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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

2009Open to Public
Inspection

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

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization AHEPA OF MOBILE, INC.		D Employer identification number 63-0859667
		Doing Business As		
		Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephone number 251-661-2020
		3656 GOVERNMENT BOULEVARD		
		City or town, state or country, and ZIP + 4		G Gross receipts \$ 659,163.
MOBILE, AL 36693				H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: NICKOLAS M. STRATAS				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
3656 GOVERNMENT BOULEVARD, MOBILE, AL 36693				If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				H(c) Group exemption number ▶
J Website: ▶ N/A				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1984		M State of legal domicile AL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>HOUSING FOR LOW INCOME ELDERLY PERSONS</u>				
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)	11		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	11		
	5	Total number of employees (Part V, line 2a)	0		
	6	Total number of volunteers (estimate if necessary)	0		
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	0.		
	7b	Net unrelated business taxable income from Form 990-T, line 34	0.		
	Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
		9 Program service revenue (Part VIII, line 2g)			10,000.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)			647,796.		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,367.		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			659,163.		
Expenses		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
		14 Benefits paid to or for members (Part IX, column (A), line 4)			
		15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			143,750.
		16a Professional fundraising fees (Part IX, column (A), line 11e)			
		b Total fundraising expenses (Part IX, column (D), line 25) ▶			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)			473,326.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			617,076.	
	19 Revenue less expenses. Subtract line 18 from line 12			42,087.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)		1,733,037.	1,718,800.	
	22 Net assets or fund balances. Subtract line 21 from line 20		1,745,882.	1,689,558.	
			<12,845.>	29,242.	

Part II Signature Block

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: <u>Nick M Strat</u> Date: <u>11-08-10</u> NICKOLAS M. STRATAS, PRESIDENT Type or print name and title		
Paid Preparer's Use Only	Preparer's signature: <u>Kineathayford</u>	Date: <u>10/20/10</u>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 SMITH DUKES & BUCKALEW LLP 3800 AIRPORT BLVD MOBILE, AL 36608-1667		Preparer's identifying number (see instructions) EIN ▶ Phone no ▶ (251) 343-1200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

916,17 NE 10

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

THE MISSION OF AHEPA OF MOBILE, INC. IS TO PROVIDE AFFORDABLE HOUSING FOR LOW-INCOME ELDERLY AND DISABLED PERSONS, AND TO INSURE THAT THEY RECEIVE THE SERVICES DESIGNED TO MEET THEIR PHYSICAL AND SOCIAL NEEDS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 617,076. including grants of \$ 10,000.) (Revenue \$ 649,163.)
GOVERNMENT SUBSIDIZED HOUSING FOR THE LOW INCOME ELDERLY - 64 UNITS
AVAILABLE

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

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

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

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

4e Total program service expenses \$ 617,076.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	12 X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	12A Yes No X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	0	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	11	
1b Enter the number of voting members that are independent	11	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members; stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **AHEPA MANAGEMENT COMPANY - 317.845.3410**
7202 N. SHADELAND AVE. #100, INDIANAPOLIS, IN 46250

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NICK STRATAS PRESIDENT	0.50	X		X				0.	0.	0.
JIM LIGNOS V PRESIDENT	0.30	X		X				0.	0.	0.
NICK PALLES SECRETARY	0.30	X		X				0.	0.	0.
BILL CHAVERS DIRECTOR	0.30	X		X				0.	0.	0.
CHRIST COUMANIS DIRECTOR	0.30	X						0.	0.	0.
MARKIS FOROPOULOS DIRECTOR	0.30	X						0.	0.	0.
LOUIS LADAS TREASURER	0.30	X						0.	0.	0.
TED STRIGGLES DIRECTOR	0.30	X						0.	0.	0.
BOBBY FOROPOULOS DIRECTOR	0.30	X						0.	0.	0.
JOHN MORALIS DIRECTOR	0.30	X						0.	0.	0.
BERNARD QUINN DIRECTOR	0.30	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total								0.	0.	0.

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

3. Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Yes	No
-----	----

3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. NONE

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

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

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f		10,000.				
	Program Service Revenue	2 a RENTAL INCOME	Business Code	531110	646,260.	646,260.	
b LAUNDRY ROOM INCOME			531390	1,536.	1,536.		
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			647,796.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)			1,367.	1,367.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6 a Gross Rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			659,163.	649,163.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	107,302.	107,302.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,882.	4,882.		
9 Other employee benefits	23,723.	23,723.		
10 Payroll taxes	7,843.	7,843.		
11 Fees for services (non-employees):				
a Management	43,350.	43,350.		
b Legal	2,041.	2,041.		
c Accounting	8,052.	8,052.		
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	3,390.	3,390.		
13 Office expenses	10,107.	10,107.		
14 Information technology				
15 Royalties				
16 Occupancy	157,908.	157,908.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,295.	3,295.		
20 Interest	152,214.	152,214.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	71,545.	71,545.		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a SUPPORTIVE SERVICES EX	18,172.	18,172.		
b MISC OFFICE EXPENSES	3,252.	3,252.		
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	617,076.	617,076.	0.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	19,634.	1	3,787.
	2 Savings and temporary cash investments	437,251.	2	496,552.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	18,782.	9	21,854.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,723,289.		
	b Less: accumulated depreciation	10b 1,526,682.	1,257,370.	10c 1,196,607.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,733,037.	16	1,718,800.	
Liabilities	17 Accounts payable and accrued expenses	46,863.	17	54,840.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,680,127.	23	1,615,490.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	18,892.	25	19,228.
	26 Total liabilities. Add lines 17 through 25	1,745,882.	26	1,689,558.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	<12,845.>	27	29,242.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	<12,845.>	33	29,242.
34 Total liabilities and net assets/fund balances	1,733,037.	34	1,718,800.	

Form 990 (2009)

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning 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 from 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 activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2009

Part III 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 year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				10,000.	10,000.	20,000.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	581,370.	591,879.	609,018.	630,660.	647,796.	3060723.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	581,370.	591,879.	609,018.	640,660.	657,796.	3080723.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						3080723.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	581,370.	591,879.	609,018.	640,660.	657,796.	3080723.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,819.	13,617.	16,847.	9,193.	1,367.	53,843.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	12,819.	13,617.	16,847.	9,193.	1,367.	53,843.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)	594,189.	605,496.	625,865.	649,853.	659,163.	3134566.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	98.28 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	98.06 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	1.72 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	1.93 %

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 line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☐

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

► **Attach to Form 990. ► See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

AHEPA OF MOBILE, INC.

Employer identification number

63-0859667

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

1a Beginning of year balance

b Contributions

c Net investment earnings, gains, and losses

d Grants or scholarships

e Other expenditures for facilities and programs

f Administrative expenses

g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		333,833.		333,833.
b Buildings		2,093,501.	1,281,534.	811,967.
c Leasehold improvements				
d Equipment		295,955.	245,148.	50,807.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,196,607.

Schedule D (Form 990) 2009

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total (Col (b) must equal Form 990, Part X, col (B) line 12) ►		

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶		

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

1.	(a) Description of liability	(b) Amount
	Federal income taxes	
	MISCELLANEOUS CURRENT LIABILITIES	3,367.
	TENANT SECURITY DEPOSITS	15,861.
	Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	19,228.

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Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	659,163.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	617,076.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	42,087.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	42,087.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	659,163.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	659,163.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	659,163.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	617,076.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	617,076.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	617,076.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

AHEPA OF MOBILE, INC.

Employer identification number

63-0859667

FORM 990, PART VI, SECTION A, LINE 2: DIRECTORS MARKIS FOROPOULOS AND
BOBBY FOROPOULOS ARE SIBLINGS.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS PROVIDED TO
THE ORGANIZATION'S PRESIDENT WHO REVIEWS AND SIGNS THE RETURN.

FORM 990, PART VI, SECTION C, LINE 18: WHEN A REQUEST IS MADE, THE
ORGANIZATION MAKES HARD COPIES OR EMAILS THE REQUESTED INFORMATION.

FORM 990, PART VI, SECTION C, LINE 19: WHEN A REQUEST IS MADE, THE
ORGANIZATION MAKES HARD COPIES OR EMAILS THE REQUESTED INFORMATION.

FORM 990, PART XI, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

[illegible]

part ii Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
<div> <div> AHEPA 310, INC. - 63-0955243 </div> <div> 3656 GOVERNMENT BOULEVARD </div> <div> MOBILE, AL 36693 </div> </div>	<div> <div>PROVIDES LOW INCOME HOUSING</div> <div>TO THE ELDERLY.</div> </div>	<div> <div>ALABAMA</div> </div>	<div> <div>501(C)(3)</div> <div>LINE 7</div> </div>	<div> <div>501(c)(3)</div> </div>	
<div> <div> AHEPA 310-III, INC. - 57-0886811 </div> <div> 3656 GOVERNMENT BOULEVARD </div> <div> MOBILE, AL 36693 </div> </div>	<div> <div>PROVIDES LOW INCOME HOUSING</div> <div>TO THE ELDERLY.</div> </div>	<div> <div>ALABAMA</div> </div>	<div> <div>501(C)(3)</div> <div>LINE 7</div> </div>	<div> <div>501(c)(3)</div> </div>	
<div> <div> AHEPA 310-IV, INC. - 63-1039178 </div> <div> 3656 GOVERNMENT BOULEVARD </div> <div> MOBILE, AL 36693 </div> </div>	<div> <div>PROVIDES LOW INCOME HOUSING</div> <div>TO THE ELDERLY.</div> </div>	<div> <div>ALABAMA</div> </div>	<div> <div>501(C)(3)</div> <div>LINE 7</div> </div>	<div> <div>501(c)(3)</div> </div>	
<div> <div> AHEPA 310-V, INC. - 63-1080112 </div> <div> 3656 GOVERNMENT BOULEVARD </div> <div> MOBILE, AL 36693 </div> </div>	<div> <div>PROVIDES LOW INCOME HOUSING</div> <div>TO THE ELDERLY.</div> </div>	<div> <div>ALABAMA</div> </div>	<div> <div>501(C)(3)</div> <div>LINE 7</div> </div>	<div> <div>501(c)(3)</div> </div>	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

		(a) Name of other organization(s)		(b) Transaction type (a-r)	(c) Amount involved
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

AHEPA of Mobile, Inc.
Comprehensive Depreciation [Depreciation]
GAAP
For the Period July 1, 2009 to June 30, 2010

Asset ID	Selected Dates		Asset Balances			Depr Meth/Conv	Life Yr/Mo	Book Cost	Credit Reduction Amount	Depreciable Basis		Current & Accum Depreciation				Net Book Value		
	Placed in Service Date	Disposal Date	Beginning	Additions	Deletions					Ending	Net S178A & AFYD	Bus Use %	Prior Reported Depreciation	Depreciable Basis	Beginning Accum Depr		Current Depr & AFYD	Net Sec 178A
Class 1410 LAND																		
AHEPA 1000270	LAND		306,000.00	0.00	0.00	306,000.00	None	0 0	306,000.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	306,000.00
Subtotal 1410 LAND (1)			306,000.00	0.00	0.00	306,000.00			306,000.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	306,000.00
Class 1411 LAND IMPROVEMENTS																		
AHEPA 1000970	NEW CONCRETE CURBS		7,840.61	0.00	0.00	7,840.61	SL100FM	20 0	7,840.61	0.00	100.00	0.00	294.02	294.02	392.03	0.00	0.00	686.05
AHEPA 1000990	PARKING LOT REPAVED		19,992.80	0.00	0.00	19,992.80	SL100FM	20 0	19,992.80	0.00	100.00	0.00	83.30	83.30	999.64	0.00	0.00	1,082.94
Subtotal 1411 LAND IMPROVEMENTS (2)			27,833.41	0.00	0.00	27,833.41			27,833.41	0.00	100.00	0.00	377.32	377.32	1,391.67	0.00	0.00	1,768.99
Class 1420 BUILDINGS																		
AHEPA 1000010	APARTMENT BUILDING		1,725,695.99	0.00	0.00	1,725,695.99	SL100FM	40 0	1,725,695.99	0.00	100.00	0.00	1,026,445.87	1,026,445.87	43,142.40	0.00	0.00	1,689,588.27
AHEPA 1000020	4 FT ASPHALT PATH		6,499.13	0.00	0.00	6,499.13	SL100FM	40 0	6,499.13	0.00	100.00	0.00	3,669.34	3,669.34	162.48	0.00	0.00	2,667.31
AHEPA 1000030	SIGN		2,650.38	0.00	0.00	2,650.38	SL100FM	27 6	2,650.38	0.00	100.00	0.00	2,112.33	2,112.33	96.38	0.00	0.00	2,208.71
AHEPA 1000040	PATIO ROOF		4,500.00	0.00	0.00	4,500.00	SL100FM	27 6	4,500.00	0.00	100.00	0.00	3,531.89	3,531.89	163.64	0.00	0.00	3,695.53
AHEPA 1000050	BUILDING ADDITION		48,983.87	0.00	0.00	48,983.87	SL100FM	34 0	48,983.87	0.00	100.00	0.00	25,692.49	25,692.49	1,440.70	0.00	0.00	27,133.19
AHEPA 1000060	FLAG POLES		2,070.00	0.00	0.00	2,070.00	SL100FM	10 0	2,070.00	0.00	100.00	0.00	2,070.00	2,070.00	0.00	0.00	0.00	0.00
AHEPA 1000160	ELEVATORS		52,336.00	0.00	0.00	52,336.00	SL100FM	40 0	52,336.00	0.00	100.00	0.00	31,183.53	31,183.53	1,308.40	0.00	0.00	32,491.93
AHEPA 1000170	AIR CONDITIONING		105,732.00	0.00	0.00	105,732.00	SL100FM	40 0	105,732.00	0.00	100.00	0.00	62,998.65	62,998.65	2,643.30	0.00	0.00	65,641.95
AHEPA 1000180	FENCE		7,635.00	0.00	0.00	7,635.00	SL100FM	27 6	7,635.00	0.00	100.00	0.00	5,992.39	5,992.39	277.64	0.00	0.00	1,364.97
AHEPA 1000190	SECURITY SYSTEM		8,112.00	0.00	0.00	8,112.00	SL100FM	32 0	8,112.00	0.00	100.00	0.00	4,182.75	4,182.75	253.50	0.00	0.00	3,675.75
AHEPA 1000360	AIR CONDITIONERS - 8 UNITS		11,291.58	0.00	0.00	11,291.58	SL100FM	15 0	11,291.58	0.00	100.00	0.00	7,966.82	7,966.82	752.77	0.00	0.00	8,719.59
AHEPA 1000430	HEAT PUMPS		8,443.00	0.00	0.00	8,443.00	SL100FM	10 0	8,443.00	0.00	100.00	0.00	8,091.21	8,091.21	351.79	0.00	0.00	8,443.00
AHEPA 1000450	AIR CONDITIONING UNITS		22,230.00	0.00	0.00	22,230.00	SL100FM	10 0	22,230.00	0.00	100.00	0.00	19,080.75	19,080.75	2,223.00	0.00	0.00	21,303.75
AHEPA 1000510	FOUR AIR CONDITIONING UNITS		6,760.00	0.00	0.00	6,760.00	SL100FM	10 0	6,760.00	0.00	100.00	0.00	5,126.33	5,126.33	676.00	0.00	0.00	5,802.33
AHEPA 1000520	NEW CABINETS		8,953.00	0.00	0.00	8,953.00	SL100FM	10 0	8,953.00	0.00	100.00	0.00	6,416.32	6,416.32	895.30	0.00	0.00	7,311.62
AHEPA 1000530	ELEVATOR TELEPHONE		1,200.00	0.00	0.00	1,200.00	SL100FM	10 0	1,200.00	0.00	100.00	0.00	870.00	870.00	120.00	0.00	0.00	990.00
AHEPA 1000810	AC UNIT		1,450.00	0.00	0.00	1,450.00	SL100FM	10 0	1,450.00	0.00	100.00	0.00	290.00	290.00	145.00	0.00	0.00	1,015.00
AHEPA 1000820	AC UNIT		1,450.00	0.00	0.00	1,450.00	SL100FM	10 0	1,450.00	0.00	100.00	0.00	277.92	277.92	145.00	0.00	0.00	435.00
AHEPA 1000830	CONCRETE WALKWAY		10,435.00	0.00	0.00	10,435.00	SL100FM	20 0	10,435.00	0.00	100.00	0.00	1,000.02	1,000.02	521.75	0.00	0.00	1,027.08
AHEPA 1000880	KITCHEN CABINETS		11,750.00	0.00	0.00	11,750.00	SL100FM	40 0	11,750.00	0.00	100.00	0.00	416.15	416.15	293.75	0.00	0.00	8,913.23
AHEPA 1000890	AC UNIT		1,450.00	0.00	0.00	1,450.00	SL100FM	10 0	1,450.00	0.00	100.00	0.00	181.25	181.25	145.00	0.00	0.00	1,123.75
AHEPA 1000910	AC UNIT		1,450.00	0.00	0.00	1,450.00	SL100FM	10 0	1,450.00	0.00	100.00	0.00	157.08	157.08	145.00	0.00	0.00	326.25
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Printed 10/20/2010 11:08:23AM																		

Asset ID	Selected Dates		Asset Balances			Depreciable Basis				Current & Accum Depreciation				Net Book Value							
	Placed in Service Date	Disposal Date	Beginning	Additions	Deletions	Ending	Depr Meth/Conv	Life Yr Mo	Book Cost	Credit Reduction Amount	Bus Use %	Net S179A & AFD	Prior Reported Depreciation		Depreciable Basis	Beginning Accum Depr	Current Depr & AFD	Net Sec 179179A	Net Additions	Ending Accum Depr	
Class 1420 BUILDINGS																					
AHEPA 1000920	AC UNIT		1 450 00	0 00	0 00	1 450 00	SL100FM	10 0	1 450 00	0 00	100 00	0 00	157 08	1 450 00	157 08	145 00	0 00	0 00	0 00	302 08	1 147 92
AHEPA 1000930	FIVE TON AC UNIT		6 440 00	0 00	0 00	6 440 00	SL100FM	10 0	6 440 00	0 00	100 00	0 00	322 00	6 440 00	322 00	644 00	0 00	0 00	0 00	966 00	5 474 00
AHEPA 1000940	CAR DOOR RESTRICTORS FOR THREE ELEVATORS		5 418 96	0 00	0 00	5 418 96	SL100FM	10 0	5 418 96	0 00	100 00	0 00	135 47	5 418 96	135 47	541 90	0 00	0 00	0 00	677 37	4 741 59
AHEPA 1000950	HANDICAP RAMP AND NEW SIDEWALK		3 100 00	0 00	0 00	3 100 00	SL100FM	20 0	3 100 00	0 00	100 00	0 00	25 83	3 100 00	25 83	155 00	0 00	0 00	0 00	180 83	2 919 17
AHEPA 1000960	REMODEL KITCHENS FOR 16 UNITS		19 360 00	0 00	0 00	19 360 00	SL100FM	10 0	19 360 00	0 00	100 00	0 00	1 936 00	19 360 00	1 936 00	1 936 00	0 00	0 00	0 00	3 872 00	15 488 00
AHEPA 1001010	RHEEM AC UNIT		0 00	3 315 00	0 00	3 315 00	SL100FM	10 0	3 315 00	0 00	100 00	0 00	0 00	3 315 00	0 00	55 25	0 00	0 00	55 25	3 259 75	
AHEPA 1001020	RHEEM AC UNIT		0 00	3 340 00	0 00	3 340 00	SL100FM	10 0	3 340 00	0 00	100 00	0 00	0 00	3 340 00	0 00	55 67	0 00	0 00	55 67	3 284 33	
Subtotal 1420 BUILDINGS (29)			2 086 845 91	6 655 00	0 00	2 093 500 91			2 093 500 91	0 00	100 00	0 00	1 220 329 47	2 093 500 91	1 220 329 47	59 435 62	0 00	0 00	0 00	1 279 765 09	813 735 82
Class 1440 BUILDING EQUIP PORTABLE																					
AHEPA 1000070	OUTDOOR FURNITURE		628 57	0 00	0 00	628 57	DB100FM	7 0	628 57	0 00	100 00	0 00	628 57	0 00	628 57	0 00	0 00	0 00	0 00	628 57	0 00
AHEPA 1000080	TWO VCRS		641 98	0 00	0 00	641 98	DB100FM	7 0	641 98	0 00	100 00	0 00	641 98	0 00	641 98	0 00	0 00	0 00	0 00	641 98	0 00
AHEPA 1000090	ROCKERS		673 85	0 00	0 00	673 85	DB100FM	10 0	673 85	0 00	100 00	0 00	673 85	0 00	673 85	0 00	0 00	0 00	0 00	673 85	0 00
AHEPA 1000100	SIX PARK BENCHES		754 35	0 00	0 00	754 35	DB100FM	7 0	754 35	0 00	100 00	0 00	754 35	0 00	754 35	0 00	0 00	0 00	0 00	754 35	0 00
AHEPA 1000110	COLOR TELEVISION		1 500 00	0 00	0 00	1 500 00	DB100FM	5 0	1 500 00	0 00	100 00	0 00	1 500 00	0 00	1 500 00	0 00	0 00	0 00	0 00	1 500 00	0 00
AHEPA 1000120	60 FROSTFREE REFRIGERATORS		20 584 20	0 00	0 00	20 584 20	SL100FM	7 0	20 584 20	0 00	100 00	0 00	20 584 20	20 584 20	20 584 20	0 00	0 00	0 00	0 00	20 584 20	0 00
AHEPA 1000130	1 WATER COOLER		508 76	0 00	0 00	508 76	SL100FM	7 0	508 76	0 00	100 00	0 00	508 76	508 76	508 76	0 00	0 00	0 00	0 00	508 76	0 00
AHEPA 1000140	4 FROSTFREE REFRIGERATORS		1 564 20	0 00	0 00	1 564 20	SL100FM	10 0	1 564 20	0 00	100 00	0 00	1 564 20	1 564 20	1 564 20	0 00	0 00	0 00	0 00	1 564 20	0 00
AHEPA 1000150	TWO OUTSIDE LIGHT POLES		1 658 25	0 00	0 00	1 658 25	SL100FM	10 0	1 658 25	0 00	100 00	0 00	1 658 25	1 658 25	1 658 25	0 00	0 00	0 00	0 00	1 658 25	0 00
AHEPA 1000200	4 WASHERS & 4 DRYERS		4 023 20	0 00	0 00	4 023 20	SL100FM	5 0	4 023 20	0 00	100 00	0 00	4 023 20	4 023 20	4 023 20	0 00	0 00	0 00	0 00	4 023 20	0 00
AHEPA 1000210	APPLIANCES		19 914 00	0 00	0 00	19 914 00	SL100FM	5 0	19 914 00	0 00	100 00	0 00	19 914 00	19 914 00	19 914 00	0 00	0 00	0 00	0 00	19 914 00	0 00
AHEPA 1000220	GAZEBO		4 560 00	0 00	0 00	4 560 00	SL100FM	5 0	4 560 00	0 00	100 00	0 00	4 560 00	4 560 00	4 560 00	0 00	0 00	0 00	0 00	4 560 00	0 00
AHEPA 1000230	TWO TELEVISIONS		748 98	0 00	0 00	748 98	SL100FM	5 0	748 98	0 00	100 00	0 00	748 98	748 98	748 98	0 00	0 00	0 00	0 00	748 98	0 00
AHEPA 1000240	RADAR RANGE		106 99	0 00	0 00	106 99	SL100FM	5 0	106 99	0 00	100 00	0 00	106 99	106 99	106 99	0 00	0 00	0 00	0 00	106 99	0 00
AHEPA 1000300	12 GE ELECTRIC RANGES		2 903 76	0 00	0 00	2 903 76	SL100FM	5 0	2 903 76	0 00	100 00	0 00	2 903 76	2 903 76	2 903 76	0 00	0 00	0 00	0 00	2 903 76	0 00
AHEPA 1000370	GE RANGES		2 911 39	0 00	0 00	2 911 39	SL100FM	5 0	2 911 39	0 00	100 00	0 00	2 911 39	2 911 39	2 911 39	0 00	0 00	0 00	0 00	2 911 39	0 00
AHEPA 1000380	GE REFRIGERATORS		1 695 00	0 00	0 00	1 695 00	SL100FM	10 0	1 695 00	0 00	100 00	0 00	1 101 75	1 695 00	1 101 75	169 50	0 00	0 00	0 00	1 271 25	423 75
AHEPA 1000610	REFRIGERATORS		854 04	0 00	0 00	854 04	SL100HM	10 0	854 04	0 00	100 00	0 00	387 86	854 04	387 86	85 40	0 00	0 00	0 00	473 26	380 78
AHEPA 1000620	STORAGE BUILDING (23 OF COST)		2 508 44	0 00	0 00	2 508 44	SL100HM	10 0	2 508 44	0 00	100 00	0 00	1 160 14	2 508 44	1 160 14	250 84	0 00	0 00	0 00	1 410 98	1 097 46
AHEPA 1000650	Surge Protection Equipment and Installation		10 529 65	0 00	0 00	10 529 65	SL100FM	10 0	10 529 65	0 00	100 00	0 00	4 036 38	10 529 65	4 036 38	1 052 97	0 00	0 00	0 00	5 089 35	5 440 30
AHEPA 1000730	REFRIGERATOR		515 31	0 00	0 00	515 31	SL100FM	10 0	515 31	0 00	100 00	0 00	107 35	515 31	107 35	51 53	0 00	0 00	0 00	158 88	356 43
AHEPA 1000740	REFRIGERATOR		476 07	0 00	0 00	476 07	SL100FM	10 0	476 07	0 00	100 00	0 00	142 83	476 07	142 83	47 61	0 00	0 00	0 00	190 44	285 63
AHEPA 1000850	SCREEN IN GAZEBO		1 850 00	0 00	0 00	1 850 00	SL100FM	10 0	1 850 00	0 00	100 00	0 00	339 17	1 850 00	339 17	185 00	0 00	0 00	0 00	524 17	1 325 83

Asset ID	Selected Dates			Asset Balances			Depreciable Basis				Current & Accum Depreciation				Net Book Value																									
	Placed in Service Date	Disposal Date		Beginning	Additions	Deletions	Ending	Depr Meth/Conv	Life Yr Mo	Book Cost	Credit Reduction Amount	Bus Use %	Net S178/A & AFYD	Prior Reported Depreciation		Depreciable Basis	Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/19A	Net Additions Deletions	Ending Accum Depr																			
Subtotal 1440 BUILDING EQUIP PORTABLE (23)																						82,110.99	0.00	0.00	82,110.99	0.00	70,957.96	77,912.24	70,957.96	1,842.85	0.00	0.00	72,800.81	9,310.98						
Class 1450 FURNITURE PROJECT USE																																								
AHEPA 1000320	FURNISHINGS FOR COMMON AREA	6/19/1997	7,510.00	0.00	0.00	0.00	7,510.00	SL100FM	10.0	7,510.00	0.00	0.00	7,510.00	7,510.00	0.00	0.00	7,510.00	0.00	0.00	0.00																				
AHEPA 1000330	FURNISHINGS FOR COMMON AREA	9/5/1997	7,510.00	0.00	0.00	0.00	7,510.00	SL100FM	10.0	7,510.00	0.00	0.00	7,510.00	7,510.00	0.00	0.00	7,510.00	0.00	0.00	0.00																				
AHEPA 1000390	FURNITURE	5/25/1999	966.50	0.00	0.00	0.00	966.50	SL100FM	10.0	966.50	0.00	0.00	966.50	966.50	0.00	0.00	966.50	0.00	0.00	0.00																				
AHEPA 1001000	FURNITURE FOR COMMON AREAS	1/19/2010	0.00	4,127.00	0.00	0.00	4,127.00	SL100FM	10.0	4,127.00	0.00	0.00	4,127.00	0.00	206.35	0.00	206.35	3,920.65	0.00	3,920.65																				
Subtotal 1450 FURNITURE PROJECT USE (4)																						15,986.50	4,127.00	0.00	20,113.50	0.00	15,986.50	20,113.50	15,986.50	206.35	0.00	0.00	16,192.85	3,920.65						
Class 1460 FURNISHINGS																																								
BLINDS & SHADES																																								
AHEPA 1000250	9/16/1985	5,505.00	0.00	0.00	0.00	0.00	5,505.00	SL100FM	10.0	5,505.00	0.00	0.00	5,505.00	5,505.00	0.00	0.00	5,505.00	0.00	0.00	0.00																				
AHEPA 1000260	CARPET-CORRIDORS, COMMON AREA, 12U	1/1/1988	24,953.12	0.00	0.00	0.00	24,953.12	SL100FM	10.0	24,953.12	0.00	0.00	24,953.12	24,953.12	0.00	0.00	24,953.12	0.00	0.00	0.00																				
AHEPA 1000350	CARPET 11 UNITS	12/31/1998	8,244.72	0.00	0.00	0.00	8,244.72	SL100FM	10.0	8,244.72	0.00	0.00	8,244.72	8,244.72	0.00	0.00	8,244.72	0.00	0.00	0.00																				
AHEPA 1000400	CABINETS FOR COMMUNITY ROOM	6/9/1999	2,228.58	0.00	0.00	0.00	2,228.58	SL100FM	15.0	2,228.58	0.00	0.00	1,498.08	1,498.08	148.57	0.00	1,646.65	581.93	0.00	581.93																				
AHEPA 1000440	NEW CARPETS	12/15/1999	2,998.08	0.00	0.00	0.00	2,998.08	SL100FM	10.0	2,998.08	0.00	0.00	2,873.18	2,873.18	124.90	0.00	2,998.08	0.00	0.00	2,998.08																				
AHEPA 1000460	NEW CARPETS	12/15/2000	5,390.60	0.00	0.00	0.00	5,390.60	SL100FM	10.0	5,390.60	0.00	0.00	4,626.93	4,626.93	539.06	0.00	5,165.99	224.61	0.00	224.61																				
AHEPA 1000550	NEW CARPETS & VINYL	12/15/2001	11,835.64	0.00	0.00	0.00	11,835.64	SL100FM	10.0	11,835.64	0.00	0.00	8,975.33	8,975.33	1,183.56	0.00	10,158.89	1,676.75	0.00	1,676.75																				
AHEPA 1000590	NEW CARPET & VINYL	12/2/2003	7,687.08	0.00	0.00	0.00	7,687.08	SL100FM	5.0	7,687.08	0.00	0.00	7,687.08	7,687.08	0.00	0.00	7,687.08	0.00	0.00	7,687.08																				
AHEPA 1000600	NEW CARPET & VINYL	12/2/2004	6,516.86	0.00	0.00	0.00	6,516.86	SL100FM	5.0	6,516.86	0.00	0.00	6,516.86	6,516.86	0.00	0.00	6,516.86	0.00	0.00	6,516.86																				
AHEPA 1000630	CARPETING	6/14/2005	3,207.00	0.00	0.00	0.00	3,207.00	SL100HM	10.0	3,207.00	0.00	0.00	1,296.16	1,296.16	320.70	0.00	1,616.86	1,590.14	0.00	1,590.14																				
AHEPA 1000640	CARPETING	1/2/2005	12,657.50	0.00	0.00	0.00	12,657.50	SL100FM	10.0	12,657.50	0.00	0.00	5,695.88	5,695.88	1,265.75	0.00	6,961.63	5,695.87	0.00	5,695.87																				
AHEPA 1000660	Carpeting	11/1/2006	3,807.50	0.00	0.00	0.00	3,807.50	SL100FM	10.0	3,807.50	0.00	0.00	1,332.63	1,332.63	380.75	0.00	1,713.38	2,094.12	0.00	2,094.12																				
AHEPA 1000670	Cabinets B109, A202, A206	8/4/2005	2,848.50	0.00	0.00	0.00	2,848.50	SL100FM	10.0	2,848.50	0.00	0.00	1,115.66	1,115.66	284.85	0.00	1,400.51	1,447.99	0.00	1,447.99																				
AHEPA 1000760	CABINETS	8/4/2006	11,750.00	0.00	0.00	0.00	11,750.00	SL100FM	10.0	11,750.00	0.00	0.00	3,427.08	3,427.08	1,175.00	0.00	4,602.08	7,147.92	0.00	7,147.92																				
AHEPA 1000780	CABINETS	3/30/2007	11,750.00	0.00	0.00	0.00	11,750.00	SL100FM	10.0	11,750.00	0.00	0.00	2,741.67	2,741.67	1,175.00	0.00	3,916.67	7,833.33	0.00	7,833.33																				
AHEPA 1000790	CARPETING	12/2/2007	6,922.00	0.00	0.00	0.00	6,922.00	SL100FM	10.0	6,922.00	0.00	0.00	1,730.50	1,730.50	692.20	0.00	2,422.70	4,499.30	0.00	4,499.30																				
AHEPA 1000860	CARPETING	9/27/2007	1,492.00	0.00	0.00	0.00	1,492.00	SL100FM	10.0	1,492.00	0.00	0.00	273.53	273.53	149.20	0.00	422.73	1,069.27	0.00	1,069.27																				
AHEPA 1000870	CARPETING	12/12/2007	1,492.00	0.00	0.00	0.00	1,492.00	SL100FM	10.0	1,492.00	0.00	0.00	236.23	236.23	149.20	0.00	385.43	1,106.57	0.00	1,106.57																				
AHEPA 1000900	CARPETING	5/15/2008	1,558.00	0.00	0.00	0.00	1,558.00	SL100FM	10.0	1,558.00	0.00	0.00	181.77	181.77	155.80	0.00	337.57	1,220.43	0.00	1,220.43																				
Subtotal 1460 FURNISHINGS (19)																						132,844.18	0.00	0.00	132,844.18	0.00	88,911.41	132,844.18	88,911.41	7,744.54	0.00	0.00	96,655.95	36,188.23						
Class 1465 OFFICE EQUIPMENT & FURNIT																																								
AHEPA 1000280	DESK AND CHAIR	6/11/1990	1,245.08	0.00	0.00	0.00	1,245.08	SL100FM	7.0	1,245.08	0.00	0.00	1,245.08	1,245.08	0.00	0.00	1,245.08	0.00	0.00	0.00																				
AHEPA 1000290	PRINTER STAND	6/5/1990	160.33	0.00	0.00	0.00	160.33	DB100FM	7.0	160.33	0.00	0.00	160.33	160.33	0.00	0.00	160.33	0.00	0.00	0.00																				
AHEPA 1000300	COMPUTER (SOFTWARE)	7/31/1991	1,805.00	0.00	0.00	0.00	1,805.00	SL100FM	5.0	1,805.00	0.00	0.00	1,805.00	1,805.00	0.00	0.00	1,805.00	0.00	0.00	0.00																				
AHEPA 1000310	OFFICE FURNITURE																																							
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Asset ID	Selected Dates Placed in Service Disposal Date	Asset Balances				Depreciable Basis				Current & Accum Depreciation				Net Book Value					
		Beginning	Additions	Deletions	Ending	Depn Meth/Conv	Life Yr Mo	Book Cost	Credit Reduction Amount	Bus Use %	Net S179A & Prior Reported Depreciation AFTD	Depreciable Basis	Beginning Accum Depn		Current Depn AFTD	Net Sec 179/179A	Net Additions Deletions	Ending Accum Depn	
Class 1465 OFFICE EQUIPMENT & FURNIT																			
AHEPA1000340	1/2/1992 COMPUTER	8,254.57	0.00	0.00	8,254.57	SL100FM	10 0	8,254.57	0.00	100.00	0.00	8,254.57	8,254.57	0.00	0.00	0.00	0.00	8,254.57	0.00
AHEPA1000370	7/16/1996 GATEWAY COMPUTER - 2/3	3,159.96	0.00	0.00	3,159.96	SL100FM	5 0	3,159.96	0.00	100.00	0.00	3,159.96	3,159.96	0.00	0.00	0.00	0.00	3,159.96	0.00
AHEPA1000380	3/26/1999 COPIER	1,351.23	0.00	0.00	1,351.23	SL100FM	5 0	1,351.23	0.00	100.00	0.00	1,351.23	1,351.23	0.00	0.00	0.00	0.00	1,351.23	0.00
AHEPA1000470	3/21/1999 GATEWAY COMPUTER	1,155.50	0.00	0.00	1,155.50	SL100FM	7 0	1,155.50	0.00	100.00	0.00	1,155.50	1,155.50	0.00	0.00	0.00	0.00	1,155.50	0.00
AHEPA1000480	12/1/2000 GATEWAY COMPUTER	883.19	0.00	0.00	883.19	SL100FM	5 0	883.19	0.00	100.00	0.00	883.19	883.19	0.00	0.00	0.00	0.00	883.19	0.00
AHEPA1000490	2/1/2001 OFFICE FURNITURE	1,061.08	0.00	0.00	1,061.08	SL100FM	5 0	1,061.08	0.00	100.00	0.00	1,061.08	1,061.08	0.00	0.00	0.00	0.00	1,061.08	0.00
AHEPA1000540	2/15/2001 CANNON COPIER - PC1060	848.22	0.00	0.00	848.22	SL100FM	10 0	848.22	0.00	100.00	0.00	713.90	848.22	713.90	84.82	0.00	0.00	798.72	49.50
AHEPA1000680	4/15/2002 Folding Tables (12)	511.20	0.00	0.00	511.20	SL100FM	5 0	511.20	0.00	100.00	0.00	511.20	511.20	0.00	0.00	0.00	0.00	511.20	0.00
AHEPA1000690	2/16/2006 Dell Computer	657.18	0.00	0.00	657.18	SL100FM	10 0	657.18	0.00	100.00	0.00	224.54	657.18	224.54	65.72	0.00	0.00	290.26	366.92
AHEPA1000700	8/2/2005 Dell computer and printer	909.27	0.00	0.00	909.27	SL100FM	3 0	909.27	0.00	100.00	0.00	909.27	909.27	909.27	0.00	0.00	0.00	909.27	0.00
AHEPA1000710	11/14/2005 Toshiba Copier	1,012.27	0.00	0.00	1,012.27	SL100FM	3 0	1,012.27	0.00	100.00	0.00	1,012.27	1,012.27	1,012.27	0.00	0.00	0.00	1,012.27	0.00
AHEPA1000800	5/31/2006 DELL	2,375.15	0.00	0.00	2,375.15	SL100FM	5 0	2,375.15	0.00	100.00	0.00	1,504.26	2,375.15	1,504.26	475.03	0.00	0.00	1,979.29	395.86
Subtotal (16)	11/02/2007 1465 OFFICE EQUIPMENT & FURNIT	977.00	0.00	0.00	977.00	SL100FM	3 0	977.00	0.00	100.00	0.00	814.17	977.00	814.17	162.83	0.00	0.00	977.00	0.00
		26,366.23	0.00	0.00	26,366.23			26,366.23	0.00	0.00	0.00	24,765.55	26,205.90	24,765.55	788.40	0.00	0.00	25,553.95	812.28
Class 1470 MAINTENANCE EQUIPMENT																			
AHEPA1000410	5/25/1999 TWO VACUUM CLEANERS	621.30	0.00	0.00	621.30	SL100FM	7 0	621.30	0.00	100.00	0.00	621.30	621.30	621.30	0.00	0.00	0.00	621.30	0.00
AHEPA1000420	6/10/1999 PRESSURE WASHER	869.82	0.00	0.00	869.82	SL100FM	7 0	869.82	0.00	100.00	0.00	869.82	869.82	869.82	0.00	0.00	0.00	869.82	0.00
AHEPA1000840	10/12/2007 CARPET CLEANER	949.00	0.00	0.00	949.00	SL100FM	7 0	949.00	0.00	100.00	0.00	237.25	949.00	237.25	135.57	0.00	0.00	372.82	576.18
Subtotal (3)	10/12/2007 1470 MAINTENANCE EQUIPMENT (3)	2,440.12	0.00	0.00	2,440.12			2,440.12	0.00	0.00	0.00	1,728.37	2,440.12	1,728.37	135.57	0.00	0.00	1,863.94	576.18
Class 1480 VEHICLES																			
AHEPA1000560	2001 FORD BUS 10/26/2001	32,080.51	0.00	0.00	32,080.51	SL100FM	5 0	32,080.51	0.00	100.00	0.00	32,080.51	32,080.51	32,080.51	0.00	0.00	0.00	32,080.51	0.00
Subtotal (1)	1480 VEHICLES (1)	32,080.51	0.00	0.00	32,080.51			32,080.51	0.00	0.00	0.00	32,080.51	32,080.51	32,080.51	0.00	0.00	0.00	32,080.51	0.00
Grand Total																			
		2,712,507.85	10,782.00	0.00	2,723,289.85			2,723,289.85	0.00	0.00	0.00	1,455,137.09	2,412,930.77	1,455,137.09	71,545.00	0.00	0.00	1,526,882.09	1,196,607.76