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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year
may use this form

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

Open to Public Inspection

Α	For the 2009 calendar year, or ta	ax year beginning	, 2009, and en	ıding		,
В	Check if applicable C			D E	mployer	identification number
Γ	Address change Please SAN DI	EGO FIRST ASSEMBLY RE	TTREMENT	}	95-34	109647
	Name change label or CENTER				elephone	
	Initial return type. 8404 F	HYLLIS PLACE		ł		560-1870
		IEGO, CA 92123			(030)	300-1070
L	Amended return Instruc-					emption
上	Application pending				lumber	
	• Section 501(c)(3) organiza must attach a com	ntions and 4947(a)(1) nonexempt c pleted Schedule A (Form 990 or 99	haritable trusts 90-EZ).	G Accounting meth Other (specify)		Cash X Accrual
ı	Website: ► WW.SANDIEGOF	FIRSTASSEMBLY.COM		required to attac	h Sche	ganization is not dule B (Form 990,
J	Tax-exempt status (check only one) -	X 501(c) (3) ◄ (insert no.)	4947(a)(1) or 527	990-EZ, or 990-I	가). ———	-
K	Check ► if the organization is \$25,000 A Form 990-EZ or Form 9	is not a section 509(a)(3) supporting the section 509 (a)(3) supporting the organization is not required, but if the organization is not a section 509 (a)(3) support in the section 509 (a)(3) support 509	ng organization and its ganization chooses to file	gross receipts are no e a return, be sure to f	rmally ile a co	not more than mplete return.
<u> </u>	Add lines 5b, 6b, and 7b, to line instead of Form 990-EZ	9 to determine gross receipts, if \$	500,000 or more, file Fo	orm 990	► \$	447,655.
, P	art I Revenue, Expense	es, and Changes in Net Ass	ets or Fund Baland	es (See the inst	ruction	ns for Part I.)
y .— 1	1 Contributions, gifts, grants	, and similar amounts received		<u> </u>	1	
į	2 Program service revenue ii	ncluding government fees and conf	tracts		2	442,868.
5	3 Membership dues and asse	essments	•		3	
	4 Investment income				4	1,071.
3	5a Gross amount from sale of	assets other than inventory	. 5a			
	b Less. cost or other basis a	nd sales expenses	5b			
5 5	c Gain or (loss) from sale of assets	other than inventory (Subtract In 5b from In	5a) .		5c	
REVENUE NO	6 Special events and activities (com	plete applicable parts of Schedule G) If any	amount is from gaming, che	ck here		-
)	a Gross revenue (not includi	ng \$ of co	ntributions			
י ב	reported on line 1)		6a		1 1	
	b Less direct expenses othe	r than fundraising expenses	6b		7	
	· ·	events and activities (Subtract line 6b from	line 6a)	 	6c	
	7a Gross sales of inventory, le	ess returns and allowances	7a			· · · · · · · · ·
	RECEIVED Goods sold		7ь		7]	
	c Gross profit or (loss) from	sales of inventory (Subtract line 7th	from line 7a)		7с	
	8 Other revenue (describe) SE	E STATEMENT 1).	8	3,716.
25	MAY Tatal re Cellue Accilines 1	, 2, 3, 4, 5c, 6c, 7c, and 8		•	9	447,655.
7	10 Grants and simila@amount				10	•
<u>ا</u>				•	11	
E	Benefits paid to or for men	ion, and employee benefits			12	100,574.
P		er payments to independent contract	ctors		13	
E N S	14 Occupancy, rent, utilities,	• •			14	
Ě	15 Printing, publications, post				15	
3	16 Other expenses (describe ► SE	E STATEMENT 2)	16	248,965.
	17 Total expenses. Add lines				-	349,539.
		year (Subtract line 17 from line 9)	-		18	98,116.
	. ` ′ ′	es at beginning of year (from line 2	7 column (A)) (must a	aree with end of year		
N E T	Net assets or fund balance figure reported on prior year Other changes in net asse	ar's return)	7, column (A)) (must a	gree with end-or-year	19	406,738.
T	7 20 Other changes in net asse	ts or fund balances (attach explana	ation)		20	
	SI -	es at end of year. Combine lines 18		•	21	504,854.
ГР		Total assets on line 25, column (B		re, file Form 990 inst		
Ŀ		the instructions for Part II.)	,	(A) Beginning of ye		(B) End of year
2	2 Cash, savings, and investment	-		188,163		258,802.
	3 Land and buildings			892,001		869,386.
	4 Other assets (describe ► SE	E STATEMENT 3)	9,883		13,736.
	5 Total assets		••	1,090,047		1,141,924.
	6 Total liabilities (describe ► S	SEE STATEMENT 4)	683,309		637,070.
		line 27 of column (B) must agree v	vith line 21)	406,738		504,854.

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

Form 990-EZ (2009)

Form 990-EZ	(2009) SAN	DIEGO FIRST	ASSEMBLY RETIREME	NT		<u>5-34</u> (09647 Page 2
Part III	Statement	of Program Ser	vice Accomplishments	(See the instruction	ons.)		Expenses
What is the organ	nization's primary	exempt purpose? SEE	STATEMENT 5	<u>-</u>		」(Reg 」501(uired for section c)(3) and (4)
Describe wha	at was achieve	ed in carrying out the	e organization's exempt purp persons benefited, or other r	oses In a clear and co	ncise manner,	orga	c)(3) and (4) nizations and section (a)(1) trusts, optional
program title	services provi	idea, the number of	persons benefited, or other r	elevant imorniation for	eacii	for o	thers)
		ION OPERATES	A 56 UNIT APARTME	NT COMPLEX THAT	PROVIDES		
			ED FACILITIES TO E			1	
		T LOW MONTHL				1	
(Grants			is amount includes foreign gr	ants check here		1 28 a	285,703.
	, y					1 200	200,700.
29						1	
					-	-	
	- -				ــم ــ _ ــ ــ ــ	┫	
(Grants	; Ş) If the	is amount includes foreign gr	rants, check here		29 a	
30						4	
						1	
						╣	
(Grants			is amount includes foreign gr	ants, check here	<u>_</u>	30 a	
		ces (attach schedule			. –	٦	
(Grants			is amount includes foreign gr	rants, check here	▶_	31 a	
32 Total p	rogram servic	ce expenses (add lir	nes 28a through 31a).		'	32	285,703.
Part IV	List of Offi	icers, Directors,	Trustees, and Key Em		· · · · · · · · · · · · · · · · · · ·		
	-> No	a.d.d.a.a.a	(b) Title and average hours per week devoted	(c) Compensation (If not paid, enter -0)	(d) Contribution employee benefit p		(e) Expense account and other allowances
(i	a) Name and a	address	to position	not paid, enter -u)	deferred compen		and other allowances
MORRIS C	RISCI		VICE CHAIRMAN	0.		0.	0.
	VESTON S		1.00			•	
	50, CA 92		1.00				
		110	CHAIRMAN	0.		0.	0.
ROBERT E						υ.	0.
5450 LEA			1.00				
	GO, CA 92	105					
JON MCDO	WELL		SECRETARY	0.		0.	0.
3065 LLC	OYD STREE	T	1.00				
SAN DIE	O, CA 92	117					
MARTHA V	NOODS		DIRECTOR	0.		0.	0.
	ETSON AVE	NUE	0				
	GO, CA 92						
	PHER SHAW		DIRECTOR	0.		0.	0.
	PILO STRE		0	1		٠.	ļ
			•				
	GO, CA 92	129	DIRECTOR	0.		0.	0.
ALPHONSE	_		DIRECTOR	0.		υ.	0.
		<u>LA ESCENA</u>	U				
	GO, CA 92	108					
PIERETTE			TREASURER	1		0.	0.
	MINITO CH		1.00				
SAN DIEC	GO, CA 92	105					ļ
							
							
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		-					
					<u> </u>		<u> </u>
BAA			TEEA0812L (01/30/10			Form 990-EZ (2009)

TEEA0812L 01/30/10

BAA

	1 990-EZ (2009) SAN DIEGO FIRST ASSEMBLY RETIREMENT 95-340964			age 3
Pa	TY Other Information (Note the statement requirements in the instrs for Part V.) SEE STA	TEME	NT	6
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice,			
	reporting, and proxy tax requirements? of 'Yes,' has it filed a tax return on Form 990-T for this year?	35a 35b		<u>X</u> _
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
37 (a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.			
-	Did the organization file Form 1120-POL for this year?	37 b		X
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X
1	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on line 9 39a N/A			
	b Gross receipts, included on line 9, for public use of club facilities N/A			1 1
40	a Section 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.	 		$\vdash \vdash$
l	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40ъ		x
	c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
41	List the states with which a copy of this return is filed NONE			
42	a The organization's books are in care of ► RONDA HALL Located at ► 8404 PHYLLIS PLACE, SAN DIEGO, CA ZIP + 4 ► 92123	<u> 560-</u>	- <u>1</u> 87	<u>0</u>
		Γ	Yes	No
	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.	42Ь		X
				1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S.? If 'Yes,' enter the name of the foreign country.	42 c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year			N/A N/A
44	Did the organization maintain any donor advised funds? If 'Voc.' Form 000 must be completed instead		Yes	No
	of Form 990-EZ	44		<u>X</u> _
	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		X
BAA	TEEA0812L 01/30/10 For	m 990 -	-EZ (2009)

i dic vi	501(c)(3) organizations and sec 46-49b and complete the tables	ction 4947(a)(1) no s for lines 50 and 5	nexempt charitable 1.	e trusts must answer	questic	ns	<u>'</u>
for p 47 Did t 48 Is the	the organization engage in direct or indirect obublic office? If 'Yes,' complete Schedule (the organization engage in lobbying activitie organization a school as described in settle organization make any transfers to an	C, Part I lies? If 'Yes,' complete ection 170(b)(1)(A)(ii)?	Schedule C, Part II If 'Yes,' complete Sche		46 47 48 49 a	Yes	X X X X
50 Com	es,' was the related organization a section iplete this table for the organization's five	highest compensated e	mployees (other than	officers, directors, trustees	49b and key		
	Noyees) who each received more than \$10 Name and address of each employee paid more than \$100,000	0,000 of compensation (b) Title and average hours per week devoted to position	from the organization. (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) E	pense int and lowance:	s
NONE							
f Tota	Il number of other employees paid over \$1	00,000		<u> </u>			
51 Com	plete this table for the organization's five pensation If there is	highest compensated in some, enter 'None'	ndependent contractors	s who each received more	than \$10	0,000	of
NONE	(a) Name and address of each independent conti	ractor paid more than \$100,000		(b) Type of service	(c) Com	pensatio	<u>n</u>
							
d Tota	number of other independent contractors	s each receiving over \$	100,000				
Sign Here	Under penalties of perjury, I declare that I have example true, correct, and complete Declaration of prepare (Robert Busch Type or print name and title	hman	ompanying schedules and state all information of which prepared to the control of	ements, and to the best of my knowner has any knowledge S/IY/// Date		elief, it is	s
Paid Pre- parer's Use	Preparer's signature Firm's name to RONALD BLUE AND yours it self-employed). 1551 N TUSTIN A	OFA CO. VE SUITE 1000	Date 5 /14//	o employed ► P0	arer's Identi instructions 019949	1	mber
Only	address and	2705-8635			543-05		
May the IF	RS discuss this return with the preparer sh		ections		X Yes		No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization SAN DIEGO FIRST ASSEMBLY RETIREMENT 95-3409647 CENTER Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(bX1XAXiii). Enter the hospital's 4 name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXvi). (Complete Part II) 7 8 community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated Type III - Other Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified, persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (i) Name of Supported Organization (v) Did you notify the organization in (vii) Amount of Support (ii) EIN (iv) Is the (vi) Is the organization in col (i) organized in the US? rganization in col (i) listed in your organization col (i) of your support? governing document? Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

Page 2

	(Complete only if you checke	ed the box on line	5, 7, or 8 of Par	(1.)				
Sec	tion A. Public Support							
begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f)	Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge				_			·
4	Total. Add lines 1-through 3				 			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support		1					
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f)	Total
7	Amounts from line 4	·						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	rities, etc. (see in:	structions)			. [1	2	
	First five years. If the Form 990 organization, check this box and	stop here	<u> </u>	nd, third, fourth, c	or fifth tax year as	a section 501	(c)(3)	▶ □
	tion C. Computation of Pul							
	Public support percentage for 20			ne 11, column (f)		_	4	<u>%</u>
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14			_1	5	
16 a	33-1/3 support test — 2009. If the and stop here. The organization				the line 14 is 33-	1/3 % or more	, check this	box ► □
t	33-1/3 support test – 2008. If the and stop here. The organization	e organization did qualifies as a put	l not check a box olicly supported o	on line 13, or 16a rganization	, and line 15 is 33	3-1/3% or more	e, check this	• box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this l	box and stop her	re. Explain in P	Part IV how	► 🗌
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance: test The organi	s' test, check this l zation qualifies as	box and stop her a publicly suppor	re. Explain in F rted organizati	Part IV how ton	the -
18	Private foundation. If the organi	zation did not che	eck a box on line,	13, 16a, 16b, 17a				
BAA					Sc	hedule A (Forn	n 990 or 990)-EZ) 2009

SAN DIEGO FIRST ASSEMBLY RETIREMENT 95-3409647 Schedule A (Form 990 or 990-EZ) 2009 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in)► (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 **(e)** 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support (a) 2005 (d) 2008 Calendar year (or fiscal yr beginning in) ► **(b)** 2006 (c) 2007 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add ins 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Schedule A	(Form	990 or	990-E	Z) 200	09 S	AN I	DIEGO	FIRS	T	ASSEM	BLY	RETI	REMEN?	r		95-3	40964	7	Page 4
Part IV	Supp Part	lemer II, line	ital Ir 17a	or 1	nation 7b; an	. Co d Pa	mplete art III,	this line 12	ра 2.	rt to pr Provide	ovide any	the e other	xplana addıtıc	tions onal i	requi nform	red b ation	y Part . See	II, line instruc	e 10; tions.
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Schedule A (Form 990 or 990-EZ) 2009

2009	FEDERAL STATEMENTS SAN DIEGO FIRST ASSEMBLY RETIREMENT	PAGE 1
STATEMENT 1 FORM 990-EZ, PART I, LINE OTHER REVENUE	CENTER E 8 TOTAL \$\frac{\\$}{\\$}	95-3409647 3,716. 3,716.
STATEMENT 2 FORM 990-EZ, PART I, LINE OTHER EXPENSES DEPRECIATION INSURANCE INTEREST MANAGEMENT FEES MISCELLANEOUS OUTSIDE SERVICES PROGRAM EXPENSES REPAIRS AND MAINTENANG UTILITIES	\$	49,928. 26,504. 29,932. 18,000. 2,978. 4,290. 4,661. 63,841. 48,831. 248,965.
STATEMENT 3 FORM 990-EZ, PART II, LIN OTHER ASSETS ACCOUNTS RECEIVABLE AUTOMOBILES MACHINERY AND EQUIPMEN	BEGINNING \$ 0.\$ 5,548.	536. 6,725. 6,475. 13,736.
STATEMENT 4 FORM 990-EZ, PART II, LIN TOTAL LIABILITIES ACCOUNTS PAYABLE AND A SECURED MORTGAGES AND SECURITY GATE DEPOSITS	ACCRUED EXPENSES \$ 5,938. \$ NOTES PAYABLE 661,048.	ENDING 9,328. 609,306. 18,436. 637,070.
STATEMENT 5 FORM 990-EZ, PART III ORGANIZATION'S PRIMAR PROVIDE HOUSING AND RI	Y EXEMPT PURPOSE ELATED FACILITIES AND SERVICES FOR ELDERLY PEOPLE.	

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2009

FEDERAL STATEMENTS

PAGE 2

SAN DIEGO FIRST ASSEMBLY RETIREMENT CENTER

95-3409647

STATEMENT 6		
FORM 990-EZ, PART V		
REGARDING TRANSFERS ASSOCIATE	D WITH PERSONAL	BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

NO

12/31/09	2	.009 F	2009 FEDERAL		300K	DEP	BOOK DEPRECIATION SCHEDULE	TION	SCHE	DULE				ď	PAGE 1
			SAN	DIEG	SO FIRS	ST ASSE CENTI	SAN DIEGO FIRST ASSEMBLY RETIREMENT CENTER	ETIREM	ENT					95	95-3409647
NO DESCRIPTION	DATE	DATE	COST/ BASIS	BUS	CUR 179 BONLIS	SPECIAL DEPR. ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR	SALVAG /BASIS RFDIICT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
M 990/990-PI					!										
AUTO / TRANSPORT EQUIPMENT															
1 GOLF CART	12/31/98		6,977							6,977	6,479	S/L HY	7		0
43 VEHICLE	5/18/05		11,511							11,511	6,461	S/L HY		14290	1,645
51 YAMAHA GOLF CART	12/31/09	,	2,822	ı						2,822		S/L	7	1	0
TOTAL AUTO / TRANSPORT EQUIP			21,310		0	0	0	0	0	21,310	12,940				1,645
BUILDINGS															
2 BUILDING	1/01/80		1,289,000							1,289,000	934,525	S/L	40		32,225
3 MANAGER RESIDENCE	1/01/86		63,450							63,450	36,483		4		1,586
39 RECREATION CENTER	2/01/03	·	7,000	•		j				7,000	1,314	S/L	315	1	222
TOTAL BUILDINGS			1,359,450		0	0	0	0	0	1,359,450	972,322				34,033
IMPROVEMENTS															
4 BUILDING IMPROVEMENTS	1/01/87		35,900							35,900	35,900	J/S	20		0
5 BUILDING IMPROVEMENTS	1/01/89		6,672							6,672	4,237	S/L	. 31.5		212
6 BUILDING IMPROVEMENTS	1/01/90		5,774							5,774	3,481	3/r	. 315		183
7 BUILDING IMPROVEMENTS	1/01/91		7,612							7,612	4,351	S/L	31.5		242
8 BUILDING IMPROVEMENTS	1/01/92		5,930							5,930	3,199	S/L	31.5		188
9 BUILDING IMPROVEMENTS	1/01/93		7,282							7,282	3,698	S/L	31 5		231
10 BUILDING IMPROVEMENTS	1/01/94		6,985							982	3,328	S/L	31.5		222
	1/01/95		9,184							9,184	4,084		31.5		262
	1/01/96		16,508							16,508	6,812	S/L	31 5		524
13 BUILDING IMPROVEMENTS	1/01/97		12,491							12,491	4,761	S/L	31 5		397

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12/31/09	60/1	2	009 F	EDER,	AL E	000 0√	(DEP	RECIA	TION	SCH	2009 FEDERAL BOOK DEPRECIATION SCHEDULE				PAGE'2
		i		SAN		SO FIR	ST ASSI CENT	DIEGO FIRST ASSEMBLY RETIREMENT CENTER	ETIREM	ENT					95-3409647
ON	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS	CUR 179 BONUS.	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD. 1	LIFE RATE	CURRENT DFPR.
14	BUILDING IMPROVEMENTS	12/31/98		23,204							23,204	7,368	S/L	31.5	737
15	BUILDING IMPROVEMENTS	2/01/00		11,782							11,782	3,179	S/L	31.5	374
16	COMMUNITY ROOM KITCHEN	12/31/02		7,202							7,202	1,393	S/L	31.5	229
11	PARKING LOT	12/31/90		6,250							6,250	2,811	S/L	40	156
81	PARKING LOT	12/31/91		4,233							4,233	1,800	S/L	40	901
19	PARKING LOT	12/31/92		45,402							45,402	18,161	S/L	40	1,135
20	PARKING LOT	12/31/95		6,816							918'9	2,213	S/L	40	0/1
21	PARKING LOT	12/31/96		20,016							20,016	6,003	S/L	40	200
22	PARKING LOT	12/31/97		6,206							6,206	1,706	S/L	40	155
23	PARKING LOT	12/31/98		7,159							7,159	1,790	S/L	40	179
24	PARKING LOT	1/01/00		2,686							2,686	270	S/L	40	29
44	BUILDING IMPROVEMENTS	12/31/06		97,888							888'26	7,832	S/L	25	3,916
45	CABINETS	1/18/06		2,000							2,000	2,083	S/L	7	714
46	TV WIRING	7/19/06		3,200							3,200	1,280	S/L	5	640
49	NIELSEN CONSTRUCTION	6/11/08		1,887							1,887	73	S/L	15	126
20	UNIT REMODEL	2/01/08		10,723							10,723	357	S/L	15	715
23	AUTOMATION GATE	12/31/09		4,250							4,250		S/L	15	0
54	MNGRS HOUSE HVAC	12/31/09		5,532							5,532		S/L	15	0
55	#128 & #220 REMODELS	12/31/09	•	14,047	1						14,047		S/L	15	0
	TOTAL IMPROVEMENTS			397,821		0	0	0	0	0	397,821	132,470			12,410
LAND	9														
25	 25 LAND	1/01/80		263,350							263,350				0
	TOTAL LAND			263,350	•	0	0	0	0	0	263,350	0			0

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12/31/09	~	1 600	2009 FEDER	AL E	3007	(DEP	RECIA	TION	SCHI	AL BOOK DEPRECIATION SCHEDULE					PAGE'3
			SAN	DIEG	SAN DIEGO FIRST	ST ASSI CENT	- ASSEMBLY RETIREMENT CENTER	ETIREM	ENT					δί	95-3409647
NO. DESCRIPTION	DATE	DATE	COST/ BASIS	BUS.	CUR 179 BONIIS	SPECIAL DEPR.	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC BAL DEPR	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
ACHINERY AN															
26 CAPITAL EQUIPMENT	12/31/88		7,567							7,567	7,567	S/L HY	7		0
27 CAPITAL EQUIPMENT	12/31/89		1,729							1,729	1,729	S/L HY	۲ ۲		0
28 CAPITAL EQUIPMENT	12/31/90		5,245							5,245	5,245	S/L HY	۲ ۲		0
29 CAPITAL EQUIPMENT	12/31/91		4,088							4,088	4,088	S/L HY	۲ ۲		0
30 CAPITAL EQUIPMENT	12/31/92		3,648							3,648	3,648	S/L HY	۲ 7		0
31 CAPITAL EQUIPMENT	12/31/93		2,723							2,723	2,723	S/L HY	۲ ۲		0
32 CAPITAL EQUIPMENT	12/31/94		1,220							1,220	1,220	S/L HY	۲ ۲		0
33 CAPITAL EQUIPMENT	12/31/95		4,115							4,115	4,115	S/L HY	۲ ۲		0
34 CAPITAL EQUIPMENT	12/31/96		978							878	8/6	S/L HY	۲ ۲		0
35 CAPITAL EQUIPMENT	12/31/97		1,207							1,207	1,207	S/L HY	۲ ۲		0
36 CAPITAL EQUIPMENT	12/31/98		2,191							2,191	2,034	S/L HY	۲ ۲		0
37 CAPITAL EQUIPMENT	1/01/00		2,616							2,616	2,616	S/L HY	۲ ۲		0
38 COMM ROOM-KITCHEN EQUIP.	12/31/02		6,398							6,398	5,941	S/L HY	۲ ۲	.07140	457
40 BOILER	7/01/03		8,809							8,809	8,181	S/L HY	۲ ۲	.14290	879
41 STOVE	7/01/03		853							853	793	S/L HY	۲ ۲	.14290	09
42 COMPUTER AND MISC	12/31/04		1,954							1,954	1,116	S/L	۱ /		279
47 DELL LAPTOP	10/12/08		1,267							1,267	83	S/L	. 2		253
48 REFRIDGERATORS	1/30/08		1,140							1,140	149	S/L	٦ /		163
52 SMART WEATHERMATIC STATIO	0 12/31/09		3,980	ı					ĺ	3,980		S/L	٦ /	•	0
TOTAL MACHINERY AND EQUIPME	ME		61,728		0	0	0	0	0	61,728	53,413				1,840
TOTAL DEPRECIATION			2,103,659	, ,			0	0		2,103,659	1,171,145				49,928
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12/31/09	2009	2009 FEDERAL BOOK DEPRECIATION SCHEDULE SAN DIEGO FIRST ASSEMBLY RETIREMENT	BOO EGO FIR	AL BOOK DEPRECIATION SC DIEGO FIRST ASSEMBLY RETIREMENT	RECIA MBLY RE	TION	SCHE	DULE				PAGE'4
NO. DESCRIPTION	DATE DATE ACQUIRED SOLD	COST / BUS. BASIS PCT.	CUR S. 179 I. BONUS.	SPECIAL DEPR. ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR	SALVAG /BASIS REDIUCT	DEPR BASIS	PRIOR DEPR	METHOD	METHOD, LIFE RATE	CURRENT DEPR.
GRAND TOTAL DEPRECIATION		හු		0	0	0	0	2,103,659	1,171,145			49,928