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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
organizations of donor advised funds and controlling organizations as defined in section 512(b)(13)
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

2009 Open to Public

Form 990-EZ (2009)

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Inspection ➤ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning Apr 01 . 2009, and ending Mar 31.2010 C Name of organization, number and street, city, town, state, and ZIP code D Employer identification number Please Address change label or 83-0215485 Name change onnt or Riverton Senior Housing Inc tottal return tvpe E Telephone number Termination 307-856-4782 Specific Instruc-PO Box 846 Amended return F Group Exemption tions Riverton WY 82501 Number ▶ Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting Method Accrual Other (specify) a completed Schedule A (Form 990 or 990-EZ). I Website: H Check►X if the organization is not required J Tax-exempt status (check only one) - X 501(c)(4) ◀ (Insert no.) 4947(a)(1) or to attach Sch B (Form 990, 990-EZ, or 990-PF) K Check | If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$5000,000 or more, file Form 990 instead of Form 990-EZ Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I) Contributions, gifts, grants, and similar amounts received 173,949. Program service revenue including government fees and contracts 2 Membership dues and assessments 3 490. Investment income 4 5 a Gross amount from sale of assets other than inventory 5 a b Less cost or other basis and sales expenses 5 b 5 c c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here a Gross revenue (not including \$ of contributions reported on line 1) b Less direct expenses other than fundraising expenses 6 b c Net income or (loss) from special events and activities (Subtract line-6b_from line 6a) 6 c 7 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from the 7a) 7 c Other revenue (describe ▶ Wage Reimbursement 8 10,500. Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 184,939. 9 10 Grants and similar amounts paid (attach schedule) 10 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 59,967. 13 Professional fees and other payments to independent contractors 13 475. 14 Occupancy, rent, utilities, and maintenance 14 29,080. Printing, publications, postage, and shipping 15 15 Other expenses (describe ▶SEE STMT 89,632. 16 16 17 Total expenses. Add lines 10 through 16 179,154. 17 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 5,785. Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 310,987. Zet. 20 Other changes in net assets or fund balances (attach explanation) 20 Net assets or fund balances at end of year Combine lines 18 through 20 316,772. 21 If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ Balance Sheets. (See the instructions for Part II) (A) Beginning of year (B) End of year 19,314. 22 Cash, savings, and investments 22 10,801. 305,096. 23 23 Land and buildings 277,172. 24 Other assets (describe ►SEE STMT 89,856. 24 109,889. 414,266. 25 Total assets 25 397,862. 26 Total liabilities (describe ► SEE STMT 103,279. 26 81,090. 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 310,987. 27 316,772.

For Privacy Act and Paperwork Reduction Act Notice, see the separate Instruction.

For	m 990-EZ(2009) Riverton Senior Hous	ing Inc		83	-021	L5485	Page 2
Pa	art III Statement of Program Service Accomp	lishments (See t	he instructions for Part	: III)		Expens	
	nat is the organization's primary exempt purpose? Seni					ed for section :	501(c)(3)
	scribe what was achieved in carrying out the organization's e			r.		1(c)(4) organiza	
	scribe the services provided, the number of persons benefite				1	4947(a)(1) tru:	SIS,
	Apartment building for low in						
	direction of the US Departmen						
	Development Twenty seven apar			<u> </u>			
	(Grants \$) If this amount includes			<u>, </u>	28a	179	,154.
29	(Grants \$) If this amount includes	Toreign grants, check he			200		,134.
25							
					1 1		
	(O	facility and the state of			00.		
	(Grants \$) If this amount includes	foreign grants, check ne	ere		29a		
30		 	··				
			······································				
				<u>- 11</u>			
	(Grants \$) If this amount includes	foreign grants, check he	ere	<u> </u>	30a		
31	Other program services (attach schedule)		•		1		
	(Grants \$) If this amount includes		ere	<u> </u>	31a		
	Total program service expenses (add lines 28a through 31		·		32	<u> 179</u>	,154.
Pa	art IV List of Officers, Directors, Trustees, an		List each one eve	·			
	(a) Name and address	(b) Title & average hours per week	(c) Compensation (if not paid,	(d) Cor employee	ntabutions (benefit plai) Expense count and
		devoted to position	`enter -0)		rred comp		r allowances
Kε	enneth Weber	President	_				
_	Riverton WY 82501	5	0				
<u>L</u> ε	ewis Maulik	Vice pres					
	Riverton WY 82501	1	0				
$\overline{\mathbf{E}}$	llen Strube	Sec/Treas		1			
	Riverton WY 82501	1	0	ļ			·····
JC	oan Gunnison	Director					
	Riverton WY 82501	1	0				
<u>Cl</u>	narles Wright	Director					
	Riverton WY 82501	1	0			,	
<u>Kı</u>	raig Skaggs	Director					
	Riverton WY 82501	1	0				
Μa	ark Sehnert	Director					
	Riverton WY 82501	1	0				
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Pal	(Note the statement requirements in the instructions for Part V)			
22	Did the comprised on any actually not require another to the IDS2 If IVes II ettech a detailed	<u></u>	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	33		<u> </u>
•	the changes	34		x
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	54		
•	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			i
а	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?	35a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	M	A
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		•	•
b	Did the organization fileForm 1120-POL for this year?	37b	}	X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employeer were	1	•	•
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	,		
39	Section 501(c)(7) organizations Enter	7		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities] '		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under] ^		
	section 4911 ►; section 4912 ►; section 4955 ►	,		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction			1
	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			1
	Schedule L, Part I	40b		X
С	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	1 3		-
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by	. 1		
	the organization			
е	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	40e	L	<u> x</u> _
41	List the states with which a copy of this return is filed The apprint the states with which a copy of this return is filed The apprint the states with which a copy of this return is filed The apprint the states with which a copy of this return is filed	7 0 5		700
42a		7-85 501	6-4	782
	At any time during the calendar year, did the organization have an interest in or a signature or other authority	<u> </u>		
b	over a financial account in a foreign country (such as a bank account, securities account, or other financial	ſ	Yes	No
		42b	162	X
	account)?	, 720		Α.
	See the instructions for exceptions and filing requirements foForm TD F 90-22.1, Report of Foreign Bank	ı		
	and Financial Accounts.	,		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	Ì	x
•	If "Yes," enter the name of the foreign country:	لنتيا	L	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu oForm 1041 - Check here		1	▶ 「
	and enter the amount of tax-exempt interest received or accrued during the tax year			L
		1	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	'	,	
	Form 990-EZ	44		x
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes,"		٠,	
	Form 990 must be completed instead of Form 990-EZ	45		X
	Form	990-E	Z (2	
			•	

Form 990-EZ (2009) Riverton Senior Housing Inc 83-0215 Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

`	All section 501(c)(3) organizations and section			•			
46 Did th	e organization engage in direct or inc					Yes	No
	dates for public office? If "Yes," comp	, , ,			46		X
47 Did th	e organization engage in lobbying ac	tivities? If "Yes," complete	Schedule C, Part II		47		X
48 Is the	organization a school as described in	n section 170(b)(1)(A)(ii)?	If "Yes," complete Sche	edule E	48		Х
49 a Did th	e organization make any transfers to	an exempt non-charitable	related organization?		49a		X
b If "Yes	s," was the related organization a sec	tion 527 organization?	_		49b	N	A
50 Comp	olete this table for the organization's f	ve highest compensated of	employees (other than	officers, directors, trustees an	d key emp	oyees) who
each	received more than \$100,000 of com	pensation from the organi	zation If there is none,	enter "None "			
	·· ·····			· · · · · · · · · · · · · · · · · · ·			
		(b) Title and average	(c) Compensation	(d) Contributions to	(e) Ex	pense	
(a) Nam	ne and address of each employee	hours per week		employee benefit plans &	accou		
	paid more than \$100,000	devoted to position		deferred compensation	other all	owand	æs
None							
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		_					
		-					
			···	 			
		-					
				 			
		-					
f Total av	ımber of other employees paid over \$	\$100,000 >					
None	me and address of each independen	t contractor paid more than	1 \$ 100,000	(b) Type of service	(c) Compo	ensau	OH .
None							
							,
		·					
d Total nu	umber of other independent contractor	rs each receiving over \$10	00 000)			
u jotal lie	Under penalties of penury, I declare that I have			tements, and to the best of my knowled			
	and belief, it is true, correct, and complete. De	·		•	,0		
		$ Q_{11}$. / /	i		
Cian	- Folewich	Malles	ン	1 7/23/1	0		
Sign	Signature of officer	110 ()		Date			
Here	Kenneth 1	Vebber F	resident	1			
	Type or print game and title						
	Preparer's	//)		ck if self Preparer's Ide	ntifying No	(See	instr)
Paid	signature Dec U	Harreson J	uly 192010 emp	oloyed ▶ P00	21876	9	
Preparer's Use Only	` ' \		& Co, CPA	EIN ▶83-	02390	05	
· · · · · · · · · · · · · · · ·	if self-employed), 205 S	South Broadway	Υ				
	address, and ZIP+4 River	ton WY 82501	<u>-</u>	Phone no ▶307	<u>-856-</u>	921	.4
May the IRS	discuss this return with the prepare	shown above? See instru	ictions		X Yes		No
				F	om 990-l	EZ (:	2009)

83-0215485

US 990 Oth	ner Expenses	<u> </u>		200
•	Expenses	Net investment	Adjusted net	Chantable
Description	per books	income	ıncome	purposes
dvertising	907.			
ffice Expenses	1,348.			
anagement Fee	12,090.			
dministrative Rent Free Unit	6,426.			
elephone	1,894.			
upplies	1,638.			
ontracts	15,464.			
epreciation	31,488.			
ortgage Insurance	320.			
roperty Insurance	5,830.			
ayroll Taxes	5,948.			
ond Insurance	284.			
icense	25.			
ortgage Interest ,	5,970.			
T.L.				
Total	89,632.			
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83-0215485

US 990	Other Assets		2009
	Beginning of year	End of year	
Description	book value	book value	FMV_
repaid Mortgage Insurance	4,243.	4,754.	
scrow Accounts	85,613.	105,135.	
Totals	89,856.	109,889.	
		1	

83-0215485

US 990	Other Liabilities		2009
•	Description	Beginning of year book amount	End of year book amount
Accounts Payable	Description	1,397.	1,019
Cenant Deposits in Tr	rust	6,420.	7,103
Mortgage Pavable		95,462.	72,968
Total	<u>'</u> C	103,279.	81,090
10101	•		