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Return of Organization Exempt From Income Tax

2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

A For the 2010 calendar year, or tax year beginning OCT 1, 2010 and ending SEP 30, 2011

Form 990 header section containing organization name (REGIS HOUSE, INC.), EIN (59-2446131), address (2010 N.W. 7TH STREET, MIAMI, FL 33125), and principal officer (REV. FRANCISCO PEREZ-LERENA).

Part I Summary

Table with 19 rows detailing financial and governance information. Includes columns for Prior Year and Current Year. Total revenue is 1,005,362 and total expenses are 1,029,879.

Part II Signature Block

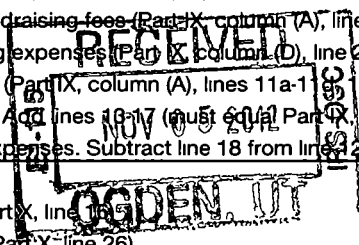
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing signatures of Manuel Fraga, Jr. (President/Chairman) and Shawn Tolley, C.P.A. (Preparer).

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

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SCANNED NOV 8 2012



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

X

1 Briefly describe the organization's mission:

THE AGENCY'S MISSION IS TO IMPROVE PEOPLES LIVES AND A HEALTHY COMMUNITY THROUGH FAMILY SUPPORT, MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.

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 X

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 X

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 \$ 384,672. including grants of \$) (Revenue \$) PREVENTION PROGRAMS:

POSITIVE OPTION PROGRAM -MELROSE WORKING FAMILY CENTER; SKILLS TRAINING PROGRAM; SERVICE LEADERSHIP AND RESILIENCY PROGRAM; AND ADOLESCENT & FAMILY CENTER - TOO GOOD FOR DRUGS & VIOLENCE AFTER SCHOOL.

4b (Code:) (Expenses \$ 318,257. including grants of \$) (Revenue \$) OUTPATIENT PROGRAMS:

FAMILY EMPOWERMENT & THERAPY PROGRAM - FAMILY EMPOWERMENT TARGETS ADOLESCENTS AND THEIR FAMILIES WHO ARE REFERRED BY LOCAL JUVENILE JUSTICE PROGRAMS TO PARTICIPATE AS A RESULT OF A FIRST TIME LEGAL OFFENSE.

4c (Code:) (Expenses \$ 48,535. including grants of \$) (Revenue \$) HEALTH CARE PROGRAMS:

DEVELOPMENT AND OUTREACH PROGRAM - PROVIDES INTENSIVE HEALTH OUTREACH SERVICES IN UNDER-SERVED COMMUNITIES AS A MEANS OF HELPING UNINSURED INDIVIDUALS GAIN ACCESS TO HEALTHCARE AND DETERMINE ELIGIBILITY FOR LOW COST HEALTH CARE.

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

(Expenses \$ 673. including grants of \$) (Revenue \$)

4e Total program service expenses 752,137.

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>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		
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>		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>		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>		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>		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>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a 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>	X	
b 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>	X	
c 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>		X
d 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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a 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>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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, Parts I and IV</i>		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, Parts II and IV</i>		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, Parts III and IV</i>		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>		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>		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>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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
b 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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 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)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, description, and Yes/No boxes. Includes questions 1a through 14b regarding Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, annual gross receipts, and various organizational requirements.

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		
1b Enter the number of voting members included in line 1a, above, who are independent		
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 governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant 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?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b 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?		
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
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 If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X
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 **FL**
- 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: **MIGUEL VELASQUEZ - (305)642-7600**
2010 NW 7 STREET, MIAMI, FL 33125

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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.

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
MARCO ANTONIO SUAREZ-BURGOS SECRETARY	2.00	X					0.	0.	0.	
REV. GUILLERMO GARCIA-TUNON MEMBER	2.00	X					0.	0.	0.	
REV. SEAN O' SULLIVIAN MEMBER	2.00	X					0.	0.	0.	
ANTONIO MORENO DE AYALA MEMBER	2.00	X					0.	0.	0.	
JORGE FERNANDEZ-CEBALLOS MEMBER	2.00	X					0.	0.	0.	
REV. FRANCISCO PEREZ-LERENA PRESIDENT/CHAIRMAN	2.00	X					0.	0.	0.	
MANUEL FRAGA, JR. CHIEF EXECUTIVE OFFICER	40.00			X			65,000.	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 (describe hours for related organizations in Schedule O)	(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 Sub-total							65,000.	0.	0.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							65,000.	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 **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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 582,050.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 413,376.					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f		995,426.				
	Program Service Revenue	2 a _____	Business Code				
b _____							
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		6.	6.			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
		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 _____	a						
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		995,432.	6.	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	65,000.		65,000.	
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	434,868.	397,629.	37,239.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	44,838.	44,838.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	136,022.	135,632.	390.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	13,109.		13,109.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,282.		16,282.	
23 Insurance	88,959.	9,196.	79,763.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a CONTRACT SERVICES - PER	109,717.	107,927.	1,790.	
b UTILITIES AND SERVICES	31,239.	14,744.	16,495.	
c REPAIRS AND MAINTENANCE	21,165.	3,649.	17,516.	
d PROFESSIONAL FEES	12,450.		12,450.	
e RENTALS	11,667.	6,269.	5,398.	
f All other expenses	44,563.	32,253.	12,310.	
25 Total functional expenses. Add lines 1 through 24f	1,029,879.	752,137.	277,742.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). 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	8,897.	1	44,738.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	56,642.	4	35,106.
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 481,389.		
	b Less: accumulated depreciation	10b 292,878.	203,979.	10c 188,511.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	76,173.	12	27,400.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,090.	15	3,273.
16 Total assets. Add lines 1 through 15 (must equal line 34)	349,781.	16	299,028.	
Liabilities	17 Accounts payable and accrued expenses	24,779.	17	81,800.
	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	134,677.	23	112,736.
	24 Unsecured notes and loans payable to unrelated third parties	75,000.	24	75,000.
	25 Other liabilities. Complete Part X of Schedule D	80,130.	25	31,847.
	26 Total liabilities. Add lines 17 through 25	314,586.	26	301,383.
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	35,195.	27	<2,355.>
	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	35,195.	33	<2,355.>	
34 Total liabilities and net assets/fund balances	349,781.	34	299,028.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	995,432.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,029,879.
3	Revenue less expenses. Subtract line 2 from line 1	3	<34,447.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	35,195.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<3,103.>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	<2,355.>

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 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 separate basis, consolidated 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		
3a		X
3b		

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization **REGIS HOUSE, INC.** Employer identification number **59-2446131**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h:
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1038841.	963,783.	901,536.	803,822.	752,355.	4460337.
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	1038841.	963,783.	901,536.	803,822.	752,355.	4460337.
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						4460337.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	1038841.	963,783.	901,536.	803,822.	752,355.	4460337.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,985.	528.	114.	34.	6.	7,667.
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.)	1,838.	12,828.	2,526.	10,894.	14.	28,100.
11 Total support. Add lines 7 through 10						4496104.
12 Gross receipts from related activities, etc. (see instructions)					12	1,311,472.
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 2010 (line 6, column (f) divided by line 11, column (f))	14	99.20	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	99.04	%
16a 33 1/3% support test - 2010. 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 checked="" type="checkbox"/>			
b 33 1/3% support test - 2009. 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 - 2010. 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 - 2009. 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) 2010

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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						
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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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 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

2010

Open to Public
Inspection

Name of the organization

REGIS HOUSE, INC.

Employer identification number

59-2446131

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).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

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	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	

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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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 the 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.

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

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

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

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

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

Part VI 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		106,995.		106,995.
b Buildings		345,800.	266,419.	79,381.
c Leasehold improvements				
d Equipment		6,594.	4,459.	2,135.
e Other		22,000.	22,000.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				188,511.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) DEPOSITS	3,837.	COST
(B) MEDICARE RECEIVABLES	19,629.	COST
(C) PREPAID EXPENSES	3,934.	COST
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	27,400.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) MEDICARE DISPOSITORY	17,079.
(3) DEFERRED REVENUE	14,768.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	31,847.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

Table with 10 rows and 3 columns. Row 1: Total revenue (Form 990, Part VIII, column (A), line 12) 995,432. Row 2: Total expenses (Form 990, Part IX, column (A), line 25) 1,029,879. Row 3: Excess or (deficit) for the year. Subtract line 2 from line 1 <34,447.> Row 7: Prior period adjustments <3,103.> Row 9: Total adjustments (net). Add lines 4 through 8 <3,103.> Row 10: Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 <37,550.>

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

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

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

Table with 5 main rows and sub-rows. Row 1: Total expenses and losses per audited financial statements. Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities, b Prior year adjustments, c Other losses, d Other (Describe in Part XIV). Row 3: Subtract line 2e from line 1. Row 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, b Other (Describe in Part XIV). Row 5: Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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.

Multiple horizontal lines provided for entering supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

REGIS HOUSE, INC.

Employer identification number

59-2446131

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SUPPORT, MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DAY TREATMENT PROGRAM:

SUPPORT ADULT SERVICES (S.A.S) IS AN INTENSIVE TREATMENT PROGRAM

OFFERED TO ADULTS AND THE GERIATRIC POPULATION TO ADDRESS CHRONIC

MENTAL ILLNESS THROUGH A COMPREHENSIVE PROGRAM.

EXPENSES \$ 673. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: PROVIDED UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

PRIOR PERIOD ADJUSTMENTS: -3,103.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

REGIS HOUSE, INC.

Employer identification number
59-2446131

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SUPPORT, MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.

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MENTAL ILLNESS THROUGH A COMPREHENSIVE PROGRAM.

EXPENSES \$ 673. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: PROVIDED UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

PRIOR PERIOD ADJUSTMENTS:

-3,103.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
56	BUILDINGS 2010 NW 7TH STREET, MIAMI	022591SL		20.0016		108,679.			108,679.	106,416.		2,263.
59	ALARM	050791SL		20.0016		930.			930.	906.		24.
60	IRON BARS	041991SL		20.0016		400.			400.	388.		12.
61	IRON BARS	033092SL		20.0016		390.			390.	364.		20.
62	IRON DOORS	112191SL		20.0016		704.			704.	661.		35.
63	IRON CAGE A/C	110891SL		20.0016		250.			250.	239.		11.
64	IRON CAGE A/C	080398SL		20.0016		650.			650.	395.		33.
65	ROOFING	022092SL		20.0016		3,660.			3,660.	3,401.		183.
66	ROOFING ELECTRICAL	080398SL		20.0016		3,515.			3,515.	2,138.		176.
67	INSTALLATION	091592SL		20.0016		6,221.			6,221.	5,624.		311.
68	CONDENSED UNITS	080398SL		20.0016		950.			950.	578.		48.
69	SANSON ELECTRICAL	090298SL		20.0016		2,000.			2,000.	1,208.		100.
70	LAMPS & SUPPLIES	031692SL		20.0016		1,837.			1,837.	1,701.		92.
71	AIR CONDITIONING	070692SL		20.0016		2,925.			2,925.	2,667.		146.
72	AIR CONDITIONING	080398SL		20.0016		2,000.			2,000.	1,217.		100.
73	A/C ENGINEERING	093098SL		20.0016		4,500.			4,500.	2,700.		225.
74	PLUMBING	033092SL		20.0016		3,020.			3,020.	2,794.		151.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
24	(D) DONATED FURNITURE	093001SL	SL	5.00	16	3,000.			3,000.	3,000.		0.
25	(D) DONATED FURNITURE	122302SL	SL	5.00	16	600.			600.	600.		0.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTUR MACHINERY & EQUIPMENT					3,600.		0.	3,600.	3,600.	0.	0.
1	(D) PROJECTOR 310	092591SL	SL	5.00	16	319.			319.	319.		0.
2	(D) SCREEN	092591SL	SL	5.00	16	119.			119.	119.		0.
3	(D) TV QUASAR 27"	041692SL	SL	5.00	16	478.			478.	478.		0.
4	(D) VCR SYMPHONIC	041692SL	SL	5.00	16	212.			212.	212.		0.
5	(D) COPIER OMEGA 1700	050192SL	SL	5.00	16	2,556.			2,556.	2,556.		0.
6	(D) TEXAS CALCULATOR	070392SL	SL	5.00	16	42.			42.	42.		0.
7	(D) FILM VIDEO 1/2" (4)	093092SL	SL	5.00	16	1,096.			1,096.	1,096.		0.
8	(D) MAILING/FOLDING/ SEALING EQ.	123092SL	SL	5.00	16	1,617.			1,617.	1,617.		0.
9	(D) AUDIOCASSETTES (20)	022493SL	SL	5.00	16	198.			198.	198.		0.
10	(D) TELEPHONE UNITS (2)	030893SL	SL	5.00	16	616.			616.	616.		0.
11	(D) SLUG: "NON-PROFIT ORGANIZ."	042893SL	SL	5.00	16	37.			37.	37.		0.
12	(D) SLUG: "ABILITY IN ACTION"	051093SL	SL	5.00	16	53.			53.	53.		0.
13	(D) WATER COOLER	071495SL	SL	5.00	16	273.			273.	273.		0.
14	(D) AT&T TELEPHONE UNITS (3)	091195SL	SL	5.00	16	915.			915.	915.		0.

028102 05-01-10 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT
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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
15	(D) 980M BROTHER FACSIMILE	092895SL		5.00	16	499.			499.	499.		0.
16	(D) TYPEWRITER CANNON	101395SL		5.00	16	98.			98.	98.		0.
17	(D) TELEPHONE SYSTEM-AT&T	121295SL		5.00	16	400.			400.	400.		0.
18	(D) REFRIGERATOR KELVINATOR	121097SL		5.00	16	519.			519.	519.		0.
19	(D) TELEPHONE EQUIPMENT	100199SL		5.00	16	3,291.			3,291.	3,291.		0.
20	(D) DIGITAL CAMERA	121100SL		5.00	16	300.			300.	300.		0.
21	(D) INTEGRATED VOICE MAIL SYSTEM	041107SL		5.00	16	1,650.			1,650.	990.		330.
22	(D) BINDING MACHINE	032608SL		5.00	16	76.			76.	38.		15.
23	(D) SAMSUNG PHONE SYSTEM	073108SL		5.00	16	2,650.			2,650.	1,148.		530.
26	(D) SOUND SYSTEM	112103SL		5.00	16	650.			650.	650.		0.
27	(D) 386 COMPUTER W/PRINTER	050291SL		5.00	16	3,700.			3,700.	3,700.		0.
28	(D) 486 COMPUTER (4)	080795SL		5.00	16	4,498.			4,498.	4,498.		0.
29	(D) HP LASERJET 5P PRINTER	081195SL		5.00	16	850.			850.	850.		0.
30	(D) HP LASERJET 4L PRINTER	081195SL		5.00	16	478.			478.	478.		0.
31	(D) PRINTERS	062200SL		5.00	16	992.			992.	992.		0.
32	(D) 2 DELL COMPUTERS	081300SL		5.00	16	2,770.			2,770.	2,770.		0.
33	(D) 2 - COMPUTERS GATEWAY GP5200	100199SL		3.00	16	368.			368.	368.		0.
34	(D) 1 - COMPUTER CP630	100199SL		3.00	16	290.			290.	290.		0.

028102
05-01-10

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
35	(D)1 - COMPUTER - 35GP6233	100199SL	3.00	16	647.				647.	647.		0.
36	(D)2 - COMPUTERS - 36GP6400	100199SL	4.00	16	2,040.				2,040.	2,040.		0.
37	(D)1 - COMPUTER - 37SL91LS	100199SL	4.00	16	1,724.				1,724.	1,724.		0.
38	(D)1 - COMPUTER - 38SL25LS	100199SL	4.00	16	1,609.				1,609.	1,609.		0.
39	(D)5 - COMPUTERS - 39COMPULAB 8GB	100199SL	4.00	16	6,004.				6,004.	6,004.		0.
40	(D)1 - COMPUTERS - 40COMPULAB	100199SL	4.00	16	103.				103.	103.		0.
41	(D) TELEPHONE SYSTEM	100199SL	3.00	16	1,757.				1,757.	1,757.		0.
42	(D) DELL COMPUTER	090201SL	4.00	16	1,899.				1,899.	1,899.		0.
43	(D) HP LASER JET 43PRINTER/COPIER 3320	051702SL	4.00	16	899.				899.	899.		0.
44	(D) HANDS ON MIAMI 44COMPUTER EQUIPMENT	073102SL	4.00	16	7,400.				7,400.	7,400.		0.
45	(D) HP LASER JET 45PRINTER/COPIER 3330	080202SL	4.00	16	699.				699.	699.		0.
46	(D) DELL DESK TOP 46COMPUTER	032503SL	4.00	16	968.				968.	968.		0.
47	(D) DELL DESK TOP 47COMPUTER	032503SL	4.00	16	758.				758.	758.		0.
48	(D) DELL LAP 48TOP/DOCKING STATION	051403SL	4.00	16	1,779.				1,779.	1,779.		0.
49	(D) DELL 49PRINTER/DESK TOP/SU	081203SL	4.00	16	1,096.				1,096.	1,096.		0.
50	(D) DELL DESK TOP 50COMPUTER	071304SL	4.00	16	679.				679.	679.		0.
51	(D) RECORD CAPITAL 51LEASE W/FDS	093005SL	4.00	16	20,779.				20,779.	20,779.		0.
52	HP PAVILION DV6500T 52CTO NB	111907SL	4.00	16	900.				900.	637.		225.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
53	(D) TRANSFER OF EQUIPMENT TITLE	120507SL		.000	16	1.			1.	1.		0.
54	PRINTER CANON IP90V	040608SL		4.00	16	268.			268.	167.		67.
91	SAMSUNG PHONE SYSTEM '09	090109SL		5.00	16	400.			400.	80.		80.
92	PROJECTOR EPSON EX51	073010SL		5.00	16	650.			650.	22.		130.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIP					85,669.		0.	85,669.	82,157.	0.	1,377.
57	LAND 2010 NW 7TH STREET, MIAMI	022591L				36,230.			36,230.			0.
58	MIAMI 622 NW 20TH AVE.,	091892L				70,765.			70,765.			0.
	* 990 PAGE 10 TOTAL LAND					106,995.		0.	106,995.	0.	0.	0.
	OTHER FORD 2003 - VAN											
55	(REGIS HOUSE PORTIO	011703SL		5.00	16	22,000.			22,000.	22,000.		0.
	* 990 PAGE 10 TOTAL OTHER					22,000.		0.	22,000.	22,000.	0.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR					564,064.		0.	564,064.	360,085.	0.	15,468.

028102 05-01-10 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT
- CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
56	BUILDINGS 2010 NW 7TH STREET, MIAMI	022591SL		20.00	16	108,679.			108,679.	106,416.		2,263.
59	ALARM	050791SL		20.00	16	930.			930.	906.		24.
60	IRON BARS	041991SL		20.00	16	400.			400.	388.		12.
61	IRON BARS	033092SL		20.00	16	390.			390.	364.		20.
62	IRON DOORS	112191SL		20.00	16	704.			704.	661.		35.
63	IRON CAGE A/C	110891SL		20.00	16	250.			250.	239.		11.
64	IRON CAGE A/C	080398SL		20.00	16	650.			650.	395.		33.
65	ROOFING	022092SL		20.00	16	3,660.			3,660.	3,401.		183.
66	ROOFING ELECTRICAL	080398SL		20.00	16	3,515.			3,515.	2,138.		176.
67	INSTALLATION	091592SL		20.00	16	6,221.			6,221.	5,624.		311.
68	CONDENSED UNITS	080398SL		20.00	16	950.			950.	578.		48.
69	SANSON ELECTRICAL	090298SL		20.00	16	2,000.			2,000.	1,208.		100.
70	LAMPS & SUPPLIES	031692SL		20.00	16	1,837.			1,837.	1,701.		92.
71	AIR CONDITIONING	070692SL		20.00	16	2,925.			2,925.	2,667.		146.
72	AIR CONDITIONING	080398SL		20.00	16	2,000.			2,000.	1,217.		100.
73	A/C ENGINEERING	093098SL		20.00	16	4,500.			4,500.	2,700.		225.
74	PLUMBING	033092SL		20.00	16	3,020.			3,020.	2,794.		151.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
75	TILES	032092SL		20.0016		5,460.			5,460.	5,051.		273.
76	DROP CEILING	031892SL		20.0016		750.			750.	698.		38.
77	WALL INSULATION	011492SL		20.0016		330.			330.	311.		17.
78	REMODELATION PAINTING (INT. & PAINTING (INT. & EXT.)	032392SL		20.0016		12,690.			12,690.	11,741.		635.
79	EXT.)	032092SL		20.0016		5,000.			5,000.	4,625.		250.
80	VERTICALS	041492SL		20.0016		130.			130.	117.		7.
81	REMODELATION	022796SL		20.0016		8,000.			8,000.	5,833.		400.
82	REMODELING PAVING OF PARKING LOT	082698SL		20.0016		3,624.			3,624.	2,188.		181.
83	COMPLETE	040296SL		20.0016		5,340.			5,340.	3,738.		267.
84	PAVING-PARKING LOT	020797SL		20.0016		2,100.			2,100.	1,437.		105.
85	BUILDING REMODELING	091399SL		20.0016		30,080.			30,080.	16,544.		1,504.
86	BUILDING REMODELING	093000SL		20.0016		44,802.			44,802.	26,880.		2,240.
87	BUILDING REMODELING BUILDING	093001SL		20.0016		44,657.			44,657.	22,329.		2,233.
88	IMPROVEMENTS DONATE	093001SL		20.0016		8,000.			8,000.	3,600.		400.
89	BUILDING REMODELING SURVEILLANCE CAMERA	093002SL		20.0016		30,556.			30,556.	13,751.		1,528.
90	SYSTEM	091009SL		20.0016		1,650.			1,650.	88.		83.
	* 990 PAGE 10 TOTAL					345,800.		0.	345,800.	252,328.	0.	14,091.
	BUILDINGS FURNITURE & FIXTURES											

2010 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
24	(D) DONATED FURNITURE	093001SL	SL	5.00	16	3,000.			3,000.	3,000.		0.
25	(D) DONATED FURNITURE	122302SL	SL	5.00	16	600.			600.	600.		0.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTUR MACHINERY & EQUIPMENT					3,600.		0.	3,600.	3,600.	0.	0.
1	(D) PROJECTOR 310	092591SL	SL	5.00	16	319.			319.	319.		0.
2	(D) SCREEN	092591SL	SL	5.00	16	119.			119.	119.		0.
3	(D) TV QUASAR 27"	041692SL	SL	5.00	16	478.			478.	478.		0.
4	(D) VCR SYMPHONIC	041692SL	SL	5.00	16	212.			212.	212.		0.
5	(D) COPIER OMEGA 1700	050192SL	SL	5.00	16	2,556.			2,556.	2,556.		0.
6	(D) TEXAS CALCULATOR	070392SL	SL	5.00	16	42.			42.	42.		0.
7	(D) FILM VIDEO 1/2"	093092SL	SL	5.00	16	1,096.			1,096.	1,096.		0.
8	(D) MAILING/FOLDING/ SEALING EQ.	123092SL	SL	5.00	16	1,617.			1,617.	1,617.		0.
9	(D) AUDIO CASSETTES (20)	022493SL	SL	5.00	16	198.			198.	198.		0.
10	(D) TELEPHONE UNITS (2)	030893SL	SL	5.00	16	616.			616.	616.		0.
11	(D) SLUG: "NON-PROFIT ORGANIZ."	042893SL	SL	5.00	16	37.			37.	37.		0.
12	(D) SLUG: "ABILITY IN ACTION"	051093SL	SL	5.00	16	53.			53.	53.		0.
13	(D) WATER COOLER	071495SL	SL	5.00	16	273.			273.	273.		0.
14	(D) AT&T TELEPHONE UNITS (3)	091195SL	SL	5.00	16	915.			915.	915.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
15	(D) 980M BROTHER FACSIMILE	092895SL	SL	5.00	16	499.			499.	499.		0.
16	(D) TYPEWRITER CANNON	101395SL	SL	5.00	16	98.			98.	98.		0.
17	(D) TELEPHONE SYSTEM-AT&T	121295SL	SL	5.00	16	400.			400.	400.		0.
18	(D) REFRIGERATOR KELVINATOR	121097SL	SL	5.00	16	519.			519.	519.		0.
19	(D) TELEPHONE EQUIPMENT	100199SL	SL	5.00	16	3,291.			3,291.	3,291.		0.
20	(D) DIGITAL CAMERA INTEGRATED VOICE	121100SL	SL	5.00	16	300.			300.	300.		0.
21	MAIL SYSTEM	041107SL	SL	5.00	16	1,650.			1,650.	990.		330.
22	BINDING MACHINE	032608SL	SL	5.00	16	76.			76.	38.		15.
23	SAMSUNG PHONE SYSTEM	073108SL	SL	5.00	16	2,650.			2,650.	1,148.		530.
26	(D) SOUND SYSTEM	112103SL	SL	5.00	16	650.			650.	650.		0.
27	(D) 386 COMPUTER W/PRINTER	050291SL	SL	5.00	16	3,700.			3,700.	3,700.		0.
28	(D) 486 COMPUTER (4)	080795SL	SL	5.00	16	4,498.			4,498.	4,498.		0.
29	(D) HP LASERJET 5P PRINTER	081195SL	SL	5.00	16	850.			850.	850.		0.
30	(D) HP LASERJET 4L PRINTER	081195SL	SL	5.00	16	478.			478.	478.		0.
31	(D) PRINTERS	062200SL	SL	5.00	16	992.			992.	992.		0.
32	(D) 2 DELL COMPUTERS	081300SL	SL	5.00	16	2,770.			2,770.	2,770.		0.
33	(D) 2 - COMPUTERS GATEWAY GP5200	100199SL	SL	3.00	16	368.			368.	368.		0.
34	(D) 1 - COMPUTER - GP630	100199SL	SL	3.00	16	290.			290.	290.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT - CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
35	(D)1 - COMPUTER - GP6233	100199SL	SL	3.00	16	647.			647.	647.		0.
36	(D)2 - COMPUTERS - GP6400	100199SL	SL	4.00	16	2,040.			2,040.	2,040.		0.
37	(D)1 - COMPUTER - SL91LS	100199SL	SL	4.00	16	1,724.			1,724.	1,724.		0.
38	(D)1 - COMPUTER - SL25LS	100199SL	SL	4.00	16	1,609.			1,609.	1,609.		0.
39	(D)5 - COMPUTERS - COMPULAB 8GB	100199SL	SL	4.00	16	6,004.			6,004.	6,004.		0.
40	(D)1 - COMPUTERS - COMPULAB	100199SL	SL	4.00	16	103.			103.	103.		0.
41	(D) TELEPHONE SYSTEM	100199SL	SL	3.00	16	1,757.			1,757.	1,757.		0.
42	(D) DELL COMPUTER	090201SL	SL	4.00	16	1,899.			1,899.	1,899.		0.
43	(D) HP LASER JET PRINTER/COPIER 3320	051702SL	SL	4.00	16	899.			899.	899.		0.
44	(D) HANDS ON MIAMI COMPUTER EQUIPMENT	073102SL	SL	4.00	16	7,400.			7,400.	7,400.		0.
45	(D) HP LASER JET PRINTER/COPIER 3330	080202SL	SL	4.00	16	699.			699.	699.		0.
46	(D) DELL DESK TOP COMPUTER	032503SL	SL	4.00	16	968.			968.	968.		0.
47	(D) DELL DESK TOP COMPUTER	032503SL	SL	4.00	16	758.			758.	758.		0.
48	(D) DELL LAP TOP/DOCKING STATION	051403SL	SL	4.00	16	1,779.			1,779.	1,779.		0.
49	(D) DELL PRINTER/DESK TOP/SU	081203SL	SL	4.00	16	1,096.			1,096.	1,096.		0.
50	(D) DELL DESK TOP COMPUTER	071304SL	SL	4.00	16	679.			679.	679.		0.
51	(D) RECORD CAPITAL LEASE W/FDS	093005SL	SL	4.00	16	20,779.			20,779.	20,779.		0.
52	HP PAVILION DV6500T TO NB	111907SL	SL	4.00	16	900.			900.	637.		225.

028102 05-01-10 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
53	(D) TRANSFER OF EQUIPMENT TITLE	120507SL		.000	16	1.			1.	1.		0.
54	PRINTER CANON IP90V	040608SL		4.00	16	268.			268.	167.		67.
91	SAMSUNG PHONE SYSTEM '09	090109SL		5.00	16	400.			400.	80.		80.
92	PROJECTOR EPSON EX51	073010SL		5.00	16	650.			650.	22.		130.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM					85,669.		0.	85,669.	82,157.	0.	1,377.
	LAND											
57	2010 NW 7TH STREET, MIAMI	022591L				36,230.			36,230.			0.
58	622 NW 20TH AVE., MIAMI	091892L				70,765.			70,765.			0.
	* 990 PAGE 10 TOTAL LAND					106,995.		0.	106,995.	0.	0.	0.
	OTHER											
55	FORD 2003 - VAN (REGIS HOUSE PORTIC)	011703SL		5.00	16	22,000.			22,000.	22,000.		0.
	* 990 PAGE 10 TOTAL OTHER					22,000.		0.	22,000.	22,000.	0.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR					564,064.		0.	564,064.	360,085.	0.	15,468.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	BUILDINGS								
56	2010 NW 7TH STREET, MIAMI	022591SL		20.00	108,679.		108,679.	108,679.	0.
59	ALARM	050791SL		20.00	930.		930.	930.	0.
60	IRON BARS	041991SL		20.00	400.		400.	400.	0.
61	IRON BARS	033092SL		20.00	390.		390.	384.	6.
62	IRON DOORS	112191SL		20.00	704.		704.	696.	8.
63	IRON CAGE A/C	110891SL		20.00	250.		250.	250.	0.
64	IRON CAGE A/C	080398SL		20.00	650.		650.	428.	33.
65	ROOFING	022092SL		20.00	3,660.		3,660.	3,584.	76.
66	ROOFING	080398SL		20.00	3,515.		3,515.	2,314.	176.
67	ELECTRICAL INSTALLATION	091592SL		20.00	6,221.		6,221.	5,935.	286.
68	CONDENSED UNITS	080398SL		20.00	950.		950.	626.	48.
69	SANSON ELECTRICAL	090298SL		20.00	2,000.		2,000.	1,308.	100.
70	LAMPS & SUPPLIES	031692SL		20.00	1,837.		1,837.	1,793.	44.
71	AIR CONDITIONING	070692SL		20.00	2,925.		2,925.	2,813.	112.
72	AIR CONDITIONING	080398SL		20.00	2,000.		2,000.	1,317.	100.
73	A/C ENGINEERING	093098SL		20.00	4,500.		4,500.	2,925.	225.
74	PLUMBING	033092SL		20.00	3,020.		3,020.	2,945.	75.
75	TILES	032092SL		20.00	5,460.		5,460.	5,324.	136.
76	DROP CEILING	031892SL		20.00	750.		750.	736.	14.
77	WALL INSULATION	011492SL		20.00	330.		330.	328.	2.
78	REMODELATION	032392SL		20.00	12,690.		12,690.	12,376.	314.
79	PAINTING (INT. & EXT.)	032092SL		20.00	5,000.		5,000.	4,875.	125.
80	VERTICALS	041492SL		20.00	130.		130.	124.	6.
81	REMODELATION	022796SL		20.00	8,000.		8,000.	6,233.	400.
82	REMODELING	082698SL		20.00	3,624.		3,624.	2,369.	181.
83	PAVING OF PARKING LOT	040296SL		20.00	5,340.		5,340.	4,005.	267.
84	COMPLETE PAVING-PARKING LOT	020797SL		20.00	2,100.		2,100.	1,542.	105.
85	BUILDING REMODELING	091399SL		20.00	30,080.		30,080.	18,048.	1,504.
86	BUILDING REMODELING	093000SL		20.00	44,802.		44,802.	29,120.	2,240.
87	BUILDING REMODELING	093001SL		20.00	44,657.		44,657.	24,562.	2,233.
88	BUILDING IMPROVEMENTS DONATED	093001SL		20.00	8,000.		8,000.	4,000.	400.
89	BUILDING REMODELING	093002SL		20.00	30,556.		30,556.	15,279.	1,528.
90	SURVEILLANCE CAMERA SYSTEM	091009SL		20.00	1,650.		1,650.	171.	83.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - REGIS HOUSE, INC.

Asset No	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	* 990 PAGE 10 TOTAL BUILDINGS				345,800.		345,800.	266,419.	10,827.
	FURNITURE & FIXTURES								
	MACHINERY & EQUIPMENT								
21	INTEGRATED VOICE MAIL SYSTEM	041107SL		5.00	1,650.		1,650.	1,320.	330.
22	BINDING MACHINE	032608SL		5.00	76.		76.	53.	15.
23	SAMSUNG PHONE SYSTEM	073108SL		5.00	2,650.		2,650.	1,678.	530.
52	HP PAVILLION DV6500T CTO NB	111907SL		4.00	900.		900.	862.	38.
54	PRINTER CANON IP90V	040608SL		4.00	268.		268.	234.	34.
91	SAMSUNG PHONE SYSTEM '09	090109SL		5.00	400.		400.	160.	80.
92	PROJECTOR EPSON EX51	073010SL		5.00	650.		650.	152.	130.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT				6,594.		6,594.	4,459.	1,157.
	LAND								
57	2010 NW 7TH STREET, MIAMI	022591L			36,230.		36,230.		0.
58	622 NW 20TH AVE., MIAMI	091892L			70,765.		70,765.		0.
	* 990 PAGE 10 TOTAL LAND OTHER				106,995.		106,995.	0.	0.
	FORD 2003 - VAN (REGIS HOUSE PORTION)	011703SL		5.00	22,000.		22,000.	22,000.	0.
	* 990 PAGE 10 TOTAL OTHER				22,000.		22,000.	22,000.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR				481,389.		481,389.	292,878.	11,984.