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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b	Other grants and allocations (attach schedule) STMT-7 (cash \$ <u>4,016</u> noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	4,016	4,016	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	415,286	397,502	17,784
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	4,683	4,683	
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26	Salaries and wages of employees not included on lines 25a, b, and c	26	8,357,699	7,474,857	771,963
27	Pension plan contributions not included on lines 25a, b, and c	27	98,072	89,480	7,249
28	Employee benefits not included on lines 25a - 27	28	667,970	616,094	42,471
29	Payroll taxes	29	974,207	854,849	110,056
30	Professional fundraising fees	30			
31	Accounting fees	31	15,750		15,750
32	Legal fees	32	26,671		26,671
33	Supplies	33	812,594	720,968	76,124
34	Telephone	34	75,975	62,037	12,476
35	Postage and shipping	35	20,124	7,204	12,076
36	Occupancy	36	774,895	709,534	63,387
37	Equipment rental and maintenance	37			
38	Printing and publications	38	47,994	12,693	33,875
39	Travel	39	116,378	99,598	16,540
40	Conferences, conventions, and meetings	40	44,156	13,547	27,818
41	Interest	41	201,057		201,057
42	Depreciation, depletion, etc. (attach schedule)	42	907,112	825,057	80,727
43	Other expenses not covered above (itemize):				
a	Contractual Fees	43a	1,105,360	954,669	119,122
b	Special Assistance	43b	1,507,834	1,507,834	
c	Miscellaneous	43c	113,170	32,744	57,477
d	Membership Dues	43d	20,695	18,177	2,518
e	Allocation of support	43e	0	(61,468)	59,872
f	Subscriptions	43f	924	91	833
g		43g			
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	16,311,995	13,941,981	2,140,246

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,
 (iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A

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

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

What is the organization's primary exempt purpose? ▶ STMT 2 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
a Specialized Residential Treatment Programs: To provide short-term intensive residential treatment program for teenaged girls with participation of other family members. A total of 61,936 days of care was provided. (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	11,648,213
b Community Based Services: To provide foster car and other supportive services for children and their families. A total of 23,665 days of foster care was provided. (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	2,293,768
c (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ▶	13,941,981

Part IV Balance Sheets (See the instructions.)

		(A)		(B)
		Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				
Assets	45 Cash—non-interest-bearing	4,963	45	4,963
	46 Savings and temporary cash investments	925,798	46	1,104,592
	47a Accounts receivable	47a 2,488,014		
	b Less: allowance for doubtful accounts	47b	2,063,842	47c 2,488,014
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	216,180	48c 61,005
	49 Grants receivable		20,099	49 21,023
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		375,798	53 421,492
	54a Investments—publicly-traded securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments—other securities (attach schedule)	▶ <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	10,000	54b 10,000
55a Investments—land, buildings, and equipment: basis	STMT-3 55a			
b Less: accumulated depreciation (attach schedule)	55b		55c	
56 Investments—other (attach schedule)			56	
57a Land, buildings, and equipment: basis	57a 20,174,918			
b Less: accumulated depreciation (attach schedule)	STMT-4 57b 11,186,828	9,251,740	57c 8,988,090	
58 Other assets, including program-related investments (describe ▶ STMT-5)		118,331	58 1,764,561	
59 Total assets (must equal line 74). Add lines 45 through 58		12,986,751	59 14,863,740	
Liabilities	60 Accounts payable and accrued expenses	985,097	60	963,566
	61 Grants payable		61	
	62 Deferred revenue	51,239	62	158,603
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		3,550,000	64a 3,315,000
	b Mortgages and other notes payable (attach schedule)			64b
	65 Other liabilities (describe ▶)			65
66 Total liabilities. Add lines 60 through 65		4,586,336	66 4,437,169	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	8,184,235	67	10,365,566
	68 Temporarily restricted	216,180	68	61,005
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)			73	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		12,986,751	74 14,863,740	

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b 128,821		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
	N/A		
c	Dues, assessments, and similar amounts from members		
	85c N/A		
d	Section 162(e) lobbying and political expenditures		
	85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
	86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b N/A		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
	87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b N/A		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
88b			
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4912 ▶ 0, section 4955 ▶ 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
	89b		
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
	89e		
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
	89f		
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
	89g		
90a	List the states with which a copy of this return is filed ▶ MI		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b 291	
91a	The books are in care of ▶ Earl Goddin Telephone no. ▶ (313) 271-3050 Located at ▶ 20651 West Warren Avenue, Deaborn Heights, MI ZIP + 4 ▶ 48127		
b	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)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	91b	Yes	No
			✓

Part VI Other Information (continued)

Yes	No
	<input checked="" type="checkbox"/>

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** | N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	48,434	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	10,475	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			12	(46,888)	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue. a <u>Miscellaneous</u>			01	2,134	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				14,155	
105 Total (add line 104, columns (B), (D), and (E))					14,155

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

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

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

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

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

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

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). **N/A**

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

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.

Please Sign Here

Signature of officer: *Cameron D. Hosner* Date: 1/3/24/10

Type or print name and title: CAMERON D. HOSNER, PRESIDENT & CEO

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ Preparer's SSN or PTIN (See Gen. Inst. X): _____

EIN: _____ Phone no: _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

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

Name of the organization Vista Maria	Employer identification number 38 : 1359262
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Pamela Kosteva 20651 West Warren Avenue, Deaborn Heights,	Human Resource 40.00	78,545		1,586
Robert Congdon 20651 West Warren Avenue, Deaborn Heights,	Director IT 40.00	70,209		
Thomas Yancheson 20651 West Warren Avenue, Deaborn Heights,	Controller 40.00	69,228		
Susan Gossman 20651 West Warren Avenue, Deaborn Heights,	Director Programs 40.00	59,557		
Latonya Howard 20651 West Warren Avenue, Deaborn Heights,	Program Manager 40.00	58,901		1,586
Total number of other employees paid over \$50,000 . ▶	6			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Romulo S. Ancog 7383 Lahser, Bloomfield Hills, MI 48301	Psychiatrist	202,500
Maple Psychiatric Associates 5640 West Maple Rd, West Bloomfield, MI 48322	Psychiatrist	133,245
Wolverine Security Solution 10559 Citation Dr, Suite 204, Brighton, MI 48116	Security	64,557
Sarcar M.D., John 4850 Palms, Casco, MI 48064	Psychologist	62,040
Maxim Healthcare/Staff Solutions 12558 Collections Center Dr, Chicago, IL 60693	Staffing	57,728
Total number of others receiving over \$50,000 for professional services ▶	5	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Chartwells P.O Box 91337, Chicago, IL 60693-1337	Food Service	683,880
Durant Mechanical 16814 Hamilton, Detroit, MI 48203	Electrical	182,909
Marble-PrevJAMarble-Mechanical Svc, LLC P.O. Box 2109, Birmingham, MI 48012	Electrical	106,458
Aurora Essential Cleaning, Inc P.O. Box 74104, Romulus, MI 48174	Janitorial Services	91,181
Electronic Security Systems Inc. 26225 Sherwood Ave, Warren, MI 48091	Security	82,854
Total number of other contractors receiving over \$50,000 for other services ▶	5	

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part VI-A & VI-B, Form 990	✓	
e Transfer of any part of its income or assets?		✓
3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		✓
b Did the organization have a section 403(b) annuity plan for its employees?	✓	
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		✓
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		✓
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g		✓
b Did the organization make any taxable distributions under section 4966?		
c Did the organization make a distribution to a donor, donor advisor, or related person?		
d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____		
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ _____		
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ _____		

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(v). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization:
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions)

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

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

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	15,159,640	12,742,240	11,951,501	12,874,827	52,728,208
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	206,088	234,155	168,688	160,665	769,596
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	40,154	36,106	64,743	58,659	199,662
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets	30,310	46,790	69,360	6,507	152,967
23 Total of lines 15 through 22	15,436,192	13,059,291	12,254,292	13,100,658	53,850,433
24 Line 23 minus line 17	15,230,104	12,825,136	12,085,604	12,939,993	53,080,837
25 Enter 1% of line 23	154,362	130,593	122,543	131,007	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	1,061,617
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	26b	
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	53,080,837
d Add: Amounts from column (e) for lines: 18 <u>199,662</u> 19 _____	26d	352,629
22 <u>152,967</u> 26b _____		
e Public support (line 26c minus line 26d total)	26e	52,728,208
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	99.3357 %

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

(2005) (2004) (2003) (2002)

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

(2005) (2004) (2003) (2002)

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

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement) ----- -----		
33	Does the organization discriminate by race in any way with respect to.		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

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

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

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

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

Vista Maria

STMT 1

EIN # 38-1359262

December 31, 2006

2006 Form 990, Part I, Line 9 Attachment

	<u>Gross</u> <u>Revenue</u>	<u>Contributions</u> <u>Included</u>	<u>Gross</u> <u>Receipts</u>	<u>Direct</u> <u>Expenses</u>	<u>Net Income</u> <u>or (loss)</u>
Special Events					
Golf outings	100,085	89,605	10,480	(48,101)	(37,621)
Celebrating Women	145,754	118,061	27,693	(36,960)	(9,267)
Total	<u>245,839</u>	<u>207,666</u>	<u>38,173</u>	<u>(85,061)</u>	<u>(46,888)</u>

Vista Maria

STMT 2

EIN # 38-1359262

2006 Form 990, Part III Attachment

Organization's primary exempt purpose:

Organization's Mission

To heal and restore Michigan's abused, neglected and poverty stricken women and children, so they successfully transition into a productive and healthy adulthood, by providing a comprehensive continuum of healing relationships and care that:

- Creates a safe, stable environment with adequate food, clothing, shelter and transportation
- Fosters physical, cognitive and emotional health
- Builds spiritual and moral development consistent with the individual's spiritual beliefs
- Increases personal competency and responsibility
- Improves social, peer and family relationships
- Facilitates educational and vocational achievement needed for a "living wage" job
- Creates contributing members within their home community.

Vista Maria
 EIN # 38-1359262

2006 Form 990, Part IV, Line 54b Attachment
 Investments - Other Securities

STMT 3

<u>Description</u>	<u>2006</u>	<u>2005</u>	<u>Method of Valuation</u>
Others securities - Endowment	10,000	10,000	Cost
Total to Form 990, Part IV, Line 54b	10,000	10,000	

2006 Form 990, Part IV, Line 57 Attachment
 Depreciation of Assets not held for Investment

STMT 4

<u>Description</u>	<u>Cost or Other Basis</u>	<u>Accumulated Depreciation</u>	<u>Book Value</u>
Land improvements	1,838,625	438,416	1,400,209
Buildings	9,850,801	3,646,714	6,204,087
Building Improvements	5,743,089	4,783,372	959,717
Machinery and equipment	1,652,533	1,552,445	100,088
Vehicles	311,684	283,917	27,767
Furniture and fixtures	641,573	481,964	159,609
Construction in progress	136,613		136,613
Total to Form 990, Part IV, Line 57	20,174,918	11,186,828	8,988,090

2006 Form 990, Part IV, Line 58 Attachment
 Other Assets

STMT 5

<u>Description</u>	<u>2006</u>	<u>2005</u>	<u>Method of Valuation</u>
Money market index funds - Board Designed Endowment	1,629,717	-	FMV
Restricted Cash	134,844	118,331	FMV
Total to Form 990, Part IV, Line 58	1,764,561	118,331	

Board of Directors

Elizabeth Acton
Comerica Incorporated
Board Chair

Angela Aufdemberge
Entertainment Publications
Vice Chair

Patricia Nemeth
Nemeth Burwell, P.C.
Vice Chair

James Gouin
FTI Consulting
Treasurer

Sandra Bulger
Secretary

Jan A. Bertsch
DaimlerChrysler

Bibiana Boerio
Jaguar Cars, Ltd

Ronald Charlebois
Stark Reagan

Hon. Maura Corrigan
Michigan Supreme Court

Hon. Daniel S. Paletko
Mayor, Dearborn Heights

Marvel Davis
Foster Parent
Vista Graduate, 1967

Patricia Pitts
Consultant

Sr. Dorothy Doyle
Sisters of the Good Shepherd

David Stephens
Consultant

Harold Dubrowsky
Grant Thornton

Hon. Robert Young, Jr.
Michigan Supreme Court
Past Chair

George Fadool
Skanska USA Building, Inc.

Patrick Zurlinden
Smith Barney

John Jagels
TCF Bank

Denise Kurowski
Strategic Staffing Solutions

Vista Maria
EIN # 38-1359262
2006 Form 990, Part II, Line 22b Attachment
Grants and other Assistance Schedule

STMT 7

<u>Name</u>	<u>Address</u>	<u>Type of Grant</u>	<u>Amount</u>	<u>Method of Payment</u>
Jessica Linguidi	20651 West Warren Road Dearborn Heights, MI 48127	Scholarship	2,060	Cash
Jessica Lindsay	20651 West Warren Road Dearborn Heights, MI 48127	Scholarship	1,500	Cash
Y. Samuel	20651 West Warren Road Dearborn Heights, MI 48127	Scholarship	456	Cash
To Form 990, Part II, Line 22b			<u><u>4,016</u></u>	