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990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 07/01/12, and ending 06/30/13

B Check if applicable

☐ Address change☐ Name change☐ Initial return☐ Terminated☐ Amended return☐ Application pending

C Name of organization

SHENANDOAH VALLEY COMMUNITY
RESIDENCES, INC.

D Employer identification number

54-1147961

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

301 N. CAMERON STREET

103

City, town or post office, state, and ZIP code

WINCHESTER

VA 22601-6018

E Telephone number

540-536-0336

G Gross receipts \$ 1,969,496

F Name and address of principal officer

ELLEN E. MURPHY

301 N. CAMERON STREET

WINCHESTER

VA 22601-6018

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3)☐ 501(c) ()

(insert no.)

☐ 4947(a)(1) or☐ 527

J Website WWW.SVCR.ORG

K Form of organization

☒ Corporation☐ Trust☐ Association☐ Other

L Year of formation 1980

M State of legal domicile VA

Part I Summary

1 Briefly describe the organization's mission or most significant activities

TO PROVIDE EDUCATION, TRAINING, AND A VARIETY OF SERVICES TO CITIZENS OF
THE COMMONWEALTH OF VIRGINIA WITH INTELLECTUAL DISABILITIES.2 Check this box ☐ 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)

3 8

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 8

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)

5 42

6 Total number of volunteers (estimate if necessary)

6 0

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 0

7b Net unrelated business taxable income from Form 990-T, line 34

7b 0

8 Contributions and grants (Part VIII, line 1h)

Prior Year

Current Year

45,164

20,419

9 Program service revenue (Part VIII, line 2g)

1,862,208

1,919,679

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

2,624

5,118

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

22,260

2,680

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

1,932,256

1,947,896

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

0

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

1,437,371

1,483,809

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

b Total fundraising expenses (Part IX, column (D), line 25)

351,718

309,395

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

1,789,089

1,793,204

18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)

143,167

154,692

19 Revenue less expenses - Subtract line 18 from line 12

1,718,319

1,862,326

20 Total assets (Part X, line 16)

249,897

233,408

21 Total liabilities (Part X, line 26)

1,468,422

1,628,918

22 Net assets or fund balances - Subtract line 21 from line 20

Beginning of Current Year

End of Year

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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

MATTHEW BRADLEY

Type or print name and title

TREASURER

Date

11/29/14

Paid

Preparer

Use Only

Print/Type preparer's name

G. MICHAEL CUNDIFF, CPA

Preparer's signature

Date

01/21/14

Check ☐ if PTIN

self-employed

P00426536

Firm's name

CUNDIFF & ASSOCIATES, CPA, P.C.

Firm's EIN

54-1462757

Firm's address

321 S LOUDOUN ST

Phone no

540-667-0441

Firm's address WINCHESTER, VA 22601-4637

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2012)

917

22

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:**TO PROVIDE EDUCATION, TRAINING, AND A VARIETY OF SERVICES TO CITIZENS OF THE COMMONWEALTH OF VIRGINIA WITH INTELLECTUAL DISABILITIES.****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 ☒ **X** 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 ☒ **X** No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ **1,478,209** including grants of \$) (Revenue \$)**THE EXCLUSIVE PURPOSE OF THE ORGANIZATION IS TO PROVIDE EDUCATION, TRAINING, RESIDENTIAL SERVICES, SUPERVISION AND SUPPORT TO INDIVIDUALS WITH INTELLECTUAL DISABILITIES WHO DESIRE TO LIVE IN THE NORTHERN SHENANDOAH VALLEY PLANNING DISTRICT.****THE ORGANIZATION OPERATES FOUR CONGREGATE GROUP HOMES WHICH PROVIDES FAMILY-LIKE HOUSING SITUATIONS FOR THE ADULTS WHO LIVE THERE:****THE BEEHCROFT GROUP HOME (SUPPORTS UP TO 8 MEN)
THE CHELSEA DRIVE GROUP HOME (SUPPORTS UP TO 8 WOMEN)
THE FORTRESS DRIVE GROUP HOME (SUPPORTS UP TO 6 MEN)****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 **1,478,209**

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)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II		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? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I (see instructions)		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? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		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? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		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? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
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 (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for 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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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 as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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	8		
Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
1b	8		
Enter the number of voting members included in line 1a, above, who are independent.			
2			X
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?			
3			X
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?			
4			X
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
5			X
Did the organization become aware during the year of a significant diversion of the organization's assets?			
6			X
Did the organization have members or stockholders?			
7a			X
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			
7b			X
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8			
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a		X	
The governing body?			
b		X	
Each committee with authority to act on behalf of the governing body?			
9			X
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.			

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

		Yes	No
10a			X
Did the organization have local chapters, branches, or affiliates?			
10b			
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a	X		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
12a	X		
Did the organization have a written conflict of interest policy? If "No," go to line 13.			
12b	X		
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
12c	X		
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.			
13	X		
Did the organization have a written whistleblower policy?			
14	X		
Did the organization have a written document retention and destruction policy?			
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?			
15a	X		
The organization's CEO, Executive Director, or top management official.			
15b	X		
Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a			X
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
16b			
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **RALPH COMBS, JR., EXEC. DIRECTOR 301 N. CAMERON STREET WINCHESTER VA 22601-6018 540-536-0336**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) ELLEN MURPHY PRESIDENT	1.00 0.00	X		X				0	0	0
(2) DAVID STEGMAIER 1ST VICE PRESIDENT	1.00 0.00	X		X				0	0	0
(3) TYLER L. THOMPSON 2ND VICE PRESIDENT	1.00 0.00	X		X				0	0	0
(4) MATTHEW BRADLEY TREASURER	2.00 0.00	X		X				0	0	0
(5) KATHY DUNCAN ASSISTANT TREASURER	1.00 0.00	X		X				0	0	0
(6) BONNIE SCHWARTZMAN SECRETARY	1.00 0.00	X		X				0	0	0
(7) A. KATHERINE GREGG IMMEDIATE PAST-PRES.	1.00 0.00	X		X				0	0	0
(8) STEVEN SHAFRAN DIRECTOR	1.00 0.00	X						0	0	0
(9)										
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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**

- 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 or individual 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. Report compensation for the calendar year ending with or within the organization's tax year

(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 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII. ☐

			(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	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	20,419			
	g Noncash contributions included in lines 1a-1f	\$	16,479			
	h Total. Add lines 1a-1f		20,419			
Program Service Revenue		Busn Code				
	2a GOVERNMENT FUNDING	623990	1,591,162	1,591,162		
	b CLIENT FEES	623990	235,850	235,850		
	c ORGANIZATIONAL FUNDING	623990	92,667	92,667		
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		1,919,679			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		5,118			5,118
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real 24,280 (ii) Personal				
	b Less rental exps	21,600				
	c Rental inc or (loss)	2,680				
	d Net rental income or (loss)		2,680	2,680		
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis & sales exps					
	c Gain or (loss)					
	d Net gain or (loss)					
	8a 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					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10a 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		Busn Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			1,947,896	1,922,359	0	5,118

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).

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

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	1,059,695	857,048	202,647	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,183	3,895	6,288	
9 Other employee benefits	328,852	277,878	50,974	
10 Payroll taxes	85,079	68,533	16,546	
11 Fees for services (non-employees)				
a Management				
b Legal	200		200	
c Accounting	3,400		3,400	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses	1,175	93	1,082	
14 Information technology				
15 Royalties				
16 Occupancy	42,165	32,857	9,308	
17 Travel	1,773	1,773		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	130	130		
20 Interest	11,700	11,700		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	60,555	60,437	118	
23 Insurance	14,761	9,352	5,409	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD	74,948	69,315	5,633	
b VEHICLE OPERATING COSTS	26,223	26,223		
c RENOVATIONS/REPAIRS	20,612	20,612		
d EQUIPMENT & SUPPLIES	20,115	15,662	4,453	
e All other expenses	31,638	22,701	8,937	
25 Total functional expenses. Add lines 1 through 24e	1,793,204	1,478,209	314,995	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	166,888	1	96,580
	2 Savings and temporary cash investments		2	95,920
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other 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) 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		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,777,220		
	b Less accumulated depreciation	10b 414,926	1,369,873	10c 1,362,294
	11 Investments—publicly traded securities	181,558	11	299,722
	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	7,810
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,718,319	16	1,862,326	
Liabilities	17 Accounts payable and accrued expenses	42,397	17	55,908
	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 Loans and other 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	207,500	23	147,500
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	30,000
	26 Total liabilities. Add lines 17 through 25	249,897	26	233,408
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,468,422	27	1,628,918
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ 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	1,468,422	33	1,628,918	
34 Total liabilities and net assets/fund balances	1,718,319	34	1,862,326	

Part XI Reconciliation of Net AssetsCheck 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	1,947,896
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,793,204
3	Revenue less expenses. Subtract line 2 from line 1	3	154,692
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,468,422
5	Net unrealized gains (losses) on investments	5	17,590
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-11,786
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,628,918

Part XII Financial Statements and ReportingCheck 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 **MODIFIED CASH**

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?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- b** Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- 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

- 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		

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

2012

Open to Public
Inspection

Name of the organization

**SHENANDOAH VALLEY COMMUNITY
RESIDENCES, INC.**

Employer identification number

54-1147961

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—Non-functionally integrated
- 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 monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	16,010	22,625	38,347	45,164	20,419	142,565
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	16,010	22,625	38,347	45,164	20,419	142,565
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)						90,193
6 Public support. Subtract line 5 from line 4						52,372

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	16,010	22,625	38,347	45,164	20,419	142,565
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-44,891	2,081	2,282	2,624	5,118	-32,786
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						109,779
12 Gross receipts from related activities, etc. (see instructions)					12	9,166,670
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 ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	47.71 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	52.40 %
16a 33 1/3% support test—2012. 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 ► ☒		
b 33 1/3% support test—2011. 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 ► ☐		
17a 10%-facts-and-circumstances test—2012. 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 ► ☐		
b 10%-facts-and-circumstances test—2011. 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 ► ☐		
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 ► ☐		

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2012. 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—2011. 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 ☐

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012**Open to Public
Inspection**

Name of the organization

**SHENANDOAH VALLEY COMMUNITY
RESIDENCES, INC.**

Employer identification number

54-1147961**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? ☐ Yes ☐ 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? ☐ Yes ☐ 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 | 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, and not on a historic structure listed in the National Register | 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 XIII, 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 XIII, 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 XIII

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 XIII 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 XIII. Check here if the explanation has been provided in Part XIII

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 current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %
 The percentages in lines 2a, 2b, and 2c should equal 100%

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 XIII the intended uses of the organization's endowment funds

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		258,231		258,231
b Buildings		1,169,988	191,891	978,097
c Leasehold improvements				
d Equipment		349,001	223,035	125,966
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,362,294

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

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. (Column (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) Book value
(1) Federal income taxes	
(2) CURRENT PORTION OF LONG-TERM DEBT	30,000
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	30,000

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII ☐

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

1	Total revenue, gains, and other support per audited financial statements		1	1,987,085
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	17,590	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	21,600	
e	Add lines 2a through 2d		2e	39,190
3	Subtract line 2e from line 1		3	1,947,895
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 XIII)	4b	1	
c	Add lines 4a and 4b		4c	1
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,947,896

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

1	Total expenses and losses per audited financial statements		1	1,814,803
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 XIII)	2d	21,600	
e	Add lines 2a through 2d		2e	21,600
3	Subtract line 2e from line 1		3	1,793,203
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 XIII)	4b	1	
c	Add lines 4a and 4b		4c	1
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,793,204

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

DIFFERENCE IN PRESENTATION OF RENTAL EXPENSE \$ 21,600

PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

ROUNDING \$ 1

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

DIFFERENCE IN PRESENTATION OF RENTAL EXPENSE \$ 21,600

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

BOOK / TAX DEPRECIATION DIFFERENCE \$ 1

Part XIII Supplemental Information (continued)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

2012

Open to Public
Inspection

**SHENANDOAH VALLEY COMMUNITY
RESIDENCES, INC.**

Employer identification number

54-1147961

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

THE WICKHAM TERRACE GROUP HOME (SUPPORTS UP TO 8 WOMEN)

THE ORGANIZATION ALSO OPERATES A SUPERVISED LIVING RESIDENTIAL SERVICE IN THE WINCHESTER AREA. CLIENTS ARE REQUIRED TO DISPLAY A GREATER LEVEL OF INDEPENDENCE IN THESE LESS-RESTRICTIVE APARTMENT ENVIRONMENTS.

IN ADDITION, THE ORGANIZATION PROVIDES SUPPORTIVE IN-HOME SERVICES TO INDIVIDUALS WITH INTELLECTUAL DISABILITIES IN THEIR OWN HOME OR APARTMENT.

THE ORGANIZATION IS COMMITTED TO:

- PROVIDING AN ARRAY OF STRUCTURED AND INCIDENTAL EDUCATIONAL AND TRAINING OPPORTUNITIES IN ADULT LIVING AND COMMUNITY INTEGRATION SKILLS THEREBY MAXIMIZING LEVELS OF INDEPENDENCE;
- OFFERING RESIDENTIAL TREATMENT ALTERNATIVES WHICH ARE LESS RESTRICTIVE THAN THE ENVIRONMENT IN WHICH THE CLIENT HAD PREVIOUSLY LIVED;
- DEMONSTRATING THAT INDIVIDUALS WITH MENTAL DISABILITIES CAN BE HABILITATED IN THE COMMUNITY AND LIVE AS NORMAL CITIZENS OF THE COMMUNITY;
- ENSURING EACH INDIVIDUAL'S HUMAN RIGHTS;
- PROVIDING INDIVIDUALS WITH THE SAME OPPORTUNITIES FOR LIFE PROCESSES AND EXPERIENCES AVAILABLE TO THE COMMUNITY AT LARGE; AND
- COORDINATING THE DELIVERY OF SERVICES, REFLECTIVE OF THE INDIVIDUAL STRENGTHS AND NEEDS OF EACH CLIENT, IN AN EFFICIENT AND RESPONSIBLE

Name of the organization

SHENANDOAH VALLEY COMMUNITY

Employer identification number

54-1147961

MANNER.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE DRAFT OF FORM 990 IS FIRST REVIEWED BY THE ADMINISTRATIVE STAFF. IT IS
THEN SUBMITTED TO THE BUDGET AND FINANCE COMMITTEE OF THE BOARD FOR THEIR
REVIEW. THE DRAFT IS THEN PRESENTED BY THE COMMITTEE TO THE BOARD FOR
THEIR APPROVAL PRIOR TO IT BEING SUBMITTED TO THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE POLICY REQUIRES BOARD MEMBERS AND STAFF TO ANNUALLY COMPLETE A CONFLICT
OF INTEREST QUESTIONNAIRE MAKING KNOWN THEIR AFFILIATIONS WITH INDIVIDUALS,
BUSINESSES, OR ORGANIZATIONS DOING BUSINESS WITH THE ORGANIZATION. IN
ADDITION, BOARD AND STAFF MUST REFRAIN FROM PARTICIPATION IN DISCUSSIONS
AFFECTING TRANSACTIONS BETWEEN THE ORGANIZATION AND INDIVIDUALS,
BUSINESSES, OR OTHER ORGANIZATIONS IN WHICH AN AFFILIATION HAS BEEN
IDENTIFIED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE EXECUTIVE DIRECTORS SALARY UPON HIRE WAS ESTABLISHED BY COMPARISON OF
SALARIES PAID TO EXECUTIVE DIRECTORS OF AREA NON-PROFIT ORGANIZATIONS AS
WELL AS A REVIEW OF SALARIES PAID ACROSS THAT STATE TO EXECUTIVE DIRECTORS
OF PROGRAMS SIMILAR TO THIS ORGANIZATION. DURING THE ENSUING YEARS, ANNUAL
SALARY INCREASES HAVE BEEN BASED UPON PERFORMANCE EVALUATIONS AND COST OF
LIVING ADJUSTMENTS. EVALUATIONS ARE PERFORMED BY MEMBERS OF THE PERSONNEL
COMMITTEE AND APPROVAL OF SALARY ACTION IS BY VOTE OF THE BOARD.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

Name of the organization

SHENANDOAH VALLEY COMMUNITY

Employer identification number

54-1147961

ALL SALARIES AND INCREASES ARE REVIEWED AND ESTABLISHED BY THE BOARD OF DIRECTORS FOR ALL KEY EMPLOYEES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION MAINTAINS GOVERNING DOCUMENTS, CONFLICT OF INTEREST AGREEMENTS, AND FINANCIAL STATEMENTS IN ITS MAIN OFFICE LOCATED AT 301 N. CAMERON STREET, SUITE 103, WINCHESTER, VA 22601-6018. THESE DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER

DIFFERENCE IN PRESENTATION OF RENTAL EXPENSE	\$	21,600
ROUNDING	\$	-1
DIFFERENCE IN PRESENTATION OF RENTAL EXPENSE	\$	-21,600
BOOK / TAX DEPRECIATION DIFFERENCE	\$	1

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

PRIOR PERIOD ADJUSTMENTS	\$	11,786
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DURING THE CURRENT FISCAL YEAR IT WAS NOTED THAT THERE WERE ITEMS THAT WERE MISSED IN PRIOR YEARS THAT NEEDED TO BE ADJUSTED. THE ADJUSTMENTS ARE AS FOLLOWS:

ITEMS THAT WERE EXPENSED IN FY '10 THAT NEEDED

TO BE CAPITALIZED.....\$ 21,046

DEPRECIATION RELATED TO THE ITEMS NOTED FROM

FY '10 THAT WAS NOT RECORDED.....(1,052)

PROPERTY THAT HAD AN INCORRECT DATE PLACED IN

SERVICE WHICH RESULTED IN 10 YEARS WORTH OF

Name of the organization

SHENANDOAH VALLEY COMMUNITY

Employer identification number

54-1147961

DEPRECIATION BEING MISSED.....(31,780)

TOTAL ADJUSTMENT

\$(11,786)

FYE: 6/30/2013

Asset	d	t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
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Location: AdministrativeApportion code: Equipment

6	LADDER	1/01/02	132.00	0.00	0.00	0.00	0.00	132.00	0.00	132.00	0.00	S/L	5.0
10	OKIDATA PRINTER	10/02/03	915.00	0.00	0.00	0.00	0.00	915.00	0.00	915.00	0.00	S/L	5.0
13	DIGITAL CAMERA	5/14/04	169.00	0.00	0.00	0.00	0.00	169.00	0.00	169.00	0.00	S/L	5.0
143	PC TOWER (TINA'S)	2/17/06	558.00	0.00	0.00	0.00	0.00	558.00	0.00	558.00	0.00	S/L	5.0
152	TOSHIBA eSTUDIO COPIER/PR	2/27/06	9,720.00	0.00	0.00	0.00	0.00	9,720.00	0.00	9,720.00	0.00	S/L	5.0
153	TOSHIBA eSTUDIO COPIER/PR	3/20/09	1,990.00	0.00	0.00	0.00	0.00	1,990.00	0.00	1,990.00	0.00	S/L	2.0
203	COMPUTER (CATHY'S)	2/25/11	590.00	0.00	0.00	0.00	0.00	157.00	118.00	275.00	315.00	S/L	5.0

Equipment

			14,074.00	0.00c	0.00	0.00	0.00	13,641.00	118.00	13,759.00	315.00		
			915.00	0.00	0.00	0.00	0.00	915.00	0.00	915.00	0.00		
			13,159.00	0.00c	0.00	0.00	0.00	12,726.00	118.00	12,844.00	315.00		

*Less: Dispositions and TransfersNet EquipmentApportion code: Furniture and fixtures

15	FOLDING CHAIRS	6/30/93	403.00	0.00	0.00	0.00	0.00	403.00	0.00	403.00	0.00	S/L	12.0
63	FILE CABINET	6/30/92	189.00	0.00	0.00	0.00	0.00	189.00	0.00	189.00	0.00	S/L	12.0

Furniture and fixtures

			592.00	0.00c	0.00	0.00	0.00	592.00	0.00	592.00	0.00		
			14,666.00	0.00c	0.00	0.00	0.00	14,233.00	118.00	14,351.00	315.00		
			915.00	0.00	0.00	0.00	0.00	915.00	0.00	915.00	0.00		
			13,751.00	0.00c	0.00	0.00	0.00	13,318.00	118.00	13,436.00	315.00		

Administrative*Less: Dispositions and TransfersNet AdministrativeLocation: BeechcroftApportion code: Buildings

17	HOUSE	9/06/96	127,127.00	0.00	0.00	0.00	0.00	50,318.00	3,178.18	53,496.18	73,630.82	S/L	40.0
18	IMPROVEMENTS	12/31/96	14,779.00	0.00	0.00	0.00	0.00	5,720.00	369.48	6,089.48	8,689.52	S/L	40.0
19	IMPROVEMENTS	9/22/00	6,068.00	0.00	0.00	0.00	0.00	1,791.00	151.70	1,942.70	4,125.30	S/L	40.0
20	IMPROVEMENTS	12/31/04	5,091.00	0.00	0.00	0.00	0.00	2,543.00	339.40	2,882.40	2,208.60	S/L	15.0
206	BATHROOM REMODEL	6/30/12	9,044.00	0.00	0.00	0.00	0.00	75.00	602.93	677.93	8,366.07	S/L	15.0
215	IMPROVEMENTS	6/30/09	37,644.00	0.00	0.00	0.00	0.00	2,823.00	941.10	3,764.10	33,879.90	S/L	40.0
225	RENOVATIONS	4/19/13	1,865.29	0.00c	0.00	0.00	0.00	0.00	7.77	7.77	1,857.52	S/L	40.0
			201,618.29	0.00c	0.00	0.00	0.00	63,270.00	5,590.56	68,860.56	132,757.73		

BuildingsApportion code: Equipment

21	OFFICE EQUIPMENT	12/31/81	760.00	0.00	0.00	0.00	0.00	760.00	0.00	760.00	0.00	S/L	12.0
33	WATER HEATERS	1/07/97	514.00	0.00	0.00	0.00	0.00	514.00	0.00	514.00	0.00	S/L	10.0
36	REFRIGERATOR	6/28/02	879.00	0.00	0.00	0.00	0.00	879.00	0.00	879.00	0.00	S/L	7.0
39	GOODWILL BEDS	11/14/03	323.00	0.00	0.00	0.00	0.00	323.00	0.00	323.00	0.00	S/L	7.0
40	DEFIBULATOR	2/20/04	1,150.00	0.00	0.00	0.00	0.00	1,150.00	0.00	1,150.00	0.00	S/L	5.0
156	DRYER	7/07/06	725.00	0.00	0.00	0.00	0.00	437.00	72.50	509.50	215.50	S/L	10.0
158	WASHER	9/15/06	969.00	0.00	0.00	0.00	0.00	582.00	24.23	606.23	362.77	S/L	10.0
185	DELL LAPTOP	12/18/09	723.00	0.00	0.00	0.00	0.00	368.00	144.60	512.60	210.40	S/L	5.0
187	RANGE	2/19/10	909.00	0.00	0.00	0.00	0.00	309.00	129.86	438.86	470.14	S/L	7.0
188	TOSHIBA LEXMARK COPIER	4/16/10	875.00	0.00	0.00	0.00	0.00	386.00	175.00	561.00	314.00	S/L	5.0
230	WHIRLPOOL WASHER	10/19/12	898.95	0.00c	0.00	0.00	0.00	0.00	59.93	59.93	839.02	S/L	10.0

FYE: 6/30/2013

Asset #	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Location: Beechcroft Apportion code: Equipment (continued)											
Equipment											
	*Less: Dispositions and Transfers		8,725.95	0.00c	0.00	5,708.00	606.12	6,314.12	2,411.83		
	Net Equipment		969.00	0.00	0.00	582.00	0.00	606.23	362.77		
			7,756.95	0.00c	0.00	5,126.00	606.12	5,707.89	2,049.06		
Apportion code: Furniture and fixtures											
60	BEDROOM FURNITURE	6/22/90	1,337.00	0.00	0.00	1,337.00	0.00	1,337.00	0.00	S/L	12.0
61	LAMPS AND END TABLES	6/29/90	230.00	0.00	0.00	230.00	0.00	230.00	0.00	S/L	12.0
69	DEHUMIDIFIER	8/15/03	154.00	0.00	0.00	154.00	0.00	154.00	0.00	S/L	5.0
70	TV	7/18/03	280.00	0.00	0.00	280.00	0.00	280.00	0.00	S/L	5.0
71	HOUSE FURNITURE	12/24/04	2,244.00	0.00	0.00	1,680.00	224.40	1,904.40	339.60	S/L	10.0
183	DINING TABLE AND CHAIRS	11/13/09	2,250.00	0.00	0.00	830.00	321.43	1,151.43	1,098.57	S/L	7.0
199	MICROWAVE	8/20/10	528.00	0.00	0.00	81.00	44.00	125.00	403.00	S/L	12.0
Furniture and fixtures			7,023.00	0.00c	0.00	4,592.00	589.83	5,181.83	1,841.17		
Apportion code: Land											
72	LAND	9/06/96	23,497.00	0.00	0.00	0.00	0.00	0.00	23,497.00	Land	0.0
Land			23,497.00	0.00c	0.00	0.00	0.00	0.00	23,497.00		
Apportion code: Transportation/delivery equipment											
75	2005 CHEVY ASTRO VAN	5/09/05	23,490.00	0.00	0.00	23,490.00	0.00	23,490.00	0.00	S/L	5.0
76	2012 DODGE	3/23/12	27,953.00	0.00	0.00	2,096.00	5,590.60	7,686.60	20,266.40	S/L	5.0
Transportation/delivery equipment			51,443.00	0.00c	0.00	25,586.00	5,590.60	31,176.60	20,266.40		
Beechcroft			292,307.24	0.00c	0.00	99,156.00	12,377.11	111,533.11	180,774.13		
*Less: Dispositions and Transfers			969.00	0.00	0.00	582.00	0.00	606.23	362.77		
Net Beechcroft			291,338.24	0.00c	0.00	98,574.00	12,377.11	110,926.88	180,411.36		
Location: Chelsea											
Apportion code: Buildings											
171	BUILDING	1/18/08	358,261.00	0.00	0.00	30,603.00	8,956.53	39,559.53	318,701.47	S/L	40.0
207	ENLARGED GARAGE ENTRANCE	6/30/12	2,831.00	0.00	0.00	3.00	70.78	73.78	2,757.22	S/L	40.0
Buildings			361,092.00	0.00c	0.00	30,606.00	9,027.31	39,633.31	321,458.69		
Apportion code: Equipment											
169	DEFIBRILATOR	4/18/08	1,245.00	0.00	0.00	799.00	249.00	1,048.00	197.00	S/L	5.0
173	REFRIGERATOR	9/12/08	615.00	0.00	0.00	326.00	87.86	413.86	201.14	S/L	7.0
174	FREEZER	9/12/08	569.00	0.00	0.00	301.00	81.29	382.29	186.71	S/L	7.0
175	TOSHIBA 126 COPIER	12/10/08	750.00	0.00	0.00	531.00	150.00	681.00	69.00	S/L	5.0
209	DRYER	12/23/11	574.00	0.00	0.00	51.00	82.00	133.00	441.00	S/L	7.0
210	WASHER	9/16/11	569.00	0.00	0.00	71.00	81.29	152.29	416.71	S/L	7.0
231	LEXMARK COPIER	10/19/12	875.00	0.00c	0.00	0.00	116.67	116.67	758.33	S/L	5.0
Equipment			5,197.00	0.00c	0.00	2,079.00	848.11	2,927.11	2,269.89		

Tax Asset Detail 7/01/12 - 6/30/13

Asset	d	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Location: Chelsea (continued)												
Apportion code: Furniture and fixtures												
167		GRAND HOME - FURNITURE	3/07/08	1,670.00	0.00	0.00	795.00	238.57	1,033.57	636.43	S/L	7.0
168		DINING ROOM TABLE	3/14/08	979.00	0.00	0.00	645.00	195.80	840.80	138.20	S/L	5.0
170		AREA RUGS	5/13/08	10,000.00	0.00	0.00	6,250.00	2,000.00	8,250.00	1,750.00	S/L	5.0
208		HEAT PUMP & AIR HANDLER	6/30/12	4,000.00	0.00	0.00	71.00	571.43	642.43	3,357.57	S/L	7.0
Furniture and fixtures												
				16,649.00	0.00c	0.00	7,761.00	3,005.80	10,766.80	5,882.20		
Apportion code: Land												
172		LAND	1/18/08	95,234.00	0.00	0.00	0.00	0.00	0.00	95,234.00	Land	0.0
Land												
				95,234.00	0.00c	0.00	0.00	0.00	0.00	95,234.00		
Apportion code: Transportation/delivery equipment												
202		12 PASSENGER VAN	10/20/10	29,478.00	0.00	0.00	9,826.00	5,895.60	15,721.60	13,756.40	S/L	5.0
224		2013 DODGE VAN	4/30/13	22,124.17	0.00c	0.00	0.00	737.47	737.47	21,386.70	S/L	5.0
Transportation/delivery equipment												
				51,602.17	0.00c	0.00	9,826.00	6,633.07	16,459.07	35,143.10		
		Chelsea		529,774.17	0.00c	0.00	50,272.00	19,514.29	69,786.29	459,987.88		
Location: Fortress Drive												
Apportion code: Buildings												
102		HOUSE	7/28/04	237,676.00	0.00	0.00	47,041.00	5,941.90	52,982.90	184,693.10	S/L	40.0
103		IMPROVEMENTS	12/31/04	4,661.00	0.00	0.00	2,332.00	310.73	2,642.73	2,018.27	S/L	15.0
211		BATHROOM & OFFICE REMOD	6/30/12	10,629.00	0.00	0.00	89.00	708.60	797.60	9,831.40	S/L	15.0
Buildings												
				252,966.00	0.00c	0.00	49,462.00	6,961.23	56,423.23	196,542.77		
Apportion code: Equipment												
38		DRYER	5/16/03	332.00	0.00	0.00	268.00	33.20	301.20	30.80	S/L	10.0
104		DEFIBULATOR	2/18/05	1,145.00	0.00	0.00	1,145.00	0.00	1,145.00	0.00	S/L	5.0
144		STAIR CHAIR	7/22/05	670.00	0.00	0.00	387.00	27.92	414.92	255.08	S/L	12.0
145		STAIR LIFT	7/29/05	2,014.00	0.00	0.00	1,162.00	83.92	1,245.92	768.08	S/L	12.0
159		WATER SOFTNER	12/09/06	1,645.00	0.00	0.00	913.00	164.50	1,077.50	567.50	S/L	10.0
161		PATIO TABLE & CHAIRS	6/29/07	723.00	0.00	0.00	300.00	60.25	360.25	362.75	S/L	12.0
176		AMISH SHED	12/19/08	2,795.00	0.00	0.00	659.00	186.33	845.33	1,949.67	S/L	15.0
184		DELL LAPTOP	12/18/09	685.00	0.00	0.00	348.00	137.00	485.00	200.00	S/L	5.0
189		LEXMARK COPIER	6/18/10	875.00	0.00	0.00	357.00	175.00	532.00	343.00	S/L	5.0
212		REFRIGERATOR	12/30/11	1,179.00	0.00	0.00	147.00	235.80	382.80	796.20	S/L	5.0
227		STAIR LIFT WITH WARRANTY	3/06/13	10,264.00	0.00c	0.00	0.00	285.11	285.11	9,978.89	S/L	12.0
Equipment												
				22,327.00	0.00c	0.00	5,686.00	1,389.03	7,075.03	15,251.97		
		*Less: Dispositions and Transfers		2,684.00	0.00	0.00	1,549.00	0.00	1,660.84	1,023.16		
Net Equipment												
				19,643.00	0.00c	0.00	4,137.00	1,389.03	5,414.19	14,228.81		
Apportion code: Furniture and fixtures												
105		KITCHEN EQUIPMENT	8/31/04	1,800.00	0.00	0.00	1,410.00	180.00	1,590.00	210.00	S/L	10.0
106		CABINET	9/15/04	839.00	0.00	0.00	567.00	83.90	650.90	188.10	S/L	10.0

Tax Asset Detail 7/01/12 - 6/30/13

Asset	t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
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Location: Fortress Drive | Apportion code: Furniture and fixtures (continued)

160		MATRESS SET	6/15/07	527 00	0.00	0.00	267.00	52.70	319.70	207.30	S/L	10.0
201		REFRIGERATOR	10/15/10	689 00	0.00	0.00	118.00	68.90	186.90	502.10	S/L	10.0
204		DISHWASHER	4/15/11	769.00	0.00	0.00	93.00	76.90	169.90	599.10	S/L	10.0
205		WASHER	6/17/11	1,040.00	0.00	0.00	108.00	104.00	212.00	828.00	S/L	10.0
213		LOVE SEAT	11/30/11	2,230.00	0.00	0.00	139.00	223.00	362.00	1,868.00	S/L	10.0
214		DINING ROOM SET	5/18/12	780.00	0.00	0.00	10.00	78.00	88.00	692.00	S/L	10.0

Furniture and fixtures

				8,674.00	0.00c	0.00	2,712.00	867.40	3,579.40	5,094.60		
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Apportion code: Land

108		LAND	7/28/04	45,000.00	0.00	0.00	0.00	0.00	0.00	45,000.00	Land	0.0
		Land		45,000.00	0.00c	0.00	0.00	0.00	0.00	45,000.00		

Apportion code: Transportation/delivery equipment

109		CHEVY 8 PASS VAN	12/20/04	22,882.00	0.00	0.00	22,882.00	0.00	22,882.00	0.00	S/L	5.0
178		2009 TOYOTA VA	2/21/09	24,535.00	0.00	0.00	16,357.00	4,907.00	21,264.00	3,271.00	S/L	5.0

Transportation/delivery equipment

				47,417.00	0.00c	0.00	39,239.00	4,907.00	44,146.00	3,271.00		
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Fortress Drive

				376,384.00	0.00c	0.00	97,099.00	14,124.66	111,223.66	265,160.34		
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*Less: Dispositions and Transfers

				2,684.00	0.00	0.00	1,549.00	0.00	1,660.84	1,023.16		
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Net Fortress Drive

				373,700.00	0.00c	0.00	95,550.00	14,124.66	109,562.82	264,137.18		
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Location: James Street

Apportion code: Buildings

191		BUILDING	5/05/11	58,408.00	0.00	0.00	1,703.00	1,460.20	3,163.20	55,244.80	S/L	40.0
219		INSULATION OF CRAWL SPACI	6/30/12	2,269.00	0.00	0.00	2.00	56.73	58.73	2,210.27	S/L	40.0
226		ROOF	6/30/13	3,142.00	0.00c	0.00	0.00	0.00	0.00	3,142.00	Memo	0.0

Buildings

				63,819.00	0.00c	0.00	1,705.00	1,516.93	3,221.93	60,597.07		
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Apportion code: Land

195		LAND	5/05/11	25,000.00	0.00	0.00	0.00	0.00	0.00	25,000.00	Land	0.0
		Land		25,000.00	0.00c	0.00	0.00	0.00	0.00	25,000.00		

James Street

				88,819.00	0.00c	0.00	1,705.00	1,516.93	3,221.93	85,597.07		
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Location: Supervised Apartments

Apportion code: Equipment

112		PHONES	6/19/89	241.00	0.00	0.00	241.00	0.00	241.00	0.00	S/L	12.0
113		VACUUMS	6/21/89	244.00	0.00	0.00	244.00	0.00	244.00	0.00	S/L	12.0
114		PHONES	6/22/89	203.00	0.00	0.00	203.00	0.00	203.00	0.00	S/L	12.0
115		PHONE INSTALL	6/27/89	103.00	0.00	0.00	103.00	0.00	103.00	0.00	S/L	12.0
119		ALARM FOR DEAF	11/06/92	155.00	0.00	0.00	155.00	0.00	155.00	0.00	S/L	12.0
125		WASHER	6/27/97	349.00	0.00	0.00	349.00	0.00	349.00	0.00	S/L	10.0
126		WASHER	4/16/98	450.00	0.00	0.00	450.00	0.00	450.00	0.00	S/L	10.0
127		WASHER	5/18/01	330.00	0.00	0.00	330.00	0.00	330.00	0.00	S/L	10.0

Asset #	d	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Location: Supervised Apartments Apportion code: Equipment (continued)												
131		DRYER	6/30/92	269.00	0.00	0.00	269.00	0.00	269.00	0.00	S/L	12.0
132		DRYER	9/04/91	302.00	0.00	0.00	302.00	0.00	302.00	0.00	S/L	7.0
134		DEFIBULATOR	2/20/04	1,150.00	0.00	0.00	1,150.00	0.00	1,150.00	0.00	S/L	5.0
228		LEXMARK COPIER	7/20/12	875.00	0.00c	0.00	0.00	160.42	160.42	714.58	S/L	5.0
232		HP LAPTOP COMPUTER	1/18/13	527.98	0.00c	0.00	0.00	44.00	44.00	483.98	S/L	5.0
Equipment				5,198.98	0.00c	0.00	3,796.00	204.42	4,000.42	1,198.56		
Apportion code: Furniture and fixtures												
135		FURNITURE	6/27/97	932.00	0.00	0.00	932.00	0.00	932.00	0.00	S/L	12.0
136		CURTAINS AND RODS	6/27/97	456.00	0.00	0.00	456.00	0.00	456.00	0.00	S/L	12.0
138		TABLES AND CHAIRS	5/31/94	150.00	0.00	0.00	150.00	0.00	150.00	0.00	S/L	12.0
139		SOFA	6/30/95	50.00	0.00	0.00	50.00	0.00	50.00	0.00	S/L	10.0
140		CHAIR	6/30/95	35.00	0.00	0.00	35.00	0.00	35.00	0.00	S/L	10.0
Furniture and fixtures				1,623.00	0.00c	0.00	1,623.00	0.00	1,623.00	0.00		
Apportion code: Transportation/delivery equipment												
99		2002 DODGE CARAVAN	6/26/02	17,939.00	0.00	0.00	17,939.00	0.00	17,939.00	0.00	S/L	5.0
142	d	1998 PLYMOUTH VOYAGER	6/14/01	13,927.00	0.00	0.00	13,927.00	0.00	13,927.00	0.00	S/L	5.0
162	d	2003 CHEVY ASTRO	7/20/07	16,259.00	0.00	0.00	12,872.00	2,709.83	15,581.83	677.17	S/L	5.0
163		2004 TOYOTA SIENA	7/12/07	21,354.00	0.00	0.00	21,177.00	177.00	21,354.00	0.00	S/L	5.0
Transportation/delivery equipment				69,479.00	0.00c	0.00	65,915.00	2,886.83	68,801.83	677.17		
*Less: Dispositions and Transfers				30,186.00	0.00	0.00	26,799.00	0.00	29,508.83	677.17		
Net Transportation/delivery equipment				39,293.00	0.00c	0.00	39,116.00	2,886.83	39,293.00	0.00		
Supervised Apartments				76,300.98	0.00c	0.00	71,334.00	3,091.25	74,425.25	1,875.73		
*Less: Dispositions and Transfers				30,186.00	0.00	0.00	26,799.00	0.00	29,508.83	677.17		
Net Supervised Apartments				46,114.98	0.00c	0.00	44,535.00	3,091.25	44,916.42	1,198.56		
Location: Wickham												
Apportion code: Buildings												
180		BUILDING	3/15/10	269,448.00	0.00	0.00	15,437.00	6,736.20	22,173.20	247,274.80	S/L	40.0
220		RENOVATIONS	6/30/10	21,044.90	0.00	0.00	1,052.24	526.12	1,578.36	19,466.54	S/L	40.0
Buildings				290,492.90	0.00c	0.00	16,489.24	7,262.32	23,751.56	266,741.34		
Apportion code: Equipment												
86		FREEZER	3/14/03	347.00	0.00	0.00	325.00	22.00	347.00	0.00	S/L	10.0
87		DEHUMIDIFIER	3/14/03	268.00	0.00	0.00	251.00	17.00	268.00	0.00	S/L	10.0
89		TV	6/13/03	259.00	0.00	0.00	259.00	0.00	259.00	0.00	S/L	5.0
90		DEFIBULATOR	2/20/04	1,150.00	0.00	0.00	1,150.00	0.00	1,150.00	0.00	S/L	5.0
93		ESTUDIO COPIER	9/29/04	919.00	0.00	0.00	919.00	0.00	919.00	0.00	S/L	5.0
149	d	WASHER	5/05/06	949.00	0.00	0.00	487.00	46.13	533.13	415.87	S/L	12.0
150		DRYER	6/09/06	725.00	0.00	0.00	365.00	60.42	425.42	299.58	S/L	12.0
179		TV	6/19/09	538.00	0.00	0.00	234.00	76.86	310.86	227.14	S/L	7.0
186		DELL LAPTOP	12/18/09	691.00	0.00	0.00	351.00	138.20	489.20	201.80	S/L	5.0
216		MICROWAVE	4/20/12	530.00	0.00	0.00	9.00	75.71	84.71	445.29	S/L	7.0

FYE: 6/30/2013

Asset	t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Location: Wickham Apportion code: Equipment (continued)												
221		REFRIGERATOR W/ 5 YR WARF	8/24/12	1,552.70	0.00c	0.00	0.00	184.85	184.85	1,367.85	S/L	7.0
229		DISHWASHER	8/24/12	576.90	0.00c	0.00	0.00	48.08	48.08	528.82	S/L	10.0
233		GE WASHER & 5 YEAR WARFA	2/15/13	713.95	0.00c	0.00	0.00	29.75	29.75	684.20	S/L	10.0
Equipment				9,219.55	0.00c	0.00	4,350.00	699.00	5,049.00	4,170.55		
		*Less: Dispositions and Transfers		949.00	0.00	0.00	487.00	0.00	533.13	415.87		
Net Equipment				8,270.55	0.00c	0.00	3,863.00	699.00	4,515.87	3,754.68		
Apportion code: Furniture and fixtures												
94		DESK FURNITURE	6/30/95	392.00	0.00	0.00	392.00	0.00	392.00	0.00	S/L	10.0
95		FURNITURE	8/31/95	12,647.00	0.00	0.00	12,647.00	0.00	12,647.00	0.00	S/L	10.0
96		RUG	8/23/02	218.00	0.00	0.00	210.00	8.00	218.00	0.00	S/L	10.0
148		ENTERTAINMENT CENTER (DC	12/22/05	750.00	0.00	0.00	412.00	62.50	474.50	275.50	S/L	12.0
155		SOFA AND LOVESEAT	4/06/07	1,350.00	0.00	0.00	703.00	135.00	838.00	512.00	S/L	10.0
200		WASHER & DRYER	10/15/10	1,048.00	0.00	0.00	149.00	87.33	236.33	811.67	S/L	12.0
217		FURNITURE	6/15/12	3,053.55	0.00	0.00	47.00	305.36	352.36	2,701.19	S/L	10.0
218		FIRE ALARM SYSTEM	6/30/12	2,845.00	0.00	0.00	51.00	406.43	457.43	2,387.57	S/L	7.0
222		SECTIONAL SOFA	2/15/13	2,269.90	0.00c	0.00	0.00	94.58	94.58	2,175.32	S/L	10.0
Furniture and fixtures				24,573.45	0.00c	0.00	14,611.00	1,099.20	15,710.20	8,863.25		
Apportion code: Land												
181		LAND	3/15/10	69,500.00	0.00	0.00	0.00	0.00	0.00	69,500.00	Land	0.0
Land				69,500.00	0.00c	0.00	0.00	0.00	0.00	69,500.00		
Apportion code: Transportation/delivery equipment												
101		2003 CHEVY TRACKER	9/30/03	18,346.00	0.00	0.00	18,346.00	0.00	18,346.00	0.00	S/L	5.0
223		2013 DODGE VAN	4/30/13	22,538.60	0.00c	0.00	0.00	751.29	751.29	21,787.31	S/L	5.0
Transportation/delivery equipment				40,884.60	0.00c	0.00	18,346.00	751.29	19,097.29	21,787.31		
		Wickham		434,670.50	0.00c	0.00	53,796.24	9,811.81	63,608.05	371,062.45		
		*Less: Dispositions and Transfers		949.00	0.00	0.00	487.00	0.00	533.13	415.87		
Net Wickham				433,721.50	0.00c	0.00	53,309.24	9,811.81	63,074.92	370,646.58		
Grand Total												
		Less: Dispositions and Transfers		1,812,921.89	0.00c	0.00	387,595.24	60,554.05	448,149.29	1,364,772.60		
				35,703.00	0.00	0.00	30,332.00	0.00	33,224.03	2,478.97		
Net Grand Total				1,777,218.89	0.00c	0.00	357,263.24	60,554.05	414,925.26	1,362,293.63		

Form **4562**Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2012Attachment
Sequence No **179**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

**SHENANDOAH VALLEY COMMUNITY
RESIDENCES, INC.**

Identifying number

54-1147961

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	60,555

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

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	60,555
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2012)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2