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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2006

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning 10-01-2007 and ending 09-30-2008

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

C Name of organization: WEST VJE INC. Number and street: 210 DAVIS DRIVE. City or town, state or country, and ZIP + 4: WEST PLAINS, MO 65775

D Employer identification number: 43-0827220. E Telephone number: (417) 256-2152. F Accounting method: Cash

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

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling? I Group Exemption Number. M Check if the organization is not required to attach Sch B

G Web site: N/A

J Organization type (check only one): 501(c)(3)

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 8,645,881


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

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Dividends, Rental income, Sales of assets, Special events, and Net assets at beginning and end of year.

Part III 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) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b			
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	122,156	122,156	
b Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	25b			
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	3,406,148	3,406,148	
27 Pension plan contributions not included on lines 25a, b and c	27			
28 Employee benefits not included on lines 25a - 27	28	678,167	678,167	
29 Payroll taxes	29	340,305	340,305	
30 Professional fundraising fees	30			
31 Accounting fees	31	58,209	58,209	
32 Legal fees	32			
33 Supplies	33	645,876	645,876	
34 Telephone	34	6,941	6,941	
35 Postage and shipping	35			
36 Occupancy	36	140,411	140,411	
37 Equipment rental and maintenance	37			
38 Printing and publications	38	9,651	9,651	
39 Travel	39	50,428	50,428	
40 Conferences, conventions, and meetings	40			
41 Interest	41	526,389	526,389	
42 Depreciation, depletion, etc. (attach schedule) 	42	559,995	559,995	
43 Other expenses not covered above (itemize)				
a See Additional Data Table	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g	43g			
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	8,706,206	8,706,206	0

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See 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.

<p>What is the organization's primary exempt purpose? CARE FOR THE ELDERLY</p> <p>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.)</p>	<p>Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)</p>
<p>a See Additional Data Table</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>b</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>c</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>d</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) <input type="checkbox"/></p>	<p>8,706,206</p>

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		991,973	45	1,339,645	
	46 Savings and temporary cash investments		4,091,383	46	2,881,677	
	47a Accounts receivable	47a	999,624			
	b Less allowance for doubtful accounts	47b	48,518	724,130	47c	951,106
	48a Pledges receivable	48a				
	b Less allowance for doubtful accounts	48b			48c	
	49 Grants receivable				49	
	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(c)(3)(B) (attach schedule)				50b	
	51a Other notes and loans receivable (attach schedule)	51a	3,567			
	b Less allowance for doubtful accounts	51b		2,373	51c	3,567
	52 Inventories for sale or use			56,976	52	59,986
	53 Prepaid expenses and deferred charges			73,668	53	65,098
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV				54a	
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV				54b	
55a Investments—land, buildings, and equipment basis	55a					
b Less accumulated depreciation (attach schedule)	55b			55c		
56 Investments—other (attach schedule)				56		
57a Land, buildings, and equipment basis	57a	17,831,126				
b Less accumulated depreciation (attach schedule)	57b	6,397,289	11,295,942	57c	11,433,834	
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)			1,156,265	58	1,345,477	
59 Total assets (must equal line 74) Add lines 45 through 58			18,392,710	59	18,080,390	
Liabilities	60 Accounts payable and accrued expenses		380,522	60	407,239	
	61 Grants payable			61		
	62 Deferred revenue			62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63		
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)			9,149,309	64b	8,827,475
	65 Other liabilities (describe <input type="checkbox"/> _____)			41,642	65	84,764
66 Total liabilities Add lines 60 through 65			9,571,473	66	9,319,478	
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		8,070,996	67	8,008,321	
	68 Temporarily restricted		734,650	68	734,650	
	69 Permanently restricted		15,591	69	17,941	
	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)			8,821,237	73	8,760,912
	74 Total liabilities and net assets / fund balances Add lines 66 and 73			18,392,710	74	18,080,390

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

a	Total revenue, gains, and other support per audited financial statements	a	8,645,881
b	Amounts included on line a but not on Part I, line 12		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	8,645,881
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12) Add lines c and d	e	8,645,881

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

a	Total expenses and losses per audited financial statements	a	8,706,206
b	Amounts included on line a but not on Part I, line 17		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	8,706,206
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17) Add lines c and d	e	8,706,206

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
N C BRILL 1327 WBROADWAY ST WEST PLAINS, MO 65775	CHAIRMAN 0 00	0	0	0
ROY LESTER 6804 ST ROUTE BB WEST PLAINS, MO 65775	SECRETARY 0 00	0	0	0
DAVID COX 1005 SASSAFRAS ST WILLOW SPRINGS, MO 65793	DIRECTOR 0 00	0	0	0
J B CANTRELL NO STREET ADDRESS MOUNTAIN VIEW, MO 65548	DIRECTOR 0 00	0	0	0
BILL BOLERJACK NO STREET ADDRESS MOUNTAIN VIEW, MO 65548	DIRECTOR 0 00	0	0	0
LINDA HAGLER 2713 JENNIFER DRIVE WEST PLAINS, MO 65775	PRES & CEO 0 00	0	0	0
CLARENCE BARBER 9156 COUNTY ROAD 9090 WEST PLAINS, MO 65775	DIRECTOR 0 00	0	0	0
VICKI HOGAN 3804 CO ROAD 1530 WILLOW SPRINGS, MO 65793	DIRECTOR 0 00	0	0	0
WARREN FLETCHER 513 WEST STONEHAVEN DRIVE WEST PLAINS, MO 65775	TREASURER 0 00	0	0	0
KLENNOTH GAMMILL 612 SUNSET TERRACE WEST PLAINS, MO 65775	DIRECTOR 0 00	0	0	0

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?
82b If "Yes," you may indicate the value of these items here
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources
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?
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)?
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, and section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g 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?

90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2006 (See instructions) 182

91a The books are in care of PRESIDENT C E O Telephone no (417) 256-2152
210 DAVIS DRIVE
Located at WEST PLAINS, MO ZIP + 4 65775

91b 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
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

Part VI Other Information (continued)

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

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**

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 PROF SKILLED NURSING C					6,374,452
b ELDERLY APTS RENTAL					210,830
c RES CARE FACILITY					1,095,284
d RESIDENTIAL RENTALS					771,504
e LAND BLDGEQUIP LEASE					193,811
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))					8,645,881
105 Total (add line 104, columns (B), (D), and (E))					8,645,881

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)
93	ALL PROGRAM SERVICE REVENUE USED IN THE CURRENT YEAR OR AVAILABLE FOR FUTURE YEARS FOR OPERATING THE FACILITIES FOR WHICH THE ORGANIZATION IS EXEMPT
95	INTEREST INCOME IS PARTIALLY RESTRICTED FOR ASSETS WHOSE USE IS LIMITED AND TH BALANCE AVAILABLE FOR OPERATING THE FACILITIES

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
	%			
	%			
	%			
	%			

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)*

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 and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
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 and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	Yes	No

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	***** Signature of officer	2009-01-14 Date
	LINDA HAGLER C E O Type or print name and title	

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4	CHARLES E WAHLQUIST WAHLQUIST HAWKINS & YARBER CPA'S 1208 B PORTER WAGONER BLVD WEST PLAINS, MO 65775		EIN Phone no (417) 257-7730

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

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include 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 1 of Part VI-B)</p> <p>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</p>	1		No
<p>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.)</p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d		No
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>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)</p>	3a		No
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b	Yes	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a		No
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>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 ▶ 0 _____</p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0 _____</p>			

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)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and 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	(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					<input type="checkbox"/>

- 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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)					0
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose		7,431,473		7,143,980	14,575,453
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				216,932	216,932
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22		7,431,473		7,360,912	14,792,385
24 Line 23 minus line 17				216,932	216,932
25 Enter 1% of line 23		74,315		73,609	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 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
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2006) _____ (2005) _____ (2004) _____ (2003) _____					
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 (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 14,575,453 20 _____ 21 _____					27c
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 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
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?	30	
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)	31	

32 Does the organization maintain the following	32a	
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 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 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

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

(a)
Affiliated group
totals

(b)
To be completed
for all electing
organizations

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

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

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount

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

Additional Data

Software ID:
Software Version:
EIN: 43-0827220
Name: WEST VUE INC

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a INSURANCE	43a	154,778	154,778		
b FOOD	43b	377,678	377,678		
c ADVERTISING & PUBLIC RELATIONS	43c	25,324	25,324		
d BEAUTY & BARBER SHOP	43d	7,950	7,950		
e REPAIRS & MAINTENANCE	43e	257,110	257,110		
f CONSULTANTS	43f	383,031	383,031		
g BAD DEBTS	43g	48,924	48,924		
h NFRA TAX AND HOLD HARMLESS FEE	43h	401,703	401,703		
i SOFTWARE MAINTENANCE	43i	10,348	10,348		
j VARIOUS OTHER EXPENSES	43j	418,160	418,160		
k LICENSES	43k	1,340	1,340		
l MEDICAL DIRECTOR	43l	14,400	14,400		
m MANAGEMENT FEES	43m	60,784	60,784		

Form **4562-FY**

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

OMB No 1545-

2007

Department of the Treasury
Internal Revenue Service

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

Attachment
Sequence No **67**

Name(s) shown on return WEST VUE INC	Business or activity to which this form relates Form 990 Page 2	Identifying number 43-0827220
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Part I Election To Expense Certain Property Under Section 179

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

1 Maximum amount See the instructions for a higher limit for certain businesses	1	125,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	500,000
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	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562FY	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2008 Add lines 9 and 10, less line 12 .▶	13	

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

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

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	559,995

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

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here▶		

Section B—Assets Placed in Service During 2007 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	
i Nonresidential real property			27 5 yrs	MM	S/L	
			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2007 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 instr	22	559,995
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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

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

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

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost. Includes rows 25-29 for special depreciation and business use percentages.

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.

Table with 6 main columns: (a) Vehicle 1, (b) Vehicle 2, (c) Vehicle 3, (d) Vehicle 4, (e) Vehicle 5, (f) Vehicle 6. Rows 30-36 cover total miles driven and personal use availability.

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

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

Table with 2 columns: Yes, No. Rows 37-41 cover policy statements and requirements for vehicle use by employees.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44 for amortization calculations.

TY 2007 Land etc. Schedule**Name:** WEST VUE INC**EIN:** 43-0827220

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
13-GLIDE ROCKERS	3,497	2,563	934
2-GOOSENECK ROCKERS	995	726	269
4-SETS OFFICE FURNITURE	4,358	4,358	0
CUBICAL CURTAINS	890	890	0
WINDOW TREATMENT	16,598	12,177	4,421
98 FREESTYLE BEDS & ACCESSORIES	67,295	49,346	17,949
120 THREE DRAWER CHESTS	18,369	13,475	4,894
100 OVER BED TABLES	7,655	5,610	2,045
22 SETS OF BED BOARDS	2,327	1,705	622
10 END TABLES	1,059	1,059	0
10 LAMPS	770	770	0
3-CAFE TABLES	1,008	1,008	0
LOWBOY SERVER	387	387	0
80 DINING ROOM CHAIRS	13,589	13,589	0
25 DINING ROOM TABLES	4,542	4,542	0
PICTURE	138	77	61
50 WING BACK CHAIRS	11,647	8,536	3,111
6 RAM HORN CHAIRS	1,466	1,078	388
2 LOVE SEATS	1,072	781	291
2 LOUNGE CHAIRS	528	385	143
67 MAXI FLOAT MATTRESSES	10,888	10,888	0
70 QUEEN ANNE CHAIRS	13,318	9,768	3,550
QUEEN ANNE DESK	250	187	63
LIBRARY STAND	128	128	0
120 CLOSET INSERTS	12,600	12,600	0
6 GUEST CHAIRS	683	683	0
SILK PLANTS	900	900	0
WATER SOFTENER	6,286	4,609	1,677
3 WASHERS & 3 DRYERS	30,107	30,107	0
100 TV WALL MOUNTS	3,844	3,844	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
3 ARJO TUBS	47,523	47,523	0
WALK-IN COOLER	7,308	5,357	1,951
REFRIGERATION SYSTEM	1,256	924	332
REFRIGERATION SYSTEM	1,973	1,452	521
USED SLICER	1,400	1,400	0
MIXER	1,600	1,600	0
ICE MAKER	2,177	2,177	0
ICE BIN	635	635	0
USED BEVERAGE COUNTER	1,000	1,000	0
REACH-IN REFRIGERATOR	2,912	2,912	0
USED SINK	1,050	1,050	0
HAND SINK	366	366	0
CAN RACK	327	327	0
CAN OPENER	215	215	0
INGREDIENT BIN	468	468	0
PAN RACK	366	366	0
MICROWAVE	792	792	0
BLENDER	720	720	0
PLATE DISPENSER	1,260	1,260	0
USED TILT SKILLET	2,400	2,400	0
USED TILT KETTLE	1,850	1,850	0
USED STEAMER	1,450	1,450	0
USED CONV OVEN	4,000	4,000	0
DISHTABLE	888	888	0
DISPOSER	1,450	1,450	0
DISHTABLE	788	788	0
BOOSTER HEATER	825	825	0
DISH DOLLY	373	373	0
MOBILE RACK	972	972	0
EXHAUST HOOD	15,322	11,231	4,091

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
ICE MAKER	2,135	2,135	0
USED ICE MAKER	1,650	1,650	0
USED DELI CASE	2,500	1,837	663
INSTALLATION COSTS OF KITCHEN EQUIP	9,100	9,100	0
SHELVING	6,572	4,818	1,754
WORK TABLES	7,384	5,412	1,972
POT FILLER FAUCET	191	143	48
USED TAYLOR	1,695	1,243	452
USED MIXER	100	100	0
CEILING PANELS	420	308	112
WALLPAPER	39,539	10,868	28,671
BUILDING	3,258,740	896,159	2,362,581
60 STACK CHAIRS	1,250	1,250	0
LAWNBOY MOWER	205	205	0
HOT FOOD TABLE	482	481	1
FILE CABINET	181	181	0
RESTORATOR	257	257	0
WALNUT PLAQUE & NAME PLATES	1,423	1,423	0
POPCORN POPPER CART	1,299	1,299	0
VCR	225	225	0
BOOKCASE DESK & CHAIR	570	570	0
BEAUTICIAN CHAIR	358	358	0
DESK	169	169	0
OFFICE CHAIR	120	120	0
CALCULATOR	65	65	0
HEARING IMPAIRED PHONE	285	285	0
1 MEG RAM MEMORY	670	670	0
FAX	134	134	0
SCHEDULER	2,763	2,760	3
COMPUTER HARD DRIVE	525	525	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
FILE SERVERBACKUP SOFTWARE	1,908	1,908	0
5 FOOD CARTS	21,260	21,260	0
3 FILE CABINETS & 2 DESKS	610	610	0
KENT HIGH SPEED BUFFER	1,350	1,350	0
TV & RECORDER	527	527	0
48 LOCKERS	1,031	1,031	0
FIRE KING FILE CABINET	800	787	13
PORTABLE SUCTION PUMP	175	175	0
ACETELYNE TORCH KIT	170	170	0
PALLET TRUCK	399	399	0
1 GAL COMMERCIAL BLENDER	646	646	0
CAN RACK	392	392	0
3 CONCENTRATORS	3,086	3,086	0
PLATFORM TRUCK	298	298	0
PORTABLE SUCTION PUMP	187	187	0
SUCTION PUMP STAND	145	145	0
TOASTER	435	435	0
COMPUTER TABLES	781	781	0
2 SMITH DAVIS CONCENTRATORS	3,000	3,000	0
BEIGE SALAD BAR	471	471	0
WET DRY VACUUM	720	720	0
PULMO AIDE	165	165	0
PORTABLE ULTRASOUND	1,250	1,250	0
12 PK TROPIC HEATER	1,190	1,190	0
TECH COOLER 6 PACK	1,514	1,514	0
EXERCISE EQUIPMENT	1,469	1,469	0
WAXER	299	299	0
EVERCOM 1200 BAND	160	160	0
5 PVC SHOWER CHAIRS	529	529	0
SUCTION MACHINE	150	150	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
DICTATING EQUIPMENT	590	589	1
FLOOR MACHINE	1,140	1,140	0
PROJECTION SCREENS	173	173	0
7 PVC SHOWER CHAIRS	818	818	0
2 OXYGEN CONCENTRATORS	2,500	2,500	0
FILE CABINETS	150	150	0
TYPEWRITER	895	895	0
SHOWER CHAIR	992	992	0
GARMENT RACK	441	438	3
SEAT BELT ASSEMBLY	405	405	0
FORD ECONOLINE CARGO VAN	27,500	27,500	0
4 YD DUMPSTER	335	335	0
WHEEL CHAIR	150	150	0
WALNUT PLAQUE & NAME PLATES	887	887	0
2 AMBULIFTS & PARTS	1,856	1,856	0
AMBULIFT	1,888	1,888	0
SCALES	4,469	4,469	0
MICROWAVE	157	157	0
TELEPHONE SYSTEM	5,041	5,041	0
C3 GP SLING	157	157	0
RECLINER CHAIRS	1,879	1,879	0
SMOKING URN	146	146	0
FILE CABINET	139	139	0
5 LAUNDRY CARTS	823	810	13
4 CARTS	561	558	3
2 OXYGEN CONCENTRATORS	2,498	2,490	8
14 VIDEOS	1,241	1,241	0
BIG SCREEN TV	1,700	1,700	0
OFFICE CHAIR	127	127	0
12 OVERBED TABLES	902	902	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
WHIRLPOOL	2,735	2,735	0
STERILIZER	2,695	2,695	0
FOOD SERVICE TRAYS	736	736	0
BERNETTE SEWING MACHINE	299	299	0
CALCULATOR	70	70	0
COMPUTER TABLE	80	80	0
R 301 U FOOD PROCESSOR	956	956	0
COMPUTER HARDWARE SOFTWARE & TRAINING	43,806	43,806	0
GARMENT RACK WBASKET	284	284	0
DESK & CHAIR	150	150	0
SOFTWARE COST-TRAINING	1,698	1,698	0
WHEELCHAIR	300	300	0
SOFTWARE COST-TRAINING	1,460	1,460	0
2 OXYGEN CONCENTRATORS	2,143	2,140	3
COMPUTER TABLE	149	149	0
COMPUTER MODEM	171	171	0
10 MATTRESSES	980	980	0
10 MATTRESSES	925	925	0
HOYER LIFT & MEAM SCALE	1,059	1,059	0
STRETCHER	359	359	0
ELECTRONIC TIME CLOCK	6,499	6,499	0
MATTRESSES	980	980	0
LABEL MACHINE	2,543	2,519	24
5 MATTRESSES	1,281	1,281	0
SUCTION PUMP	939	939	0
PUMP APP WPAD	939	939	0
FAX MACHINE	561	561	0
ELECTRIC BED	636	636	0
12 WX LOW SEAT 18	3,180	3,180	0
WC LOW SEAT	878	878	0

Category /Item	Cost/Other Basis	Accumulated Depreciation	Book Value
5 MATTRESSES	1,281	1,281	0
NOVELL NETWORK	1,425	1,425	0
DIXIE CHOPPER MOWER	6,895	6,895	0
2 CONCENTRATORS	985	985	0
10 ALTERNATING AIR MATTRESSES	1,920	1,920	0
COMPUTER BACKUP TAPE DRIVE	665	665	0
20 MATTRESSES	3,250	3,250	0
4 LOCKING DOOR MAID CARTS	1,637	1,637	0
24 BRUTE CONTAINERS	943	943	0
24 BRUTE DOLLY	682	682	0
CHARTING SYSTEM	6,426	6,426	0
180 WASTEBASKETS	2,034	2,034	0
2 HOST T 6 MACHINE	2,790	2,790	0
3 15 CLEAN-AIR CARPET KPR	1,185	1,185	0
HOOVER CONQUEST 14 UPRIGHT VACUUM	448	448	0
PRESSURE WASHER	399	399	0
PENTIUM COMPUTER SYSTEM	6,673	6,673	0
2 FILE CABINETS	347	347	0
RED-CONDITION ALERT	162	162	0
DIGITAL CAMERA	212	212	0
FIRST Q SYSTEM	836	836	0
6 SHOWER CHAIRS WLOCK	958	958	0
14 HOOVER CARPET CLEANERS	3,001	3,001	0
COMPUTER NETWORK WIRING	1,430	1,430	0
EXCEL ULTRA III-HV COMB UNIT	3,000	3,000	0
20 DECORATOR PRINTS	2,023	1,086	937
24 PICTURES	2,717	1,428	1,289
DESK & CHAIR	379	379	0
TABLE TOP & PEDESTAL	734	734	0
MATTING OF 4 PICTURES	240	125	115

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
ELECTRIC CONVEYOR TOASTER	802	802	0
BURGUNDY & BLUE CHAIRS	872	872	0
CAFE METAL CHAIRS	810	810	0
6 TELEPHONES & INSTALLATION	2,209	2,209	0
ELECTRIC HEATER - ROOM UNIT	3,807	3,807	0
FILE CABINET	575	575	0
FIRST MODULE & SIGNALING DEVICE TESTERS	289	289	0
OKIDATA ML321 TURBO PRINTER	478	478	0
4' DOOR SENSOR	300	300	0
SAFETY CABINET	746	746	0
HERCULES LIFT & TOILETING SLING	3,645	3,645	0
LINEN CART WIRE SHELF GARMENT RACK	963	963	0
CART COVERS	311	311	0
KNEELBOW SPLITS	429	429	0
CHRISTMAS DECORATIONS	1,044	1,044	0
3 ARMRESTS6 RECLINERS	2,482	2,482	0
OXYGEN CONCENTRATOR	1,618	1,618	0
PENTIUM COMPUTER W MONITOR & KEYBOARD	1,400	1,400	0
PEAK III LIVING AIR BORA LIVING AIR 880 PLATE	772	772	0
COMPUTER INTERFACE INSTALLATION	5,735	5,735	0
ROLLER FLOOR TOOL COMBO TOOL HOSE	6,950	6,950	0
WHEELCHAIR POSITIONERS	657	657	0
WHEELCHAIR ATTACHMENTS	211	211	0
10 RECLINERS 10 ARMRESTS 6 ROSEWOOD RECLINERS T	6,855	6,855	0
PENTIUM II WORK STATION	1,430	1,430	0
COMPUTER SYSTEM UPGRADE	659	659	0
KINGSTON PCI COMBO ETH CARD	105	105	0
SIT TO STAND W SUPPORT VEST	3,675	3,675	0
PUMP SUCTION STAND & PRESSURE ALTER	665	665	0
8 DUTY STATIONS	976	976	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
YAMAHA ELECTRIC KEYBOARDLODUCA BENCH	350	350	0
CLOSED CIRCUIT TVCAMCORDERVERIDEOS	681	681	0
MISC EQUIP	30	30	0
BAGGER	1,333	1,333	0
PENTIUM 266 SYSTEM	1,850	1,850	0
ALTIMATE EASY STANDFRAME CHAIRBACK SUPPORT W SE	2,304	2,304	0
WHEELCHAIR	334	334	0
HEAT THERAPY PADPUMP	550	550	0
CARESENSE BED MONITORING SYSTEM	309	309	0
PULSE OXIMETER	779	779	0
WHEELCHAIR WASHEREQUIPMENT	11,046	11,046	0
BAUM STANDBY	931	930	1
20 GALLON VACUUM	666	666	0
SOUND SYSTEM SUPPLIES	615	615	0
DELUXE WEIGHT SET & RACKBAR GLIDERSPLINTING CENT	2,065	2,065	0
3 OZONE PURIFIERS	1,182	1,180	2
DOOR OPERATORS W SUPERSCANBIPARTING SLIDE DOOR	10,450	6,970	3,480
LAND IMPROVEMENTS	11,398	6,175	5,223
BUILDING - ACQUIRED W FUNDED DEPREC FUNDS	96,842	26,631	70,211
LAND IMPROVEMENTS-TREES ETC	8,936	2,212	6,724
LAND IMPROVEMENTS-TREES	409	96	313
ELECTRICAL WORK-BUILDING	1,428	351	1,077
AQUARIUM	510	506	4
DIXIE CHOPPER MOWER-LX2002	5,835	5,835	0
MIXER BOWL GUARD	855	852	3
BIRD AVIARY AND ISOLATION CAGE	4,893	4,850	43
2 OXYGEN CONCENTRATORS	1,618	1,593	25
6 PVC SHOWER CHAIRS	691	679	12
NICOLET VASCIMEX	646	633	13
8X16 BARN	949	614	335

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
2 PVC ICE CARTS	566	551	15
DESK FOR ACCTG DEPT	339	323	16
PC BOARD	1,141	1,141	0
HAND CONTROL FOR GURNEY	582	546	36
PENTIUM II SYSTEM AND SETUP	1,496	1,496	0
76 ELECTRIC RISER BED	1,155	1,083	72
15 CLEAN AIR CARPET KEEPER WON-BOARD ATTACHMENTS	450	416	34
HAND-HELD PULSE OVIMETER	598	555	43
6 YD TRASH DUMPSTER WLIDS	630	583	47
THREE PHASE MONITORS FOR WASHING MACHINES AND 3 OV	1,459	1,350	109
DESK CHAIR & CHAIR MAT	388	357	31
OVERSIZED WHEELCHAIR	471	423	48
3-HP PRINTERS 425 HP40501725 HP1120C PRINTER	17,309	17,309	0
FILE CABINET	395	360	35
TAPE BACKUP SYSTEM	540	540	0
NURSING SLINGS (3)	710	639	71
BORA OZONE MACHINES	429	387	42
LAND IMPROVEMENTS-ASPHALT & CURB	335	297	38
LAND IMPROVEMENTS-STORM DRAINAGE ALTERATIONS	4,150	901	3,249
LAND IMPROVEMENTS-COURTYARD CONST	8,630	1,746	6,884
RECOVERY MACHINE	650	569	81
1996 MEDALIST 4 CYCLE WBED & HEADLIGHT	2,860	2,860	0
HEDGE TRIMMER	380	304	76
KUBOTA TRACTOR	14,290	12,266	2,024
VAN- (MASTERS TRANSPORTATION)	55,097	55,097	0
DESIGN ON VAN- (COLOR TECH PRINTING)	127	127	0
2 COMPUTERS-PENTIUM II 450	2,545	2,545	0
SYSTEM UPGRADESACCTG-B	8,497	8,497	0
EQUIPMENT-RED LINE HEALTHCARE	604	535	69
COMPUTER EQUIPMENT	683	683	0

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
EQUIPMENT- (SPRINGFIELD JANITOR SUPPLY)	450	398	52
EQUIPMENT- (SPRINGFIELD JANITOR SUPPLY	485	432	53
EQUIPMENT- (AFFILIATED SUPPLY COMPANY)	435	388	47
CONCENTRATOR- (DIRECT SUPPLY INC)	1,614	1,409	205
CUBE TRUCK 109- (DIRECT SUPPLY INC)	788	691	97
COMPUTER EQUIPMENT- (COMPUTER SERVICES OF WP)	1,144	1,144	0
AMPAMX SPEAKERS- (RADIO SHACK)	400	400	0
EQUIPMENT- (SPRINGFIELD JANITOR SUPPLY INC)	450	390	60
FILING CABINETS- (CARSTENS)	483	416	67
WHEELCHAIR- (RED LINE)	480	412	68
EQUIPMENT- (CURRENT INC)	12,880	11,055	1,825
LIFT- (EMI)	1,947	1,674	273
EQUIPMENT-(C & H DISTRIBUTORS)	433	369	64
OZONE AIR CLEANER- (HERBS FOR HEALTH)	399	343	56
EQUIPMENT- (SCHWEGMAN OFFICE SUPPLY)	349	297	52
FAX MACHINE- (INLAND PRINTING)	995	850	145
EQUIPMENT-(CURRENT ELECTRIC)	6,600	5,555	1,045
EQUIPMENT- (SCHWEGMAN OFFICE SUPPLY)	506	425	81
ROOF VENTILATORS	1,528	1,262	266
2-OXYGEN CONCENTRATORS 2-RECLINE BACK RECLINERS &	2,886	2,384	502
RUNABOUT WHEELED CHAIR & APOLLO SHIELD	2,937	2,425	512
2 FREESTYLE QUICK LIFTS	2,118	1,749	369
HAND CONTROL- (ARJO INC)	645	531	114
10-AIR PURIFIERS	2,790	2,279	511
BUBBLE PADALT- (DIRECT SUPPLY)	670	542	128
SWINGAWAY FOOT- (DIRECT SUPPLY)	390	315	75
COMPUTER SOFTWARE- (KRONOS INC-PAYROLL)	6,496	6,496	0
HEATERSU- (BAXTER MEDICAL EQUIPMENT)	700	560	140
CHEK MATTR- (APN HEALTHCARE INC)	496	400	96
EQUIPMENT PHASE 2 AREA 6- (CURRENT INC)	8,300	6,640	1,660

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
FEASIBILITY STUDY-BUILDING	21,260	4,770	16,490
45X69 MAINTENANCE BUILDING	79,088	14,498	64,590
COURTYARD CONSTRUCTION	14,595	2,616	11,979
SHRUB	910	182	728
EXHAUST FAN WITH VARIABLE CONTROL	948	467	481
BUILDING IMPROVEMENTS	2,000	400	1,600
FOLDED FLAT TABLES	3,756	2,820	936
PANACEA PLUS	366	274	92
PANACEA PLUS	366	274	92
PANACEA PLUS	730	535	195
CHAIR	309	227	82
VINYL BULLETIN BOARD	984	711	273
SUPPLY SPOT MAINT EQUIP	374	271	103
TRAILER	685	500	185
AIR CONDITIONER	518	368	150
BUSH HOG	650	460	190
MOTOR	457	322	135
AIR CONDITIONING-PHASE 1 AREA 2 & 3	9,150	7,244	1,906
PHASE 3 INSTALL10 UNITS	1,070	847	223
ELECTRIC WHEELCHAIR	1,000	792	208
02 CONCENTRATOR	1,373	1,073	300
02 CONCENTRATOR	687	540	147
14 EQUIPMENT	900	698	202
LIFT BATH TROLEY HYDRAULIC	4,250	3,258	992
COPY MACHINE	5,302	4,063	1,239
RUNABOUT WHEEL CHAIR	2,047	1,537	510
DIGITAL C	582	435	147
PHASE 1 & 2 AREAS 12356 & 7	17,013	12,616	4,397
MULTI TIER LOCKE	357	264	93
MULTI TIER LOCKE	454	330	124

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
LOCKS FOR NEW LOCKERS	30	22	8
PANACEA PLUS	548	394	154
DW RACKFOOD T	465	333	132
AC SUPP	421	298	123
PANACEA PLUS	548	385	163
REFRIGERATORS	554	385	169
SPREADER	425	333	92
RETAINING WALL EXTENSION	3,456	1,153	2,303
EXCAVATION SOUTH OF BUILDING	950	312	638
62 FOLDING CHAIRS	1,756	1,202	554
HILL-ROM ELECTRICAL BED	400	260	140
KUBOTA LOADER	3,298	2,282	1,016
FLOOR DRYERS	444	268	176
4 O2 CONCENTRATORS	2,789	1,953	836
4 WHEELCHAIRS	1,095	770	325
4 WHEELCHAIRS	1,095	770	325
RISER BED	1,045	735	310
2 LOAD RACKS	534	367	167
EMI-GOLVO PATIENT LIFT	4,079	2,822	1,257
PULMO-AID NEBULIZER	452	311	141
CPAP	440	301	139
PRESSURE PADS	1,206	826	380
CARPET EXTRACTOR	4,248	2,869	1,379
TYPEWRITER	470	313	157
PRESSURE REDUCTION MATTRESS	463	303	160
COMMERCIAL UPRIGHT	736	487	249
PATIENT SECURITY SYSTEM	4,088	2,624	1,464
9K BTU 35SKW ELECTRIC HEATER	487	310	177
2-TRACER IV WHEELCHAIRS	820	506	314
RECLINER WTRAY	1,390	846	544

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
DISHMACHINE	600	365	235
GROUNDING SYSTEM IMPROVEMENTS	2,000	283	1,717
2-ELECTRIC OPENERS WITH REMOTES	899	525	374
WIRE SHELF TRUCK DOLLY	496	295	201
2 ALL PURPOSE RISER BEDS	2,189	1,296	893
1-ALL PURPOSE RISER BED	1,181	698	483
2-TRACER DLX WHEELCHAIRS	1,462	864	598
EQUIPMENT-DIRECT SUPPLY	2,278	1,330	948
RECLINER PADS WFLAPS	1,703	978	725
20-ANKLE CONTRACTURE BOOTS	1,178	669	509
2-SUPPORT VEST	725	413	312
WALL HEAT & AIR EQUIP	487	277	210
SAMPSON HEAVY DUTY LIFT	2,500	1,375	1,125
2-MEDIUM POLYESTER SLINGS	303	165	138
1-HEAVY DUTY LIFT	2,500	1,375	1,125
4-MOLIFT QUICK RAISERS	11,980	6,589	5,391
1-SUPREME AIR LOW AIR LOSS MATTRESS PUMP SYSTEM	1,623	864	759
FOOD PROCESSOR-STAINLESS STEEL BOWL	976	514	462
OTHER MISC EQUIPMENT	1,454	725	729
2 ALL PURPOSE RISER BEDS	2,118	954	1,164
6-JOERNS TABLE TOPS & 6 JOERNS HIGH-LOW TABLE BASE	2,829	1,226	1,603
5 LX OXY CONCENTRATOR & 2- 3 POSITION RECLINERS	1,346	652	694
1 RAY PACK BOILER	5,400	2,565	2,835
MAJOR REPAIRS TO OLD BOILER	12,779	6,070	6,709
2 SAMSON HEAVY DUTY LIFTS	5,383	2,511	2,872
1 UNITARY MEAL DELIVERY CART-DELUXE	8,132	3,659	4,473
COMPUTER EQUIPMENT	1,836	1,652	184
FOLD UP PORTABLE WHEEL CART & SCALE BATTERY	1,674	710	964
12 CHAIRS	2,067	880	1,187
KOOLAIRE REACHIN FREEZER	3,769	1,602	2,167

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
LAPTOP COMPUTER	2,275	1,896	379
WORKSTATION UPGRADES-(COMPUTER SERVICES OF WP)	2,776	2,313	463
EQUIPMENT-DIRECT SUPPLY	2,302	939	1,363
GENERATOR(TOTAL GENERATOR SERVICE INC)	19,975	7,992	11,983
EQUIPMENT -(VIKING ENVIRONMENTAL)	6,800	2,720	4,080
EQUIPMENT	939	423	516
NEW PARKING LOT LIGHT	1,150	383	767
1-BED	1,509	566	943
FURNITURE	1,737	594	1,143
2-BEDS	2,191	675	1,516
4000 TRACTOR	8,500	3,258	5,242
MAINTENANCE EQUIPMENT	163	56	107
DUCT WORK SEALING	10,474	2,501	7,973
CHEVROLET VAN	11,500	8,817	2,683
COMPUTER EQUIPMENT	410	321	89
EQUIPMENT	2,801	1,097	1,704
EMERGENCY GENERATOR	17,980	6,593	11,387
LIFT SWING	1,037	381	656
RECLINER AND FOOT SUPPORT	1,309	480	829
INSTALL NEW 5-LIGHT PANEL FOR STANDBY GENERATOR	712	231	481
LIFT & SWING	4,766	1,550	3,216
MISC EQUIP	1,013	320	693
HOT FOOD TABLE & SERVING SHELF	2,026	626	1,400
OTHER MISC EQUIPMENT	357	111	246
COMPUTER HARDWARE SOFTWARE & TRAINING	73,697	55,272	18,425
COLOR LASER JET PRINTER	699	513	186
COMPUTER UPGRADE	7,340	5,138	2,202
COMPUTER UPGRADE	2,562	1,792	770
2-COMPUTERS	1,070	731	339
SOFTWARE LICENSE	3,555	2,370	1,185

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
4350 LASER JET PRINTER	2,310	1,502	808
HP 1500 SHEET HIGH CAPACITY INPUT TRAY	1,097	712	385
HP 500 SHEET HIGH STACKER	883	575	308
HARDWARE FOR WIRELESS NETWORK	5,147	3,259	1,888
OTHER COMPUTER ACCESSORIES	960	672	288
OTHER COMPUTER ACCESSORIES	750	475	275
COMPUTER EQUIPMENT-HEWLETT PACKARD	8,753	5,545	3,208
COMPUTER EQUIPMENT-HEWLETT PACKARD	290	179	111
COMPUTER EQUIPMENT COMPUTER SERVICES OF WEST PLAINS	7,995	4,930	3,065
COMPUTER EQUIPMENT-COMPUTER SERVICES OF WP	3,023	1,865	1,158
COMPUTER EQUIPMENT	350	210	140
MAINTENANCE SHED IMPROVEMENTS	1,900	508	1,392
CONCRETE CURB & GUTTER	20,270	2,704	17,566
HANDICAP ACCESSIBLE SIDEWALKS AT EXITS	2,194	275	1,919
REDO BEDDING PLANTSCURB WORK	1,083	126	957
DUMPSTER	443	103	340
BUILDING REMODELING-FUNDED DEPREC	19,507	1,125	18,382
TABLES & CHAIRS	33,600	7,000	26,600
CANON COPIER	7,205	2,163	5,042
CAFE ICE MACHINE	4,703	1,332	3,371
02 CONCDUST PANANGLE BROOMS	1,346	382	964
PADDED MEDIUM SLINGSX10	1,122	308	814
EMI4130-SIT TO STAND PATIENT LIFT	2,761	690	2,071
CARPET CLEANING TOOLS	3,022	1,510	1,512
ELECTRIC PT LIFT	1,839	429	1,410
NURSING LIFTS	1,853	401	1,452
VACUUM	2,098	840	1,258
DUCTWORK INSTALLATION	1,521	287	1,234
CARPET	27,248	5,223	22,025
3 POSITION RECLINER WFOOT REST EXTENDERS	1,386	208	1,178

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
AUTOMATIC OVERBED TABLES	1,272	148	1,124
ARMOIR FOR FIREPLACE LOUNGE	850	92	758
EXTRA WIDE RECLINER	1,717	186	1,531
GOLF CART	3,000	1,200	1,800
USED CUTTER 1-307R	1,795	255	1,540
8' UTILITY TRAILER	240	46	194
02 CONCENTRATORS	1,299	260	1,039
UNIMAC DRYER 75# GAS TUMBLER	4,038	808	3,230
POWER THERMDISHES	9,986	1,914	8,072
WHEELCHAIRS	1,601	307	1,294
TERMINAL SERVER	2,292	878	1,414
4 BATTERIES FOR LIFT	162	62	100
TERMINAL SERVICES CONNECTOR SOFTWARE	57	21	36
COMMODE	1,018	195	823
2 PATIENT LIFTS	2,070	397	1,673
NURSING EQUIPMENT	516	95	421
CHARGER FPR LIFTS	481	176	305
RISER BED WFOOTBOARDHEADBOARD	1,139	199	940
3 POSITION RECLINER	782	137	645
UNIV MESH LIFTS	570	100	470
HAND CONTROLCHARGER-LIFTS	304	53	251
CHARGER FOR LIFTS	955	168	787
HAND CONTROL-LIFTS	145	26	119
COMPUTER EQUIPMENT-EXISTING SERVER OPERATING SYSTEM UPGRADE	9,491	3,005	6,486
SERVERLICENSETERMINAL	6,669	2,112	4,557
2 SOLO BEDS	2,333	527	1,806
7-MATTRESSESSKIN SLEEVES	1,130	170	960
TWO SOLO BEDS	2,333	350	1,983
AIR CONDITIONER-LAUNDRY	2,225	297	1,928
UNIVERSAL SLINGS	363	42	321

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
UNIVERSAL SLINGS	653	76	577
PANACEA PULSE AIR PLUS AND PUMP	1,209	131	1,078
PANACEA PULSE AIR AND PUMP	7,208	781	6,427
BUILDING REMODELING	8,805	275	8,530
LANDSCAPING	29,581	1,295	28,286
LAPTOP COMPUTER	2,487	953	1,534
COMPUTER DOCKING STATION	159	61	98
BUILDING	14,575	607	13,968
HEATING & AIR UNITS	1,301	217	1,084
CARPET	192,004	38,400	153,604
EQUIPMENT	1,651	248	1,403
MAINTENANCE EQUIPMENT	5,035	756	4,279
BASEMENT DOORS	1,264	53	1,211
5 BARIATRIC ROOM DOORS TO BLDG	15,515	129	15,386
INSULATION	2,344	13	2,331
ELECTRICAL UPGRADE OF CORE ATTIC AREA	1,087	6	1,081
REMODELING OF NURSE STATIONS OFFICES AND COMMON AREAS	169,170	352	168,818
DINING ROOM TABLE TOPS	1,000	100	900
2-3 POSITION RECLINERS	792	59	733
1-3 POSITION RECLINER	396	30	366
LARGE SCREEN TV	3,025	403	2,622
ARMOIRE	849	64	785
DISPLAY CASES AND SETUP FOR GIFT SHOP	1,559	39	1,520
DECORATIONS & REMODEL FOR 2008 REMODELING	3,710	31	3,679
NEW TOSHIBA TELEPHONE SYSTEM	20,745	346	20,399
2 COMPUTER WORKSTATIONS & PRINTER	2,572	514	2,058
HYDRAULIC LIFT WALKER	2,784	255	2,529
VITAL SIGNS MONITORS & STANDS	6,366	1,167	5,199
CARETRACKER DOCUMENTATION SYSTEM HARDWARE & SOFTWARE	44,266	2,213	42,053
DISH DISPENSER	1,774	296	1,478

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
2 WASHEREXTRACTORS	16,790	2,519	14,271
HP NOTEBOOK COMPUTERS & EXTENDED WARRANTY	1,273	149	1,124
GARBAGE DISPOSAL	1,433	143	1,290
16000 BTU AIR CONDITION UNIT	4,970	138	4,832
HP DESKTOP COMPUTER MONITOR & STAND	1,157	77	1,080
COMPUTER NETWORK ORGANIZATION SYSTEM	1,855	93	1,762
PUMP & CABLE FOR WHIRLPOOL TUB	1,527	76	1,451
5 PORTABLE AIR COND UNITS	2,060	34	2,026
COMPUTER NETWORKING EQUIPMENT	3,154	105	3,049
6-PANACEA PLUS AIR & PUMP	7,953	66	7,887
3 VACUUM CLEANERS	1,695	28	1,667
5-TRACER EX2 WHEEL CHAIRS	1,263	11	1,252
3 POSITION RECLINERS	1,768	29	1,739
6 BARIATRIC WHEELCHAIRS	5,057		5,057
BARIATRIC LIFTS SLINGS & SCALES	7,704		7,704
BARIATRIC WALKERS & WC CUSHIONS	1,868		1,868
6-BARIATRIC BEDSIDE COMMODOES	1,123		1,123
FRONT AUTOMATIC DOOR OPENER-REPAIRS	1,286		1,286
FOOD PROCESSOR	1,274		1,274
110 ELECTRIC BEDS & 5 MATTRESSES	125,658	698	124,960
PLEASANT VALLEY VILLAGE-TOTALS	6,603,304	1,175,352	5,427,952
PLEASANT VALLEY MANOR-TOTALS	2,090,671	1,237,332	853,339
WEST VUE LEASE PROPERTY	1,258,604	1,060,972	197,632
WEST VUE APARTMENTS	1,182,195	778,137	404,058

TY 2007 Mortgages and Notes Payable Schedule

Name: WEST VUE INC

EIN: 43-0827220

Total Mortgage Amount: 8827475

TY 2007 Other Assets Schedule

Name: WEST VUE INC

EIN: 43-0827220

Description	Beginning of Year Amount	End of Year Amount
INTEREST RECEIVABLE	68,585	32,592
UTILITY DEPOSIT	60	60
LOAN COSTS-NET OF AMORTIZATION	43,490	41,210
BOND DISCOUNT-NET OF AMORTIZATION	8,299	7,529
BOND & USDA LOAN COST NET OF AMORTIZATION	127,387	117,663
ASSETS WHOSE USE IS LIMITED	877,020	1,088,622
ASSETS WHOSE USE IS LIMITED-REQUIRED FOR CURRENT LIAbilities	31,424	33,793
CONSTRUCTION IN PROGRESS	0	24,008

TY 2007 Other Liabilities Schedule

Name: WEST VUE INC

EIN: 43-0827220

Description	Beginning of Year Amount	End of Year Amount
DEPOSITS FROM RESIDENTS AND PATIENTS	32,270	35,698
TENANT SECURITY DEPOSITS	7,381	8,128
UNCLAIMED PROPERTY	1,991	2,003
BANK OVERDRAFT	0	38,938