0
202	Fire Alarm	6/05/17	21,825	21,825	0	47	47	0
203	Handicap Lift	6/05/17	33,513	33,513	0	279	279	0
204	Property Fence/Wall	6/05/17	156,280	156,280	0	651	651	0
205	Sidewalks - Norwich & F St.	6/05/17	15,969	15,969	0	67	67	0
206	Building	6/05/17	2,064,182	2,064,182	0	4,411	4,411	0
208	Flooring - 3215 Shrine Rd.	2/23/17	4,950	4,950	0	165	165	0
209	2016 Ford Transit 350 Van	6/15/17	25,000	25,000	0	417	417	0
210	2013 Dodge Grand Caravan	1/20/17	13,266	13,266	0	1,106	1,106	0
211	Security System	4/10/17	78,727	78,727	0	2,812	2,812	0
212	Phone System	6/02/17	14,870	14,870	0	248	248	0
213	Irrigation System	5/08/17	6,725	6,725	0	160	160	0
214	Landscaping	5/08/17	75,129	75,129	0	626	626	0
215	Blinds - Admin Building	2/23/17	3,182	3,182	0	106	106	0
216	Blinds - New Shelter	5/08/17	16,872	16,872	0	281	281	0
217	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
229	6 Drawer Dresser w/ mirror - white	8/10/16	650	650	0	85	85	0
230	6 Drawer Dresser w/ mirror - white	8/10/16	650	650	0	85	85	0
231	6 Drawer Dresser - White	8/10/16	500	500	0	65	65	0
232	6 Drawer Dresser - White	8/10/16	500	500	0	65	65	0
233	6 Drawer Dresser - White	8/10/16	500	500	0	65	65	0
234	6 Drawer Dresser - White	8/10/16	500	500	0	65	65	0
235	6 Drawer Dresser - White	8/10/16	500	500	0	65	65	0
236	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
248	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
249	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
250	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
251	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
252	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
253	6 Drawer Dresser - Pecan	8/10/16	500	500	0	65	65	0
254	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
255	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
256	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0

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Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
257	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
258	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
259	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
260	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
261	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
262	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
263	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
264	Twin Captain's Bed - Pecan	8/10/16	525	525	0	69	69	0
265	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
266	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
267	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
268	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
269	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
270	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
271	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
272	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
273	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
274	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
275	Twin Captain's Bed - White	8/10/16	525	525	0	69	69	0
284	Office 1 Furniture	2/23/17	5,087	5,087	0	242	242	0
296	Executive Director - Office Furniture	2/23/17	9,700	9,700	0	462	462	0
297	Computer Room Furniture	4/18/17	6,719	6,719	0	160	160	0
305	Tutor Room - Tables & Chairs	4/18/17	3,714	3,714	0	88	88	0
306	Counseling Room 1 Furniture	4/18/17	1,582	1,582	0	38	38	0
307	Counseling Room 2 Furniture	4/18/17	1,582	1,582	0	38	38	0
308	Dining Room Furniture	4/18/17	16,828	16,828	0	401	401	0
309	Office Furniture (Ryan)	4/18/17	6,001	6,001	0	143	143	0
310	Office Furniture (Lutus)	4/18/17	7,529	7,529	0	179	179	0
311	Main Building Office Furniture	4/18/17	6,294	6,294	0	150	150	0
312	Boardroom Furniture	2/23/17	17,356	17,356	0	826	826	0
313	Reception - Office Furniture	2/23/17	5,018	5,018	0	239	239	0
314	Visitation Area - Office Furniture	2/23/17	4,519	4,519	0	215	215	0
315	Office 2 Furniture	2/23/17	5,087	5,087	0	242	242	0
316	Art Studio Furniture	2/23/17	1,159	1,159	0	55	55	0
317	Dell Computer - RH	3/20/17	914	914	0	46	46	0
318	Dell Computer - LA	3/20/17	914	914	0	46	46	0
319	Dell Laptop - BA	3/21/17	773	773	0	39	39	0
320	Food Processor	1/23/17	1,252	1,252	0	52	52	0
321	L Shaped Dishtable	1/23/17	5,100	5,100	0	213	213	0
322	Dishwasher	1/23/17	6,052	6,052	0	252	252	0
323	Reach-In Refrigerator	1/23/17	4,303	4,303	0	179	179	0
324	Two Compartment Sink	1/23/17	967	967	0	40	40	0
325	Reach-In Freezer	1/23/17	5,520	5,520	0	230	230	0
326	Ice Maker	1/23/17	2,059	2,059	0	86	86	0
327	Ice Bin	1/23/17	754	754	0	31	31	0
328	Heated Cabinet	1/23/17	2,369	2,369	0	99	99	0
329	Refrigerated Work Top	1/23/17	2,817	2,817	0	117	117	0
330	72" Range/Griddle	1/23/17	8,335	8,335	0	347	347	0
331	Exhaust Hood	1/23/17	18,168	18,168	0	757	757	0
332	Kitchen Worktable	1/23/17	583	583	0	24	24	0
333	Mop Sink	1/23/17	657	657	0	27	27	0
334	Kitchen Shelving	1/23/17	2,812	2,812	0	117	117	0
335	Misc. Kitchen Equipment	1/23/17	6,946	6,946	0	289	289	0
336	Refrigerator - Front Kitchen	12/01/16	1,370	1,370	0	80	80	0
337	4 Grayson Chairs	12/09/16	3,737	3,737	0	218	218	0
338	Media Console (Gray Wash)	1/04/17	1,274	1,274	0	64	64	0
339	Edgewood Coffee Table	1/04/17	594	594	0	30	30	0
340	Davis 3 Seat Sofa	12/09/16	2,718	2,718	0	159	159	0
341	Davis Chair	12/09/16	1,358	1,358	0	79	79	0
342	Bluestone Console Table	1/04/17	934	934	0	47	47	0
343	Bix Striped Wool Rug #1	12/09/16	1,189	1,189	0	69	69	0
344	4 Callie Chairs	12/09/16	2,717	2,717	0	158	158	0
345	Abbyson Wood TV Console	1/04/17	805	805	0	40	40	0
346	Gia Chair	12/09/16	2,038	2,038	0	119	119	0
347	Bix Striped Wool Rug #2	12/09/16	1,189	1,189	0	69	69	0
348	Gia Sofa	12/09/16	1,699	1,699	0	99	99	0
349	Gia Sofa	12/09/16	1,699	1,699	0	99	99	0
350	Computer - Tutor Room	4/24/17	685	685	0	23	23	0
351	60" Samsung LED TV	4/18/17	699	699	0	17	17	0
352	60" Samsung LED TV	4/18/17	699	699	0	17	17	0
353	Wifi System - Admin Building	5/08/17	2,253	2,253	0	54	54	0

58-1907913

GA Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
355	Wifi Network	5/08/17	709	709	0	30	30	0
356	Computer System - Computer Room	5/08/17	5,837	5,837	0	139	139	0
357	Washer - MVWC565-FWO	4/18/17	500	500	0	8	8	0
358	Washer - MVWC565-FWO	4/18/17	500	500	0	8	8	0
359	Dryer - WED85 HEFW0	4/18/17	700	700	0	12	12	0
360	Dryer - WED85 HEFW0	4/18/17	700	700	0	12	12	0
361	Washer - WFW85HEFW	4/18/17	700	700	0	12	12	0
362	Washer - WFW85HEFW	4/18/17	700	700	0	12	12	0
363	36" Rolled Rim Terra Cotta pot	5/02/17	525	525	0	9	9	0
364	36" Rolled Rim Terra Cotta pot	5/02/17	525	525	0	9	9	0
365	Donation Building	12/02/16	41,300	41,300	0	0	0	0
366	Donation Building - 1600 Norwich	12/02/16	73,700	73,700	0	1,102	1,102	0
368	PTZ Dome Camera	12/29/16	999	999	0	50	50	0
369	PTZ Camera Remote Controller	12/29/16	549	549	0	27	27	0
372	Network Video Recorder	12/29/16	1,999	1,999	0	100	100	0
373	Interview Room Equipment - CAC Jesup	12/29/16	1,351	1,351	0	68	68	0
375	Phone System - CAC Glynn	6/09/17	3,895	3,895	0	32	32	0
376	VideOversight Host Software	12/29/16	4,000	4,000	0	467	467	0
377	VideOversight Software - Interview Room	12/29/16	2,500	2,500	0	292	292	0
Total Other Depreciation			<u>5,425,839</u>	<u>5,425,839</u>	<u>520,367</u>	<u>69,592</u>	<u>69,592</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>5,425,839</u>	<u>5,425,839</u>	<u>520,367</u>	<u>69,592</u>	<u>69,592</u>	<u>0</u>
Amortization:								
207	Closing Cost - Donation Building	12/02/16	5,797	5,797	0	676	676	0
374	Refinance Loan Fees	6/30/17	2,014	2,014	0	34	34	0
166	Start Up	12/01/01	9,655	9,655	9,655	0	0	0
167	Start Up	6/01/02	2,648	2,648	2,648	0	0	0
175	Closing Cost	6/18/15	3,801	3,801	823	761	761	0
			<u>23,915</u>	<u>23,915</u>	<u>13,126</u>	<u>1,471</u>	<u>1,471</u>	<u>0</u>
Grand Totals			5,449,754	5,449,754	533,493	71,063	71,063	0
Less: Dispositions			19,632	19,632	16,684	322	322	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>5,430,122</u>	<u>5,430,122</u>	<u>516,809</u>	<u>70,741</u>	<u>70,741</u>	<u>0</u>

58-1907913

Bonus Depreciation Report

FYE: 6/30/2017

<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>	<u>Bus Pct</u>	<u>Tax Sec 179 Exp</u>	<u>Current Bonus</u>	<u>Prior Bonus</u>	<u>Tax - Basis for Depr</u>
Activity: Form 990, Page 1								
376	VideOversight Host Software	12/29/16	4,000		0	467	0	3,533
377	VideOversight Software - Interview Room	12/29/16	2,500		0	292	0	2,208
	Form 990, Page 1		<u>6,500</u>		<u>0</u>	<u>759</u>	<u>0</u>	<u>5,741</u>
	Grand Total		<u>6,500</u>		<u>0</u>	<u>759</u>	<u>0</u>	<u>5,741</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<p>There are no assets that meet the criteria of this report</p>						

58-1907913

Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Other Depreciation:					
2	Safe Harbor Center/Hamer House	5/01/03	8,240	0	0
3	Center	12/31/90	85,516	0	0
4	Storage Shed	5/01/92	1,466	0	0
5	Shelving for Shed	5/13/99	493	0	0
6	Hamer House	5/01/03	67,419	2,247	0
7	Floors	5/01/03	5,840	0	0
8	Structure Improvement	5/01/03	24,590	1,640	0
9	Roof	5/01/03	9,900	495	0
10	Kitchen	5/01/03	3,200	160	0
11	Fence	5/01/03	1,212	67	0
12	Water Heater - HH	2/15/09	450	0	0
13	Computer Desk	6/25/91	200	0	0
14	4-Drawer File Cabinet	8/22/94	299	0	0
15	Computer Desk	9/18/95	574	0	0
19	4 Beds	11/10/97	954	0	0
20	4-Drawer Bureau	11/19/98	817	0	0
21	4-Drawer Bureau	11/04/99	357	0	0
22	Desk & Chair	2/15/01	300	0	0
23	Chair - HON	6/29/01	127	0	0
24	4-Drawer File Cabinet	1/03/02	1,050	0	0
25	12 Chairs	3/27/02	734	0	0
26	2 Nightstands	3/27/02	362	0	0
27	4 Ladder End Tables	3/27/02	296	0	0
28	5 Chairs	4/19/02	265	0	0
29	4 Drawer File Cabinet	1/01/03	259	0	0
31	Picnic Table	1/01/03	1,357	0	0
32	48" Book Shelves	1/01/03	663	0	0
35	Cherry Plaque	1/02/04	848	0	0
36	Office Furniture	3/05/04	519	0	0
40	Wall Decor - HH	2/15/09	825	0	0
42	Bunk Beds - HH	2/15/09	1,800	0	0
44	Mattresses - HH	2/15/09	1,600	0	0
45	Wood Settee - HH	2/15/09	250	0	0
46	Bunk Beds - HH	2/15/09	900	0	0
47	Twin Mattressess - HH	2/15/09	800	0	0
51	Twin Mattresses - HH	2/15/09	800	0	0
52	Bedside Table - HH	2/15/09	80	0	0
56	Shelf Unit - HH	2/15/09	150	0	0
57	Large Wood Table - HH	2/15/09	5,000	0	0
58	9 Wood Stools - HH	2/15/09	1,350	0	0
59	Treasure Chest - HH	2/15/09	100	0	0
60	Accessories - HH	2/15/09	1,515	0	0
61	Refrigerator	1/31/09	900	0	0
63	Sprinkler System	5/23/91	6,140	0	0
64	Fire Alarm System	6/03/91	1,820	0	0
65	Alert Alarm System	6/03/91	1,902	0	0
66	Carrier 2*1/2 Ton AC	12/30/91	2,400	0	0
67	Flood Lights	3/08/92	320	0	0
68	Irrigation System	10/16/97	6,509	0	0
78	Freezer	7/06/00	634	0	0
85	Air Conditioner	8/16/02	3,144	0	0
87	Alarm System	5/01/03	2,738	0	0
88	Air Conditioner	5/01/03	4,809	0	0
90	Sign	9/19/03	915	0	0
91	Outdoor Lighting	12/26/03	400	0	0
95	Stove	4/01/05	530	0	0
96	Refrigerator	6/07/05	603	0	0
97	File Cabinets	12/15/05	451	0	0
98	Grandair A/C	2/21/06	2,800	0	0
101	2 Ton Grandair	10/25/06	2,800	0	0
103	Kenmore Washer	3/16/09	145	0	0
104	Kenmore Chest Freezer	8/13/08	370	0	0
105	Electric Double Oven	1/23/09	1,299	0	0
106	46" LCD TV	2/23/09	500	0	0
108	Flat Screen TV	2/15/09	500	0	0
109	Stove	2/15/09	400	0	0
110	Microwave	2/15/09	300	0	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
111	Cooktop	1/31/09	370	0	0
112	Cooktop	1/31/09	600	0	0
113	Dishwasher	1/31/09	500	0	0
114	2 Ton A/C	6/19/13	2,700	524	0
115	Renovations	6/27/91	19,634	0	0
116	New Door	6/27/91	1,182	0	0
117	Re-rough all Plumbing	6/27/91	7,999	0	0
118	Kitchen Cabinet	6/27/91	1,962	0	0
119	Attic Power Vent	1/05/93	580	0	0
121	Alarm in New Office	6/14/94	340	0	0
122	Building Addition	6/26/97	92,000	3,680	0
124	Building Addition	12/05/97	10,529	421	0
125	Tile Kitchen Floor	7/14/00	1,252	0	0
126	Carpet	10/23/00	1,400	0	0
127	Carpet Office	4/13/01	1,975	0	0
128	Renovations	9/30/03	3,050	203	0
129	Roof	2/06/04	2,900	145	0
130	Fence	4/02/04	400	27	0
131	Roof	8/15/05	7,698	385	0
132	Pave Sidewalk	8/26/05	512	34	0
133	Kitchen Cabinets	4/03/09	4,300	287	0
134	Wood Flooring - HH	4/03/09	1,099	110	0
135	Kitchen Countertops - HH	4/24/09	1,150	115	0
136	Tile Flooring - HH	2/06/09	580	39	0
137	Shower Units - HH	2/15/09	1,785	0	0
138	Toilets - HH	2/15/09	810	0	0
139	Vanities - HH	2/15/09	1,350	0	0
140	Kitchen Cabinets - HH	2/15/09	2,700	0	0
141	Lighting - HH	2/15/09	225	0	0
142	Ceiling Fans - HH	2/15/09	375	0	0
143	Wood Blinds - HH	2/15/09	980	0	0
144	Flooring - HH	2/15/09	2,016	0	0
145	Plumbing - HH	2/15/09	7,000	0	0
146	Lighting - HH	1/31/09	350	0	0
147	Hamer House Remodel	1/01/14	126,605	6,330	0
148	2003 Ford Truck	5/15/03	25,104	0	0
149	2013 Ford Econoline Van	12/31/13	24,544	4,908	0
150	2014 Honda Odyssey	12/31/13	30,799	6,160	0
153	Painting	12/01/01	2,000	0	0
154	Swingset	12/01/01	500	0	0
155	Painting	12/01/01	1,000	0	0
156	Gate	6/02/02	2,000	0	0
157	Surveillance	8/01/02	4,968	0	0
160	CCTV Equipment	3/12/12	20,822	2,082	0
161	Dell Computers	7/02/12	1,236	124	0
162	Dell Computers	7/24/12	883	88	0
163	Sofas	3/31/14	2,277	455	0
164	Leasehold Improvements	7/04/04	30,922	0	0
165	1001 Gloucester Street	6/17/15	290,000	0	0
168	Office Computers & Software	7/22/14	2,883	576	0
169	Video Camera Equipment	4/21/15	8,039	1,149	0
170	A/C Unit - HH	4/30/15	2,961	423	0
171	Forensic Equipment Upgrade (Glynn)	5/01/15	5,828	832	0
172	Forensic Interview Equipment (Camden)	5/01/15	15,987	2,284	0
173	Dryer - HH	1/12/15	773	111	0
174	2003 Honda Accord	9/04/14	6,000	1,200	0
176	2 Flat Screen TVs - Noncash	7/21/14	1,000	200	0
177	Furniture - Noncash	12/18/14	6,926	989	0
178	Sofa, Chairs, Chests - Noncash	12/18/14	3,840	549	0
179	Pottery Barn Furniture - Noncash	12/18/14	2,462	352	0
180	Electronic Reading Devices - Noncash	1/29/15	2,000	400	0
181	Carpet - Noncash	12/18/14	4,532	453	0
182	Panasonic phone system	4/26/16	3,255	465	0
183	Sofa & tables for boys' house	1/27/16	3,391	485	0
184	Vinyl flooring - living room	12/31/15	3,907	391	0
186	HP 23" All in One Computer	7/29/15	516	52	0
187	Cooktop - girls' house	4/08/16	530	75	0
188	Computer for Case Manager	6/30/16	900	180	0
191	Paving & Curbs	6/05/17	49,484	2,474	0
192	Cabinets	6/05/17	128,027	3,282	0
193	Roofing	6/05/17	97,033	2,488	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
194	Interior/Exterior Doors	6/05/17	75,411	1,934	0
195	Windows	6/05/17	100,745	2,583	0
196	Painting	6/05/17	140,010	3,590	0
197	Flooring	6/05/17	108,411	2,779	0
198	Plumbing	6/05/17	110,026	2,821	0
199	Fire Sprinkler System	6/05/17	105,595	2,707	0
200	HVAC	6/05/17	207,731	5,326	0
201	Electrical	6/05/17	296,529	7,603	0
202	Fire Alarm	6/05/17	21,825	559	0
203	Handicap Lift	6/05/17	33,513	3,352	0
204	Property Fence/Wall	6/05/17	156,280	7,814	0
205	Sidewalks - Norwich & F St.	6/05/17	15,969	798	0
206	Building	6/05/17	2,064,182	52,927	0
208	Flooring - 3215 Shrine Rd.	2/23/17	4,950	495	0
209	2016 Ford Transit 350 Van	6/15/17	25,000	5,000	0
210	2013 Dodge Grand Caravan	1/20/17	13,266	2,653	0
211	Security System	4/10/17	78,727	11,246	0
212	Phone System	6/02/17	14,870	2,974	0
213	Irrigation System	5/08/17	6,725	961	0
214	Landscaping	5/08/17	75,129	3,757	0
215	Blinds - Admin Building	2/23/17	3,182	318	0
216	Blinds - New Shelter	5/08/17	16,872	1,687	0
217	Twin Captain's Bed - White	8/10/16	525	75	0
229	6 Drawer Dresser w/ mirror - white	8/10/16	650	93	0
230	6 Drawer Dresser w/ mirror - white	8/10/16	650	93	0
231	6 Drawer Dresser - White	8/10/16	500	72	0
232	6 Drawer Dresser - White	8/10/16	500	72	0
233	6 Drawer Dresser - White	8/10/16	500	72	0
234	6 Drawer Dresser - White	8/10/16	500	72	0
235	6 Drawer Dresser - White	8/10/16	500	72	0
236	Twin Captain's Bed - Pecan	8/10/16	525	75	0
248	6 Drawer Dresser - Pecan	8/10/16	500	72	0
249	6 Drawer Dresser - Pecan	8/10/16	500	72	0
250	6 Drawer Dresser - Pecan	8/10/16	500	72	0
251	6 Drawer Dresser - Pecan	8/10/16	500	72	0
252	6 Drawer Dresser - Pecan	8/10/16	500	72	0
253	6 Drawer Dresser - Pecan	8/10/16	500	72	0
254	Twin Captain's Bed - Pecan	8/10/16	525	75	0
255	Twin Captain's Bed - Pecan	8/10/16	525	75	0
256	Twin Captain's Bed - Pecan	8/10/16	525	75	0
257	Twin Captain's Bed - Pecan	8/10/16	525	75	0
258	Twin Captain's Bed - Pecan	8/10/16	525	75	0
259	Twin Captain's Bed - Pecan	8/10/16	525	75	0
260	Twin Captain's Bed - Pecan	8/10/16	525	75	0
261	Twin Captain's Bed - Pecan	8/10/16	525	75	0
262	Twin Captain's Bed - Pecan	8/10/16	525	75	0
263	Twin Captain's Bed - Pecan	8/10/16	525	75	0
264	Twin Captain's Bed - Pecan	8/10/16	525	75	0
265	Twin Captain's Bed - White	8/10/16	525	75	0
266	Twin Captain's Bed - White	8/10/16	525	75	0
267	Twin Captain's Bed - White	8/10/16	525	75	0
268	Twin Captain's Bed - White	8/10/16	525	75	0
269	Twin Captain's Bed - White	8/10/16	525	75	0
270	Twin Captain's Bed - White	8/10/16	525	75	0
271	Twin Captain's Bed - White	8/10/16	525	75	0
272	Twin Captain's Bed - White	8/10/16	525	75	0
273	Twin Captain's Bed - White	8/10/16	525	75	0
274	Twin Captain's Bed - White	8/10/16	525	75	0
275	Twin Captain's Bed - White	8/10/16	525	75	0
284	Office 1 Furniture	2/23/17	5,087	727	0
296	Executive Director - Office Furniture	2/23/17	9,700	1,386	0
297	Computer Room Furniture	4/18/17	6,719	960	0
305	Tutor Room - Tables & Chairs	4/18/17	3,714	531	0
306	Counseling Room 1 Furniture	4/18/17	1,582	226	0
307	Counseling Room 2 Furniture	4/18/17	1,582	226	0
308	Dining Room Furniture	4/18/17	16,828	2,404	0
309	Office Furniture (Ryan)	4/18/17	6,001	857	0
310	Office Furniture (Lutus)	4/18/17	7,529	1,076	0
311	Main Building Office Furniture	4/18/17	6,294	899	0
312	Boardroom Furniture	2/23/17	17,356	2,480	0
313	Reception - Office Furniture	2/23/17	5,018	717	0

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Future Depreciation Report **FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
314	Visitation Area - Office Furniture	2/23/17	4,519	646	0
315	Office 2 Furniture	2/23/17	5,087	727	0
316	Art Studio Furniture	2/23/17	1,159	166	0
317	Dell Computer - RH	3/20/17	914	182	0
318	Dell Computer - LA	3/20/17	914	182	0
319	Dell Laptop - BA	3/21/17	773	154	0
320	Food Processor	1/23/17	1,252	125	0
321	L Shaped Dishtable	1/23/17	5,100	510	0
322	Dishwasher	1/23/17	6,052	605	0
323	Reach-In Refrigerator	1/23/17	4,303	431	0
324	Two Compartment Sink	1/23/17	967	97	0
325	Reach-In Freezer	1/23/17	5,520	552	0
326	Ice Maker	1/23/17	2,059	206	0
327	Ice Bin	1/23/17	754	76	0
328	Heated Cabinet	1/23/17	2,369	237	0
329	Refrigerated Work Top	1/23/17	2,817	282	0
330	72" Range/Griddle	1/23/17	8,335	834	0
331	Exhaust Hood	1/23/17	18,168	1,817	0
332	Kitchen Worktable	1/23/17	583	59	0
333	Mop Sink	1/23/17	657	66	0
334	Kitchen Shelving	1/23/17	2,812	281	0
335	Misc. Kitchen Equipment	1/23/17	6,946	695	0
336	Refrigerator - Front Kitchen	12/01/16	1,370	137	0
337	4 Grayson Chairs	12/09/16	3,737	374	0
338	Media Console (Gray Wash)	1/04/17	1,274	127	0
339	Edgewood Coffee Table	1/04/17	594	59	0
340	Davis 3 Seat Sofa	12/09/16	2,718	271	0
341	Davis Chair	12/09/16	1,358	136	0
342	Bluestone Console Table	1/04/17	934	93	0
343	Bix Striped Wool Rug #1	12/09/16	1,189	119	0
344	4 Callie Chairs	12/09/16	2,717	272	0
345	Abbyson Wood TV Console	1/04/17	805	81	0
346	Gia Chair	12/09/16	2,038	204	0
347	Bix Striped Wool Rug #2	12/09/16	1,189	119	0
348	Gia Sofa	12/09/16	1,699	170	0
349	Gia Sofa	12/09/16	1,699	170	0
350	Computer - Tutor Room	4/24/17	685	137	0
351	60" Samsung LED TV	4/18/17	699	100	0
352	60" Samsung LED TV	4/18/17	699	100	0
353	Wifi System - Admin Building	5/08/17	2,253	322	0
355	Wifi Network	5/08/17	709	177	0
356	Computer System - Computer Room	5/08/17	5,837	834	0
357	Washer - MVWC565-FWO	4/18/17	500	50	0
358	Washer - MVWC565-FWO	4/18/17	500	50	0
359	Dryer - WED85 HEFW0	4/18/17	700	70	0
360	Dryer - WED85 HEFW0	4/18/17	700	70	0
361	Washer - WFW85HEFW	4/18/17	700	70	0
362	Washer - WFW85HEFW	4/18/17	700	70	0
363	36" Rolled Rim Terra Cotta pot	5/02/17	525	52	0
364	36" Rolled Rim Terra Cotta pot	5/02/17	525	52	0
365	Donation Building	12/02/16	41,300	0	0
366	Donation Building - 1600 Norwich	12/02/16	73,700	1,890	0
368	PTZ Dome Camera	12/29/16	999	100	0
369	PTZ Camera Remote Controller	12/29/16	549	55	0
372	Network Video Recorder	12/29/16	1,999	200	0
373	Interview Room Equipment - CAC Jesup	12/29/16	1,351	135	0
375	Phone System - CAC Glynn	6/09/17	3,895	390	0
376	VideOversight Host Software	12/29/16	4,000	706	0
377	VideOversight Software - Interview Room	12/29/16	2,500	441	0
Total Other Depreciation			5,406,207	206,620	0
Total ACRS and Other Depreciation			5,406,207	206,620	0

Amortization:

207	Closing Cost - Donation Building	12/02/16	5,797	1,160	0
374	Refinance Loan Fees	6/30/17	2,014	402	0
166	Start Up	12/01/01	9,655	0	0

58-1907913

Future Depreciation Report **FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
167	Start Up	6/01/02	2,648	0	0
175	Closing Cost	6/18/15	3,801	760	0
			<u>23,915</u>	<u>2,322</u>	<u>0</u>
	Grand Totals		<u>5,430,122</u>	<u>208,942</u>	<u>0</u>

58-1907913

GA Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
<u>Other Depreciation:</u>				
2	Safe Harbor Center/Hamer House	5/01/03	8,240	0
3	Center	12/31/90	85,516	0
4	Storage Shed	5/01/92	1,466	0
5	Shelving for Shed	5/13/99	493	0
6	Hamer House	5/01/03	67,419	2,247
7	Floors	5/01/03	5,840	0
8	Structure Improvement	5/01/03	24,590	1,640
9	Roof	5/01/03	9,900	495
10	Kitchen	5/01/03	3,200	160
11	Fence	5/01/03	1,212	67
12	Water Heater - HH	2/15/09	450	0
13	Computer Desk	6/25/91	200	0
14	4-Drawer File Cabinet	8/22/94	299	0
15	Computer Desk	9/18/95	574	0
19	4 Beds	11/10/97	954	0
20	4-Drawer Bureau	11/19/98	817	0
21	4-Drawer Bureau	11/04/99	357	0
22	Desk & Chair	2/15/01	300	0
23	Chair - HON	6/29/01	127	0
24	4-Drawer File Cabinet	1/03/02	1,050	0
25	12 Chairs	3/27/02	734	0
26	2 Nightstands	3/27/02	362	0
27	4 Ladder End Tables	3/27/02	296	0
28	5 Chairs	4/19/02	265	0
29	4 Drawer File Cabinet	1/01/03	259	0
31	Picnic Table	1/01/03	1,357	0
32	48" Book Shelves	1/01/03	663	0
35	Cherry Plaque	1/02/04	848	0
36	Office Furniture	3/05/04	519	0
40	Wall Decor - HH	2/15/09	825	0
42	Bunk Beds - HH	2/15/09	1,800	0
44	Mattresses - HH	2/15/09	1,600	0
45	Wood Settee - HH	2/15/09	250	0
46	Bunk Beds - HH	2/15/09	900	0
47	Twin Mattressess - HH	2/15/09	800	0
51	Twin Mattresses - HH	2/15/09	800	0
52	Bedside Table - HH	2/15/09	80	0
56	Shelf Unit - HH	2/15/09	150	0
57	Large Wood Table - HH	2/15/09	5,000	0
58	9 Wood Stools - HH	2/15/09	1,350	0
59	Treasure Chest - HH	2/15/09	100	0
60	Accessories - HH	2/15/09	1,515	0
61	Refrigerator	1/31/09	900	0
63	Sprinkler System	5/23/91	6,140	0
64	Fire Alarm System	6/03/91	1,820	0
65	Alert Alarm System	6/03/91	1,902	0
66	Carrier 2*1/2 Ton AC	12/30/91	2,400	0
67	Flood Lights	3/08/92	320	0
68	Irrigation System	10/16/97	6,509	0
78	Freezer	7/06/00	634	0
85	Air Conditioner	8/16/02	3,144	0
87	Alarm System	5/01/03	2,738	0
88	Air Conditioner	5/01/03	4,809	0
90	Sign	9/19/03	915	0
91	Outdoor Lighting	12/26/03	400	0
95	Stove	4/01/05	530	0
96	Refrigerator	6/07/05	603	0
97	File Cabinets	12/15/05	451	0
98	Grandair A/C	2/21/06	2,800	0
101	2 Ton Grandair	10/25/06	2,800	0
103	Kenmore Washer	3/16/09	145	0
104	Kenmore Chest Freezer	8/13/08	370	0
105	Electric Double Oven	1/23/09	1,299	0
106	46" LCD TV	2/23/09	500	0
108	Flat Screen TV	2/15/09	500	0
109	Stove	2/15/09	400	0
110	Microwave	2/15/09	300	0

58-1907913

GA Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	GA
111	Cooktop	1/31/09	370	0
112	Cooktop	1/31/09	600	0
113	Dishwasher	1/31/09	500	0
114	2 Ton A/C	6/19/13	2,700	524
115	Renovations	6/27/91	19,634	0
116	New Door	6/27/91	1,182	0
117	Re-rough all Plumbing	6/27/91	7,999	0
118	Kitchen Cabinet	6/27/91	1,962	0
119	Attic Power Vent	1/05/93	580	0
121	Alarm in New Office	6/14/94	340	0
122	Building Addition	6/26/97	92,000	3,680
124	Building Addition	12/05/97	10,529	421
125	Tile Kitchen Floor	7/14/00	1,252	0
126	Carpet	10/23/00	1,400	0
127	Carpet Office	4/13/01	1,975	0
128	Renovations	9/30/03	3,050	203
129	Roof	2/06/04	2,900	145
130	Fence	4/02/04	400	27
131	Roof	8/15/05	7,698	385
132	Pave Sidewalk	8/26/05	512	34
133	Kitchen Cabinets	4/03/09	4,300	287
134	Wood Flooring - HH	4/03/09	1,099	110
135	Kitchen Countertops - HH	4/24/09	1,150	115
136	Tile Flooring - HH	2/06/09	580	39
137	Shower Units - HH	2/15/09	1,785	0
138	Toilets - HH	2/15/09	810	0
139	Vanities - HH	2/15/09	1,350	0
140	Kitchen Cabinets - HH	2/15/09	2,700	0
141	Lighting - HH	2/15/09	225	0
142	Ceiling Fans - HH	2/15/09	375	0
143	Wood Blinds - HH	2/15/09	980	0
144	Flooring - HH	2/15/09	2,016	0
145	Plumbing - HH	2/15/09	7,000	0
146	Lighting - HH	1/31/09	350	0
147	Hamer House Remodel	1/01/14	126,605	6,330
148	2003 Ford Truck	5/15/03	25,104	0
149	2013 Ford Econoline Van	12/31/13	24,544	4,908
150	2014 Honda Odyssey	12/31/13	30,799	6,160
153	Painting	12/01/01	2,000	0
154	Swingset	12/01/01	500	0
155	Painting	12/01/01	1,000	0
156	Gate	6/02/02	2,000	0
157	Surveillance	8/01/02	4,968	0
160	CCTV Equipment	3/12/12	20,822	2,082
161	Dell Computers	7/02/12	1,236	124
162	Dell Computers	7/24/12	883	88
163	Sofas	3/31/14	2,277	455
164	Leasehold Improvements	7/04/04	30,922	0
165	1001 Gloucester Street	6/17/15	290,000	0
168	Office Computers & Software	7/22/14	2,883	576
169	Video Camera Equipment	4/21/15	8,039	1,149
170	A/C Unit - HH	4/30/15	2,961	423
171	Forensic Equipment Upgrade (Glynn)	5/01/15	5,828	832
172	Forensic Interview Equipment (Camden)	5/01/15	15,987	2,284
173	Dryer - HH	1/12/15	773	111
174	2003 Honda Accord	9/04/14	6,000	1,200
176	2 Flat Screen TVs - Noncash	7/21/14	1,000	200
177	Furniture - Noncash	12/18/14	6,926	989
178	Sofa, Chairs, Chests - Noncash	12/18/14	3,840	549
179	Pottery Barn Furniture - Noncash	12/18/14	2,462	352
180	Electronic Reading Devices - Noncash	1/29/15	2,000	400
181	Carpet - Noncash	12/18/14	4,532	453
182	Panasonic phone system	4/26/16	3,255	465
183	Sofa & tables for boys' house	1/27/16	3,391	485
184	Vinyl flooring - living room	12/31/15	3,907	391
186	HP 23" All in One Computer	7/29/15	516	52
187	Cooktop - girls' house	4/08/16	530	75
188	Computer for Case Manager	6/30/16	900	180
191	Paving & Curbs	6/05/17	49,484	2,474
192	Cabinets	6/05/17	128,027	3,282
193	Roofing	6/05/17	97,033	2,488

58-1907913

GA Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	GA
194	Interior/Exterior Doors	6/05/17	75,411	1,934
195	Windows	6/05/17	100,745	2,583
196	Painting	6/05/17	140,010	3,590
197	Flooring	6/05/17	108,411	2,779
198	Plumbing	6/05/17	110,026	2,821
199	Fire Sprinkler System	6/05/17	105,595	2,707
200	HVAC	6/05/17	207,731	5,326
201	Electrical	6/05/17	296,529	7,603
202	Fire Alarm	6/05/17	21,825	559
203	Handicap Lift	6/05/17	33,513	3,352
204	Property Fence/Wall	6/05/17	156,280	7,814
205	Sidewalks - Norwich & F St.	6/05/17	15,969	798
206	Building	6/05/17	2,064,182	52,927
208	Flooring - 3215 Shrine Rd.	2/23/17	4,950	495
209	2016 Ford Transit 350 Van	6/15/17	25,000	5,000
210	2013 Dodge Grand Caravan	1/20/17	13,266	2,653
211	Security System	4/10/17	78,727	11,246
212	Phone System	6/02/17	14,870	2,974
213	Irrigation System	5/08/17	6,725	961
214	Landscaping	5/08/17	75,129	3,757
215	Blinds - Admin Building	2/23/17	3,182	318
216	Blinds - New Shelter	5/08/17	16,872	1,687
217	Twin Captain's Bed - White	8/10/16	525	75
229	6 Drawer Dresser w/ mirror - white	8/10/16	650	93
230	6 Drawer Dresser w/ mirror - white	8/10/16	650	93
231	6 Drawer Dresser - White	8/10/16	500	72
232	6 Drawer Dresser - White	8/10/16	500	72
233	6 Drawer Dresser - White	8/10/16	500	72
234	6 Drawer Dresser - White	8/10/16	500	72
235	6 Drawer Dresser - White	8/10/16	500	72
236	Twin Captain's Bed - Pecan	8/10/16	525	75
248	6 Drawer Dresser - Pecan	8/10/16	500	72
249	6 Drawer Dresser - Pecan	8/10/16	500	72
250	6 Drawer Dresser - Pecan	8/10/16	500	72
251	6 Drawer Dresser - Pecan	8/10/16	500	72
252	6 Drawer Dresser - Pecan	8/10/16	500	72
253	6 Drawer Dresser - Pecan	8/10/16	500	72
254	Twin Captain's Bed - Pecan	8/10/16	525	75
255	Twin Captain's Bed - Pecan	8/10/16	525	75
256	Twin Captain's Bed - Pecan	8/10/16	525	75
257	Twin Captain's Bed - Pecan	8/10/16	525	75
258	Twin Captain's Bed - Pecan	8/10/16	525	75
259	Twin Captain's Bed - Pecan	8/10/16	525	75
260	Twin Captain's Bed - Pecan	8/10/16	525	75
261	Twin Captain's Bed - Pecan	8/10/16	525	75
262	Twin Captain's Bed - Pecan	8/10/16	525	75
263	Twin Captain's Bed - Pecan	8/10/16	525	75
264	Twin Captain's Bed - Pecan	8/10/16	525	75
265	Twin Captain's Bed - White	8/10/16	525	75
266	Twin Captain's Bed - White	8/10/16	525	75
267	Twin Captain's Bed - White	8/10/16	525	75
268	Twin Captain's Bed - White	8/10/16	525	75
269	Twin Captain's Bed - White	8/10/16	525	75
270	Twin Captain's Bed - White	8/10/16	525	75
271	Twin Captain's Bed - White	8/10/16	525	75
272	Twin Captain's Bed - White	8/10/16	525	75
273	Twin Captain's Bed - White	8/10/16	525	75
274	Twin Captain's Bed - White	8/10/16	525	75
275	Twin Captain's Bed - White	8/10/16	525	75
284	Office 1 Furniture	2/23/17	5,087	727
296	Executive Director - Office Furniture	2/23/17	9,700	1,386
297	Computer Room Furniture	4/18/17	6,719	960
305	Tutor Room - Tables & Chairs	4/18/17	3,714	531
306	Counseling Room 1 Furniture	4/18/17	1,582	226
307	Counseling Room 2 Furniture	4/18/17	1,582	226
308	Dining Room Furniture	4/18/17	16,828	2,404
309	Office Furniture (Ryan)	4/18/17	6,001	857
310	Office Furniture (Lutus)	4/18/17	7,529	1,076
311	Main Building Office Furniture	4/18/17	6,294	899
312	Boardroom Furniture	2/23/17	17,356	2,480
313	Reception - Office Furniture	2/23/17	5,018	717

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GA Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	GA
314	Visitation Area - Office Furniture	2/23/17	4,519	646
315	Office 2 Furniture	2/23/17	5,087	727
316	Art Studio Furniture	2/23/17	1,159	166
317	Dell Computer - RH	3/20/17	914	182
318	Dell Computer - LA	3/20/17	914	182
319	Dell Laptop - BA	3/21/17	773	154
320	Food Processor	1/23/17	1,252	125
321	L Shaped Dishtable	1/23/17	5,100	510
322	Dishwasher	1/23/17	6,052	605
323	Reach-In Refrigerator	1/23/17	4,303	431
324	Two Compartment Sink	1/23/17	967	97
325	Reach-In Freezer	1/23/17	5,520	552
326	Ice Maker	1/23/17	2,059	206
327	Ice Bin	1/23/17	754	76
328	Heated Cabinet	1/23/17	2,369	237
329	Refrigerated Work Top	1/23/17	2,817	282
330	72" Range/Griddle	1/23/17	8,335	834
331	Exhaust Hood	1/23/17	18,168	1,817
332	Kitchen Worktable	1/23/17	583	59
333	Mop Sink	1/23/17	657	66
334	Kitchen Shelving	1/23/17	2,812	281
335	Misc. Kitchen Equipment	1/23/17	6,946	695
336	Refrigerator - Front Kitchen	12/01/16	1,370	137
337	4 Grayson Chairs	12/09/16	3,737	374
338	Media Console (Gray Wash)	1/04/17	1,274	127
339	Edgewood Coffee Table	1/04/17	594	59
340	Davis 3 Seat Sofa	12/09/16	2,718	271
341	Davis Chair	12/09/16	1,358	136
342	Bluestone Console Table	1/04/17	934	93
343	Bix Striped Wool Rug #1	12/09/16	1,189	119
344	4 Callie Chairs	12/09/16	2,717	272
345	Abbyson Wood TV Console	1/04/17	805	81
346	Gia Chair	12/09/16	2,038	204
347	Bix Striped Wool Rug #2	12/09/16	1,189	119
348	Gia Sofa	12/09/16	1,699	170
349	Gia Sofa	12/09/16	1,699	170
350	Computer - Tutor Room	4/24/17	685	137
351	60" Samsung LED TV	4/18/17	699	100
352	60" Samsung LED TV	4/18/17	699	100
353	Wifi System - Admin Building	5/08/17	2,253	322
355	Wifi Network	5/08/17	709	177
356	Computer System - Computer Room	5/08/17	5,837	834
357	Washer - MVWC565-FWO	4/18/17	500	50
358	Washer - MVWC565-FWO	4/18/17	500	50
359	Dryer - WED85 HEFW0	4/18/17	700	70
360	Dryer - WED85 HEFW0	4/18/17	700	70
361	Washer - WFW85HEFW	4/18/17	700	70
362	Washer - WFW85HEFW	4/18/17	700	70
363	36" Rolled Rim Terra Cotta pot	5/02/17	525	52
364	36" Rolled Rim Terra Cotta pot	5/02/17	525	52
365	Donation Building	12/02/16	41,300	0
366	Donation Building - 1600 Norwich	12/02/16	73,700	1,890
368	PTZ Dome Camera	12/29/16	999	100
369	PTZ Camera Remote Controller	12/29/16	549	55
372	Network Video Recorder	12/29/16	1,999	200
373	Interview Room Equipment - CAC Jesup	12/29/16	1,351	135
375	Phone System - CAC Glynn	6/09/17	3,895	390
376	VideOversight Host Software	12/29/16	4,000	800
377	VideOversight Software - Interview Room	12/29/16	2,500	500
Total Other Depreciation			5,406,207	206,773
Total ACRS and Other Depreciation			5,406,207	206,773

Amortization:

207	Closing Cost - Donation Building	12/02/16	5,797	1,160
374	Refinance Loan Fees	6/30/17	2,014	402
166	Start Up	12/01/01	9,655	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
167	Start Up	6/01/02	2,648	0
175	Closing Cost	6/18/15	3,801	760
			<u>23,915</u>	<u>2,322</u>
	Grand Totals		<u>5,430,122</u>	<u>209,095</u>

Form **990****Two Year Comparison Report****2015 & 2016**For calendar year 2016, or tax year beginning **07/01/16**, ending **06/30/17**

Name

Taxpayer Identification Number

SAFE HARBOR CHILDREN'S CENTER, INC.**58-1907913**

		2015	2016	Differences
Revenue	1. Contributions, gifts, grants	1. 3,924,274	1,830,236	-2,094,038
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3. 639,850	784,092	144,242
	4. Program service revenue	4. 819,978	744,569	-75,409
	5. Investment income	5. 997	5,172	4,175
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 15,212	-4,635	-19,847
	8. Net income or (loss) from fundraising events	8. 3,145	-1,631	-4,776
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11.		
	12. Total revenue. Add lines 1 through 11	12. 5,403,456	3,357,803	-2,045,653
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 88,269	90,193	1,924
	16. Salaries, other compensation, and employee benefits	16. 1,114,040	1,301,141	187,101
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 106,153	113,106	6,953
	19. Occupancy, rent, utilities, and maintenance	19. 82,196	112,612	30,416
	20. Depreciation and Depletion	20. 43,728	71,063	27,335
	21. Other expenses	21. 389,958	365,365	-24,593
	22. Total expenses. Add lines 13 through 21	22. 1,824,344	2,053,480	229,136
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 3,579,112	1,304,323	-2,274,789
Other Information	24. Total exempt revenue	24. 5,403,456	3,357,803	-2,045,653
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 839,332	743,475	-95,857
	27. Total assets	27. 4,920,927	6,022,525	1,101,598
	28. Total liabilities	28. 278,436	103,511	-174,925
	29. Retained earnings	29. 4,642,491	5,919,014	1,276,523
	30. Number of voting members of governing body	30. 14	14	
	31. Number of independent voting members of governing body	31. 14	14	
	32. Number of employees	32. 48	51	
	33. Number of volunteers	33. 156	251	

Form **990****Tax Return History****2016**

Name

SAFE HARBOR CHILDREN'S CENTER, INC.

Employer Identification Number

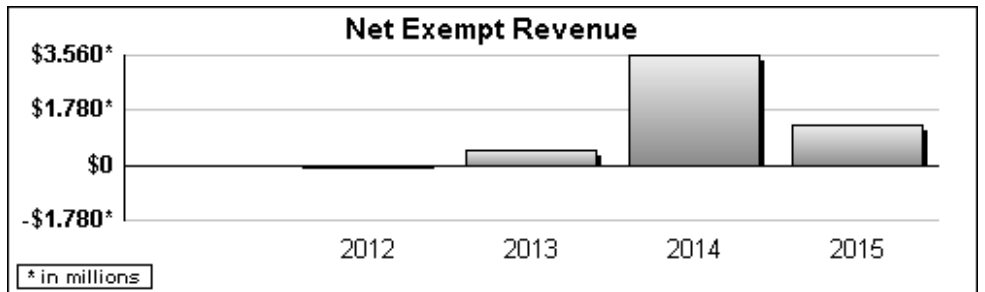
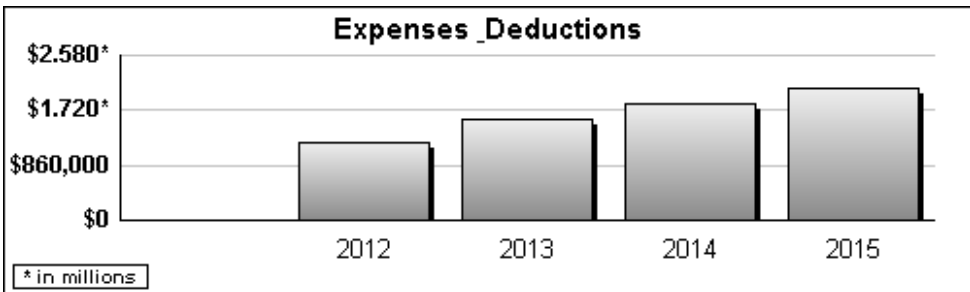
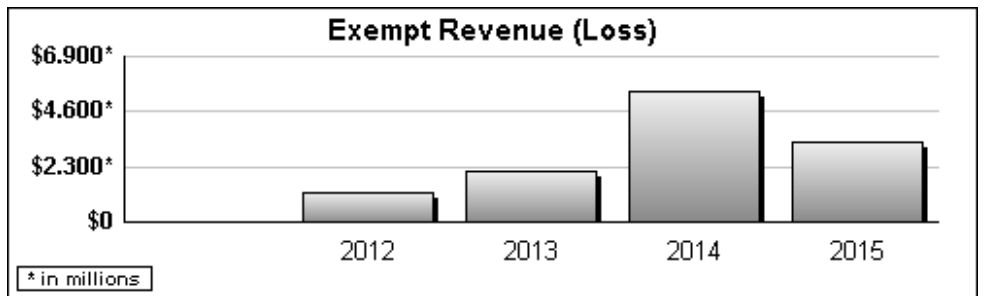
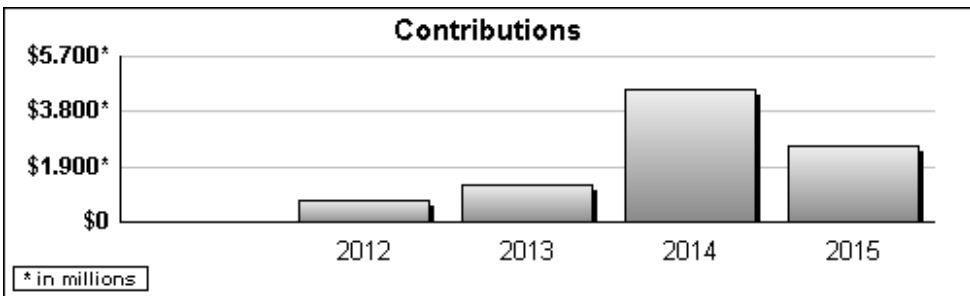
58-1907913

	2012	2013	2014	2015	2016	2017
Contributions, gifts, grants		749,692	1,284,182	4,564,124	2,614,328	
Membership dues						
Program service revenue		431,669	790,557	819,978	744,569	
Capital gain or loss			-208	15,212	-4,635	
Investment income		2,896	2,222	997	5,172	
Fundraising revenue (income/loss)				3,145	-1,631	
Gaming revenue (income/loss)						
Other revenue						
Total revenue		1,184,257	2,076,753	5,403,456	3,357,803	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		65,000	90,196	88,269	90,193	
Other compensation		845,739	982,766	1,114,040	1,301,141	
Professional fees		8,460	84,982	106,153	113,106	
Occupancy costs			101,524	82,196	112,612	
Depreciation and depletion		33,456	39,995	43,728	71,063	
Other expenses		269,322	273,333	389,958	365,365	
Total expenses		1,221,977	1,572,796	1,824,344	2,053,480	
Excess or (Deficit)		-37,720	503,957	3,579,112	1,304,323	
Total exempt revenue		1,184,257	2,076,753	5,403,456	3,357,803	
Total unrelated revenue		2,896				
Total excludable revenue		431,669	792,571	839,332	743,475	
Total Assets		667,017	1,189,938	4,920,927	6,022,525	
Total Liabilities		117,021	126,559	278,436	103,511	
Net Fund Balances		549,996	1,063,379	4,642,491	5,919,014	

Form 990T	Tax Return History	2016
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Name SAFE HARBOR CHILDREN'S CENTER, INC.	Employer Identification Number 58-1907913
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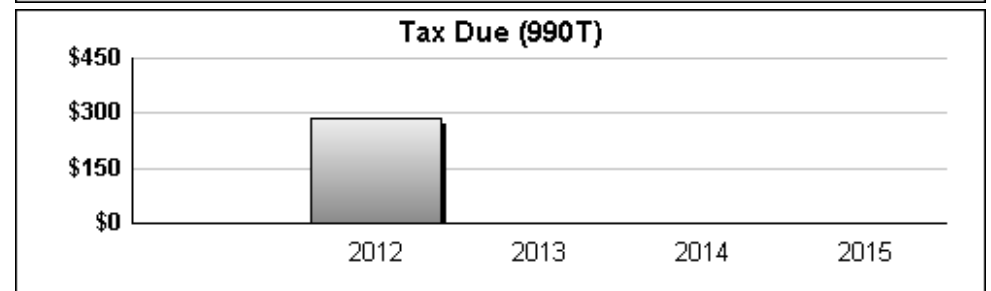
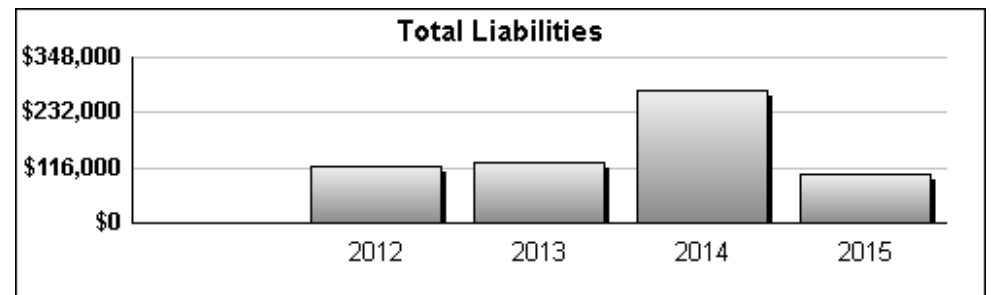
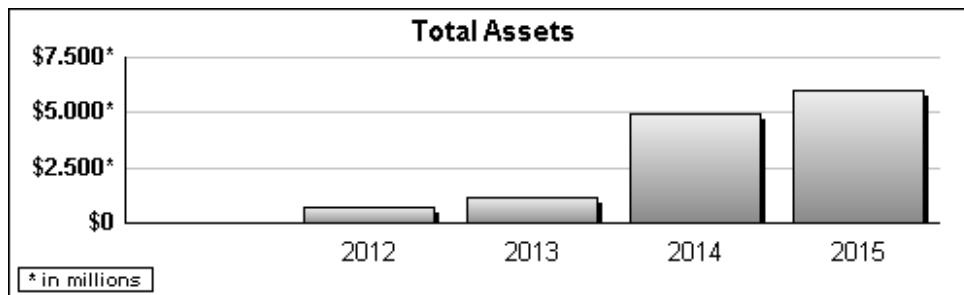
	2012	2013	2014	2015	2016	2017
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						



Form 990T	Tax Return History	2016
Name SAFE HARBOR CHILDREN'S CENTER, INC.		Employer Identification Number 58-1907913

	2012	2013	2014	2015	2016	2017
Other deductions						
Net operating loss deduction						
Specific deduction		1,000				
Income after expense and deductions		-1,000				
Income tax (corporate or trust)		284				
Other taxes						
Total taxes		284				
General business credit						
Other credits						
Net tax after credits		284				
Estimated tax payments						
Other payments						
Balance due/Overpayment		284				

* Income shown net of expenses



58-1907913

Federal Statements

FYE: 6/30/2017

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
	\$ 1,410		14			
TOTAL	\$ 1,410					

Taxable Dividends from Securities

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
	\$ 3,762		14			
TOTAL	\$ 3,762					

58-1907913

Federal Statements

FYE: 6/30/2017

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
CONTRACT LABOR	\$ 75,254	\$ 75,254	\$	\$
CONSULTING SERVICES	1,500	1,500		
GRANT SERVICES	17,780	17,780		
TOTAL	<u>\$ 94,534</u>	<u>\$ 94,534</u>	<u>\$ 0</u>	<u>\$ 0</u>

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
TAXES AND LICENSES	\$ 7,779	\$ 7,779	\$	\$
MEALS AND ENTERTAINMENT	5,070	3,177	1,720	173
TOTAL	<u>\$ 12,849</u>	<u>\$ 10,956</u>	<u>\$ 1,720</u>	<u>\$ 173</u>

58-1907913

Federal Statements

FYE: 6/30/2017

Schedule A, Part II, Line 1(e)

Description	Amount
GOVERNMENT GRANTS	\$ 784,092
NONCASH DONATIONS - OTHER CONTRIBUTIONS	49,819
NONCASH DONATIONS - SECURITIES	690,394
WINDOLF FAMILY FOUNDATION	25,291
CASH CONTRIBUTION	509,100
FURNITURE/SUPPLIES	57,813
ST. MARY'S UMC FOUNDATION	
CASH CONTRIBUTION	65,000
JEFF MISNER	
CASH CONTRIBUTION	34,068
GIFT CARDS/SUPPLIES	1,200
STOCK	397,551
TOTAL	<u>\$ 2,614,328</u>

Schedule A, Part II, Line 8(e)

Description	Amount
	\$ 1,410
	<u>3,762</u>
TOTAL	<u>\$ 5,172</u>

Schedule A, Part II, Line 10(e)

Description	Amount
HAUNTED HOUSE	\$ 8,851
TOTAL	<u>\$ 8,851</u>

58-1907913

Federal Statements

FYE: 6/30/2017

Schedule A, Part II, Line 12 - Current year

Description	Amount
PROGRAM INCOME	\$ 744,569
TOTAL	\$ 744,569

Georgia Return Summary

For calendar year 2016, or tax year beginning **07/01/16** , and ending **06/30/17**

SAFE HARBOR CHILDREN'S CENTER, INC.

Annual Reporting Information

Charitable Registration Information

Federal employer identification number 58-1907913
 Annual Reporting, Federal 990 X
 Annual Reporting, Federal 990PF
 Georgia 600-T, Unrelated Business Income
 Return due date/ Extended due date 11/15/17
 Amended (GA 600-T)

Georgia registration number
 Initial Application
 Renewal
 Reinstatement
 Return due date/ Extended due date
 Amended (C100)
C100 Registration Fee

Income

Georgia taxable income (unrelated business income)

Tax

Tax on taxable income

Credits and Payments

Payments and Credits
 Withholding Credits
Total payments

Net tax due /-overpayment

Penalties and Interest

Underpayment tax penalty
 Interest and Other Penalties

Net amount due/-refund

Overpayment to be credited to next year's estimated tax

Balance due/-refund

Next Year's Estimates

1st quarter
 2nd quarter
 3rd quarter
 4th quarter
Total