

Return of Organization Exempt From Income Tax

2000

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

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 2000 calendar year, or tax year period beginning 2000, and ending 20

- B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return

Please use IRS label or print or type. See Specific Instructions.

C Family Care Foundation 1373 Marron Valley Road Dulzura, CA 91917

D Employer identification number 33-0734917 E Telephone number 619-468-3191ext10 F Check If application pending

G Organization type (check only one) 501(c)(3) (insert no.) 527 OR 4947(a)(1)

Note: H and I are not applicable to section 527 orgs. H(a) Is this a group return filed for affiliates? Yes No

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

J Accounting method: Cash Accrual Other (specify)

H(c) Are all affiliates included? Yes No (if "No," attach a list. See instructions)

K Check here if the organization's gross receipts are normally not more than \$25,000.

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data.

I Enter 4-digit group exemption no. (GEN)

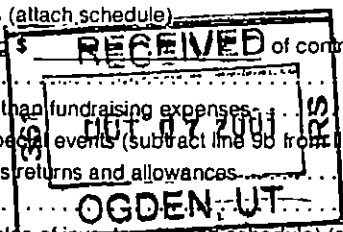
Some states require a complete return.

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16.)

REVENUE

Table with 21 rows and columns for revenue, expenses, and net assets. Includes sub-rows for contributions, program service revenue, membership dues, interest, dividends, rents, investment income, and special events. Total revenue is 850,328 and total expenses is 823,313.



SCANNED OCT 11 '01

EXPENSES

NET ASSETS

12



**Part IV Balance Sheets** (See Specific Instructions on page 23.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.		(A) Beginning of year		(B) End of year
ASSETS	45 Cash - non-interest-bearing	12,380	45	28,846
	46 Savings and temporary cash investments	65,350	46	62,332
	47a Accounts receivable	47a 1,450		
	b Less: allowance for doubtful accounts	47b	47c	1,450
	48a Pledges receivable	48a	48c	
	b Less: allowance for doubtful accounts	48b		
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach sch.)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	8,204	53	4,472
	54 Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	23,411
	55a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments - other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a 455,290			
b Less: accumulated depreciation (attach schedule) Stmt. 6	57b 35,714	442,931	57c 419,576	
58 Other assets (describe <b>See Statement 7</b> )		9,606	58 9,606	
<b>59 Total assets (add lines 45 through 58) (must equal line 74)</b>		<b>540,711</b>	<b>59 549,693</b>	
LIABILITIES	60 Accounts payable and accrued expenses	1,335	60	1,702
	61 Grants payable		61	
	62 Deferred revenue	6,521	62	3,378
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)	396,879	64b	393,051
	65 Other liabilities (describe <b>See Statement 8</b> )		65	-11,429
<b>66 Total liabilities (add lines 60 through 65)</b>		<b>404,735</b>	<b>66 386,702</b>	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	97,859	67	84,901
	68 Temporarily restricted	38,117	68	78,090
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	<b>73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)</b>		<b>135,976</b>	<b>73 162,991</b>
	<b>74 Total liabilities and net assets/fund balances (add lines 66 and 73)</b>		<b>540,711</b>	<b>74 549,693</b>

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See Specific Instructions, page 25.)

<b>a</b> Total revenue, gains, and other support per audited financial statements	<b>a</b> 850,328
<b>b</b> Amounts included on line <b>a</b> but not on line 12, Form 990:	
(1) Net unrealized gains on investments	
(2) Donated services and use of facilities	
(3) Recoveries of prior year grants	
(4) Other (specify):	
Add amounts on lines (1) through (4)	<b>b</b>
<b>c</b> Line <b>a</b> minus line <b>b</b>	<b>c</b> 850,328
<b>d</b> Amounts included on line 12, Form 990 but not on line <b>a</b> :	
(1) Investment expenses not included on line 6b, Form 990	
(2) Other (specify):	
Add amounts on lines (1) and (2)	<b>d</b>
<b>e</b> Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> )	<b>e</b> 850,328

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b> Total expenses and losses per audited financial statements	<b>a</b> 823,313
<b>b</b> Amounts included on line <b>a</b> but not on line 17, Form 990:	
(1) Donated services and use of facilities	
(2) Prior year adjustments reported on line 20, Form 990	
(3) Losses reported on line 20, Form 990	
(4) Other (specify):	
Add amounts on lines (1) through (4)	<b>b</b>
<b>c</b> Line <b>a</b> minus line <b>b</b>	<b>c</b> 823,313
<b>d</b> Amounts included on line 17, Form 990 but not on line <b>a</b> :	
(1) Investment expenses not included on line 6b, Form 990	
(2) Other (specify):	
Add amounts on lines (1) and (2)	<b>d</b>
<b>e</b> Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> )	<b>e</b> 823,313

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see Specific Instructions on page 25.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Grant Montgomery 1373 Marron Valley Road Dulzura, CA 91917	Program Dir. 40	36,000	0	0
Dr. Christine Mlot 10612 S. Morada Drive Orange, CA 92869	Treasurer/Dir 2	0	0	0
Robert Fernandez 1373 Marron Valley Road Dulzura, CA 91917	Director 2	0	0	0
Angela Smith 294945 Rancho Calif. Rd. Temecula, CA 92591	Director 2	0	0	0
Lawrence Corley 1373 Marron Valley Road Dulzura, CA 91917	Executive Dir 40	30,000	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes," attach schedule - see Specific Instructions on page 26.

Part VI Other Information (See Specific Instructions on page 26.)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity. 77 Were any changes made in the organizing or governing documents but not reported to the IRS? 78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? 80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 81a Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81. 82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 83a Did the organization comply with the public inspection requirements for returns and exemption applications? 84a Did the organization solicit any contributions or gifts that were not tax deductible? 85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12. b Gross receipts, included on line 12, for public use of club facilities. 87 501(c)(12) organizations. Enter: a Gross income from members or shareholders. b Gross income from other sources. 88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 30.7701-3? 89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0; section 4912 0; section 4955 0. b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? 90a List the states with which a copy of this return is filed California. b Number of employees employed in the pay period that includes March 12, 2000 (See instructions.) 91 The books are in care of Lawrence Corley Telephone no. 619-468-3191 Located at 1373 Marron valley Road, Delzura, CA ZIP code 91917 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year.

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 30.)

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash investments			14	732	
96 Dividends and interest from securities			14	3,646	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property			16	9,600	
99 Other investment income					
100 Gain/loss from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: <b>a Video Licensing</b>			15		8,187
<b>b Wedding Income</b>			1	1,000	
<b>c Commission Income</b>			2	590	
<b>d Retreat Income</b>			1		500
e					
104 Subtotal (add columns (B), (D), and (E))				15,568	8,687
105 Total (add line 104, columns (B), (D), and (E))					24,255

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 31.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	See Statement 9

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 31.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 31.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please 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 knowledge.

Date 10/2/01  page 14.) **Lawrence Corley**  
**Ex. Director**  
 Type or print name and title.

Date 10/2/01 Check if  Preparer's SSN or PTIN 610-110



**Part III** **Statements About Activities**

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? ..... If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. ▶ \$ <u>          N/A          </u> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	<b>1</b>	<b>X</b>
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
<b>a</b> Sale, exchange, or leasing of property? .....	<b>2a</b>	<b>X</b>
<b>b</b> Lending of money or other extension of credit? .....	<b>2b</b>	<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities? .....	<b>2c</b>	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? .....	<b>2d</b>	<b>X</b>
<b>e</b> Transfer of any part of its income or assets? ..... <u>See Statement 10.</u> If the answer to any question is "Yes," attach a detailed statement explaining the transactions.	<b>2e</b>	<b>X</b>
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc.? .....	<b>3</b>	<b>X</b>
<b>4a</b> Do you have a section 403(b) annuity plan for your employees? .....	<b>4a</b>	<b>X</b>
<b>b</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)		

**Part IV** **Reason for Non-Private Foundation Status** (See pages 2 through 5 of the instructions.)

- The organization is not a private foundation because it is: (Please check only ONE applicable box.)
- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
  - 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 5.)
  - 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
  - 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
  - 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state  
▶ \_\_\_\_\_
  - 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
  - 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
  - 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
  - 12  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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
  - 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) . . . . . ▶	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) . . . . .	595,747	337,655	357,013		1,290,415
<b>16</b> Membership fees received . . . . .					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose . . . . .		765	350		1,115
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . . . . .	3,738	5,545	3,613		12,896
<b>19</b> Net income from unrelated business activities not included in line 18 . . . . .					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf . . . . .					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . . . .					
<b>22</b> Other income. Attach a sch. Do not include gain or (loss) from sale of capital assets. See St. 11 . . . . .	16,633				16,633
<b>23</b> Total of lines 15 through 22 . . . . .	616,118	343,965	360,976		1,321,059
<b>24</b> Line 23 minus line 17 . . . . .	616,118	343,200	360,626		1,319,944
<b>25</b> Enter 1% of line 23 . . . . .	6,161	3,440	3,610		
<b>26</b> Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 . . . . . ▶					<b>26a</b> 26,399
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a government unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts. . . . . See Statement 12 . . . ▶					<b>26b</b> 357,726
c Total support for section 509(a)(1) test: Enter line 24, column (e) . . . . . ▶					<b>26c</b> 1,319,944
d Add: Amounts from column (e) for lines: 18 <u>12,896</u> 19 _____ 22 <u>16,633</u> 26b <u>357,726</u> . . . . . ▶					<b>26d</b> 387,255
e Public support (line 26c minus line 26d total) . . . . . ▶					<b>26e</b> 932,689
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . . . . . ▶					<b>26f</b> 70.66%
<b>27</b> Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: N/A (1999) _____ (1998) _____ (1997) _____ (1996) _____					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year: (1999) _____ (1998) _____ (1997) _____ (1996) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ . . . . . ▶					<b>27c</b> _____
d Add: Line 27a total . . . . . and line 27b total . . . . . ▶					<b>27d</b> _____
e Public support (line 27c total minus line 27d total) . . . . . ▶					<b>27e</b> _____
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) . . . . . ▶					<b>27f</b> _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . . . ▶					<b>27g</b> _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). . . . . ▶					<b>27h</b> _____ %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 5 of the instructions.)

**Part V Private School Questionnaire** (See page 5 of the instructions.)  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....	33a	
b	Admissions policies? .....	33b	
c	Employment of faculty or administrative staff? .....	33c	
d	Scholarships or other financial assistance? .....	33d	
e	Educational policies? .....	33e	
f	Use of facilities? .....	33f	
g	Athletic programs? .....	33g	
h	Other extracurricular activities? .....	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
34a	Does the organization receive any financial aid or assistance from a governmental agency? .....	34a	
b	Has the organization's right to such aid ever been revoked or suspended? .....	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
.....			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation. ....	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 7 of the instructions.)  
 (To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here  **a** if the organization belongs to an affiliated group.  
 Check here  **b** if you checked "a" above and "limited control" provisions apply.

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	37		
38 Total lobbying expenditures (add lines 36 and 37) . . . . .	38		
39 Other exempt purpose expenditures . . . . .	39		
40 Total exempt purpose expenditures (add lines 38 and 39) . . . . .	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>			
Not over \$500,000 . . . . .	20% of the amount on line 40 . . . . .		
Over \$500,000 but not over \$1,000,000 . . . . .	\$100,000 plus 15% of the excess over \$500,000 . . . . .		
Over \$1,000,000 but not over \$1,500,000 . . . . .	\$175,000 plus 10% of the excess over \$1,000,000 . . . . .	41	
Over \$1,500,000 but not over \$17,000,000 . . . . .	\$225,000 plus 5% of the excess over \$1,500,000 . . . . .		
Over \$17,000,000 . . . . .	\$1,000,000 . . . . .		
42 Grassroots nontaxable amount (enter 25% of line 41) . . . . .	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the instructions for lines 45 through 50 on page 9 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45 Lobbying nontaxable amount . . . . .					
46 Lobbying ceiling amount (150% of line 45(e)) . . . . .					
47 Total lobbying expenditures . . . . .					
48 Grassroots nontaxable amount . . . . .					
49 Grassroots ceiling amount (150% of line 48(e)) . . . . .					
50 Grassroots lobbying expenditures . . . . .					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
 (For reporting only by organizations that did not complete Part VI-A) (See page 9 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers . . . . .			
b Paid staff or management (include compensation in expenses reported on lines c through h.) . . . . .			
c Media advertisements . . . . .			
d Mailings to members, legislators, or the public . . . . .			
e Publications, or published or broadcast statements . . . . .			
f Grants to other organizations for lobbying purposes . . . . .			
g Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
i Total lobbying expenditures (add lines c through h) . . . . .			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



**Schedule B**  
(Form 990 or 990-EZ)

**Schedule of Contributors**

OMB No. 1545-0047

**2000**

Department of the Treasury  
Internal Revenue Service

Supplementary information for line 1d of Form 990 or  
line 1 of Form 990-EZ (see instructions)

Name of organization

Family Care Foundation

Employer identification number

33-0734917

Organization type (check one) - Section:  501(c)( 3 ) ◀ (enter number);  527 or  
 4947(a)(1) nonexempt charitable trust

**A Section 501(c)(7), (8), or (10) organizations** - Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year. (But see General rule below.) ..... ▶   
Enter here the total gifts received during the year for a religious, charitable, etc., purpose. ▶ \$

**Note:** This form is generally not open to public inspection except for section 527 organizations.

KFA For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ. Schedule B (Form 990 or 990-EZ) (2000)

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part I, Line 1d

SCHEDULE #1, Page 1 of 4

Not Open to Public Inspection

Direct Cash Contributions: > \$5,000

<u>Contributor's Name</u>	<u>Contributor's Address</u>	<u>Amount of Contr.</u>
		9,300.08
		18,000.00
		45,735.00
		8,400.00
		16,741.60
		12,220.00
		20,450.00
		5,950.00
		10,000.00
		30,000.00
		9,000.00

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part I, Line 1d

SCHEDULE #1, Page 2 of 4

Not Open to Public Inspection

Direct Cash Contributions: > \$5,000

Contributor's Name -----	Contributor's Address -----	Amount of Contr. -----
		42,810.00
		6,969.60
		6,995.00
		7,186.00
		10,000.00
		10,000.00
		10,000.00
		16,227.81
		8,000.00
		16,071.00

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part I, Line 1d

SCHEDULE #1, Page 3 of 4

Not Open to Public Inspection

Direct Cash Contributions: > \$5,000

Contributor's Name	Contributor's Address	Amount of Contr.
-----	-----	5,500.00



Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part 1, Line 1d

SCHEDULE #1, Page 4 of 4

Not Open to Public Inspection

Gifts in Kind: > \$5,000

Contributor's Name -----	Contributor's Address -----	Amount of Contr. -----
		16,216.19
		10,751.51
		26,954.62
		22,580.95
		175,500.00
		9,674.67
		5,000.00
		16,121.20
		7,515.00

Statement 10 (continued)  
 Schedule A, Part III, Line 2  
 Transactions with Trustees, Directors, Etc.

satisfactory site was found, but affordable financing could not be arranged. A Physician on the board of Directors had sufficient credit to purchase the property. With the Board Member in question recused from the voting, a quorum of the Board of Family Care Foundation voted to lease the property from the board member with an option on the property for 10 years or until affordable financing was available. The exact terms that the Board Member received were given to Family Care Foundation. No interest or other benefits are accruing to the Board Member.

Statement 11  
 Schedule A, Part IV-A, Line 22  
 Other Income

Description	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
Video Licencing	\$ 16,633	\$ 0	\$ 0	\$ 0	\$ 16,633
Total	\$ 16,633	\$ 0	\$ 0	\$ 0	\$ 16,633

Statement 12  
 Schedule A, Part IV-A, Line 26b  
 Excess Contributors

Not Open To Public Inspection

Contributor	1999	1998	1997	1996	Total
	\$ 150	\$ 32,150	\$ 29,300	\$ 0	\$ 61,600
	750	26,150	50,000	0	76,900
	14,771	17,067	5,663	0	37,501
	810	0	38,221	0	39,031
	42,840	42,568	52,422	0	137,830
	65,000	0	50,000	0	115,000
	4,750	22,000	33,052	0	59,802
	7,000	12,283	12,685	0	31,968
	31,525	3,559	0	0	35,084
	4,800	4,200	18,000	0	27,000
				Total	\$ 621,716
				Line 26a x 10	-263,990
				Excess Contributions	\$ 357,726

Client 5001

Family Care Foundation

33-0734917

9/28/01

12:15PM

Statement 1  
Form 990, Part II, Line 22  
Grants and Allocations

Cash Grants and Allocations:

Class of Activity:	Various	
Donee's Name:	Various- See Schedule #2	
Donee's Address:	Various	
	Various	
Relationship of Donee:	Various	
Amount Given:		\$ 303,187
<b>Total Cash Grants and Allocations</b>		<b>\$ 303,187</b>

Noncash Grants and Allocations:

Class of Activity:	Various	
Donee's Name:	Various-See Schedule #3	
Donee's Address:	Various	
	Various	
Relationship of Donee:	Various	
Description of Property:	Various	
Method used to Determine BV:	See Schedule #3	
Fair Market Value:		110,370
Method used to Determine FMV:	See Schedule #3	
Class of Activity:	Various	
Donee's Name:	Various-See Schedule #3	
Donee's Address:	Various	
	Various	
Relationship of Donee:	Various	
Description of Property:	Various	
Method used to Determine BV:	See Schedule #3	
Fair Market Value:		175,500
Method used to Determine FMV:	see Schedule #3	
Class of Activity:	Food Assistance	
Donee's Name:	Activated Ministries	
Donee's Address:	2120 W. Mission Rd., Suite G Escondido, Ca 92029	
Relationship of Donee:	none	
Description of Property:	Food Assistance	
Method used to Determine BV:	See Schedule #3	
Fair Market Value:		356
Method used to Determine FMV:	See Schedule #3	

<b>Total Noncash Grants and Allocations</b>	<b>\$ 286,226</b>
<b>Total Grants and Allocations</b>	<b>\$ 589,413</b>

Client 5001

Family Care Foundation

33-0734917

9/28/01

12:15PM

Statement 2  
Form 990, Part II, Line 23  
Specific Assistance to Individuals

Food, Shelter and Clothing .....	\$	731
Total	\$	<u>731</u>

Statement 3  
Form 990, Part II, Line 43  
Other Expenses

Other Expenses	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Bank Charges	\$ 1,714	1,285	429	
Contract Labor	495			495
Dir. Serv.-Retreat Support	14,063	14,063		
Educational Video Exp	3,478	3,478		
Insurance	6,211	4,968	1,243	
Investment Fees	298		298	
Marketing & Advertising	7,670	6,120	775	775
Payroll Fees	659	495	164	
Property Tax	4,932	3,288	1,644	
Publication	1,581	1,422	159	
Repairs	10,734	8,050	2,684	
Taxes & Licenses	65		65	
Utilities	7,763	7,763		
Vehicle Fuel & Maintenance	1,764	1,408	356	
Workers Compensation	1,464	1,098	366	
Total	<u>\$ 62,891</u>	<u>53,438</u>	<u>8,183</u>	<u>1,270</u>

Statement 4  
Form 990, Part III  
Organization's Primary Exempt Purpose

Family Care Foundation's purpose is to enhance the quality of life for all members of the community, especially those who are poor, suffering, or disadvantaged, and to provide knowledge and character building education to help strengthen families and children.

Client 5001

Family Care Foundation

33-0734917

9/28/01

12:15PM

Statement 5  
Form 990, Part III, Line a  
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
The Mission Support and Humanitarian Services Program seeks and provides funding for projects and missions operating under it's umbrella in forty-nine countries, including the USA. These projects provide services to a varied constituency, including guidance to youth at risk, collections and distribution of humanitarian aid, support for foreign and domestic Christian Missions, educational and vocational services for the handicapped, assistance to shelters and food kitchens, and comfort and care to the sick and elderly.	\$ 404,578	469,637
The Family Education Program provides knowledge and character building and guidance for youth, the leaders of tomorrow, to help strengthen them, their parents, and their communities. In 1997 Family Care Foundation licensed the worldwide distribution and broadcast three children's educational videoseries. The fee for service distribution and broadcast of these videos, emphasizing family values, is an important component of the Family Education Program.	0	28,172
The Spiritual Retreat and Missionary Training Program provides resources for training and continuing education of full time missionaries while in the USA on furlough. The program also provides resources for individuals to have a time of spiritual refreshing and retreat. If they choose, participants may study scripture, receive counsel, attend seminar and/or pray together. Training in business and administrative skills are also taught to maximize effectiveness for a missionary or humanitarian project. Missionary trainees and retreatants live on Family Care Foundation premises during their involvement with the program.	0	87,032
The Humanitarian Aid Program provides humanitarian aid to assist in natural disasters and other situations where emergency aid is essential to the well being of the population.	0	206,565
	<u>\$ 404,578</u>	<u>791,406</u>

Client 5001

Family Care Foundation

33-0734917

9/28/01

12:15PM

Statement 6  
Form 990, Part IV, Line 57  
Land, Buildings, and Equipment

Asset	Basis	Accum. Deprec.	Book Value
Furniture and fixtures	\$ 85,290	21,325	63,965
Buildings	370,000	14,389	355,611
Total	<u>\$ 455,290</u>	<u>35,714</u>	<u>419,576</u>

Statement 7  
Form 990, Part IV, Line 58  
Other Assets

	Ending
Lease Purchase Option .....	\$ 9,606
Total	<u>\$ 9,606</u>

Statement 8  
Form 990, Part IV, Line 65  
Other Liabilities

	Ending
Temporary Loss on Investments .....	\$ -11,429
Total	<u>\$ -11,429</u>

Statement 9  
Form 990, Part VIII  
Relationship of Activities to the Accomplishment of Exempt Purposes

Line #	Explanation of Activities
103a	This amount represents video sales, licensing fees and royalties on videos from the Family Education program. These videos provide knowledge concerning character building and guidance for youth. This directly related to Family Care Foundations exempt purpose detailed on Form 990, Part III, Statement 4.
103d	Retreat Income-Income from Spiritual Retreat Program to offset some of the costs.

Statement 10  
Schedule A, Part III, Line 2  
Transactions with Trustees, Directors, Etc.

In order to pursue the Spiritual Retreat and Missionary Training Program, Family Care Foundation conducted a thorough search for a headquarters. A

Statement 13

Form 990, Part IV, Line 64b  
Other Notes Payable

Line 64b consists of 2 Capital Leases Payable.

Capital Lease Payable-Brookside Farms-----\$329,202

Capital Lease Payable-Furniture & Fixtures--\$ 63,849

Total Other Notes Payable. \$393,051

These leases are with a member of the Board of Directors of Family Care Foundation. This relationship is explained in more detail in Statement 10.

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 1 of 16

I. Cash Grants and Allocations:

Missionary Support for Missions Providing:  
Services to the Aged and Infirm

E. Taiwan Family Mission  
Nicholas Wright & Pietro Verotto  
Bei Cheng Jair 277 Lane, Number 78  
Lo Tung City, Ilan Hsien 70401, TAIWAN... \$459.30

Total \$459.30

Missionary Support for Missions Providing:  
Bible/Christian Education

To China With His Love  
Dorothy Donohue  
C/o Nancy Wood  
PO Box 205  
Taichung, TAIWAN \$388.00

Teaching the Bible to the Chinese  
Marie-Paule Ramond & Erhard Sturm  
GPO Box 1458  
Macau (ROC), CHINA \$2,657.50

Total \$3,045.50

Missionary Support for Missions Providing:  
Broadcast Ministries

Africa Radio Ministry  
Christopher & Yoshiko Carruthers  
PO Box 29292  
Kampala, UGANDA \$1,755.00

Total \$1,755.00



Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 2 of 16

Missionary Support for Missions Providing:  
Children's Educational A/V

Casa Cumbre Presentations  
Douglas & Maria Mickle  
AP 18-1431, Correos Miraflores  
Lima 41, PERU

\$15,782.40

Total

\$15,782.40

Missionary Support for Missions Providing:  
Counseling

Family Services, Bangalore  
Mark & Carina Hanson  
706 Barton Center  
84, Mg. Road Bangalore-1  
Bangalore, INDIA

\$5,451.22

Total

\$5,451.22

Missionary Support for Missions Providing:  
Services to the Deaf/Hearing Impaired

Love in Action, Pakistan  
Richard & Victoria Horwitz; Frances & Maria Doherty  
PO Box 1055  
Karachi 74200, PAKISTAN

\$20,931.75

Voice for the Deaf  
Cambron & Ramesh Martine  
308, Swapnalok Complex, S.D. Road  
Hyderabad, AP 500003, INDIA

\$3,686.60

Total

\$24,618.35

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 3 of 16

Missionary Support for Missions Providing:  
Drug Prevention and Rehabilitation

Cornerstone Project  
Jean-Luc & Pannee Temmam  
JL GPO Box 1603  
Phnom Penh, CAMBODIA \$877.50

Total \$877.50

Missionary Support for Missions Providing:  
Education/Educational Programs for Children and Disadvantaged Families

Wenquan School Project  
German School Shanghai  
437 Jin Hui Lu  
Shanghai 201103  
Yunnan Province, CHINA \$500.00

Portico Foundation  
Friedrich & Gislinde Zenkner  
289, 19th Main, 6th Block  
Koramangala  
Bangalore 560-095, INDIA \$4,772.29

Family Mission Services  
Louise Halifax  
Apdo. 5100 Suc. J  
Monterrey, NL.CP 64841, MEXICO \$22.25

Total \$5,294.54

Missionary Support for Missions Providing:  
Evangelism

Sharing & Caring  
Scott & Gloria Robertson  
13454 South NC 231  
Middlesex, NC 27557  
Pucon, CHILE \$22.25

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 4 of 16

Lifeline Ministries John & Heather Noble PO Box 403 Star City, AR 71667 Mexico City, MEXICO	\$179.00
Refugio de Paz Richard & Cathy Shepherd Apdo 2907 Centro de Gobierno San Salvador, EL SALVADOR	\$641.82
HopeReach Missions Lex & Betty Tincher 3575 N. Beltline Rd. #278 Irving, TX 75062-7896	\$489.50
CVR Ministries Charles & Victoria Rapp 4397 W. Bethany Home Rd. #1096 Glendale, AZ 85301 TAIWAN	\$16,179.05
Mission Assist Gary & Diane Branson 114 ½ E Third St. Fairmont, MN 56031	\$1,885.17
Street Ministries Rory & Rachel Huber PO Box 3456 Gresham, OR 97030	\$3,397.10
China TIPS Bruce & Sharon Cunningham 1481 E. Hwy. 372 PMB 451 Pahrump, NV 89048-2146 CHINA	\$3,548.40

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 5 of 16

Education With a Purpose  
James & Monica Brant  
835 E. Lamar Blvd., #219  
Arlington, TX 76011  
CHINA

\$17.80

Hands That Help: India  
Michael & Robin Bedolfe  
SSBS #152 1st Floor, Babukhan  
Basheerbagh, Hyderabad, INDIA

\$4,893.73

Fresh Start  
Adrian & Cheri Ramirez  
Apdo 2187-300  
Heredia, San Jose, Costa Rica

\$2,974.70

Amor en Accion, R.D.  
David & Lori Bauer  
Apdo 319  
Santiago, DOMINICAN REPUBLIC

\$900.00

N. Thailand Outreach Mission  
Stephen & Rutchanee Hanson  
Box 80, Chiang Mai University PO  
Chiang Mai 50,200, THAILAND

\$10,007.80

Mapuche Quest  
Diane Archibald  
Psje. Los Copihues, Cabana #3  
Casilla 427  
Villarrica, IX Region, CHILE

\$4,770.90

Total

\$49,907.22

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 6 of 16

Missionary Support for Missions Providing:  
Food and Clothing Distribution

Family Missions, KC Don & Tema Maillet PO Box 266 Concordia, MO 64020	\$250.00
Native American Outreach Archie & Bettie MacArthur 1109 S. Plaza Way, Ste. 351 Flagstaff, AZ 86001	\$6,152.00
Heart to Heart Connections Wendy Brouwer & Kimberly Marion PO Box 720215 San Jose, CA 95172	\$1,000.00
Friend-Ship Mission Paul & Kathleen Otter PO Box 243 Carthage, NC 28327	\$142.40
Hands At Work Dale & Mary Ann Borst 2245 Hijkes Lane 2245 #239 Louisville, KY 40218	\$3,480.00
Mission Supply & Service Marie Heininge PO Box 1790 Roanoke Rapids, NC 27870	\$7,160.00
Seek & Help Mission Robin Miller & Henry Olinger PO Box 2818 Smithfield, NC 27577	\$107.75
India Reach David & Hemlata Mooney E588, Composite Centre, GKII New Delhi 110048, INDIA	\$311.50

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 7 of 16

Proyecto Esperanza de Puerto Rico  
Nancy Costello  
Box 193678  
San Juan, PUERTO RICO 00919

\$979.00

Love in Action, Guad.  
Chrispin Scaman  
Calzada Club Atlas Sur #500A  
Colonia Club Atlas de Golf  
Tlaquepaque  
Guadalajara, Jal., MEXICO

\$5,906.50

Silver Lining  
Carlos & Kristen Zaldivar  
Perla 190, Colonia Miravalle  
Saltillo, Coahuila, MEXICO

\$5,496.62

Project Queretaro  
415 Bedford Dr  
Duluth, GA 30096

\$57.85

Ayuda Para la Familia  
Jose & Laura Sanchez  
Colina del Silencio #9  
Colina del Agua Caliente  
Tijuana, Baja Calif., 22480 MEXICO

\$900.00

Desert Blossoms  
Anthony & Maria Gamage  
Administracion 3, Apdo 3-33  
Torreon, Coah. 27003, MEXICO

\$1,440.00

Los Andes Mission  
Rod & Maria Henderson  
Casilla 321  
Trujillo. PERU

\$3,658.70

Total

\$37,042.32

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 8 of 16

Missionary Support for Missions Providing:  
Services to the Handicapped

Family Vol. Svcs, Nepal James & Esta Smith GPO Box 13870 Katmandu, NEPAL	\$389.05
Hands On, Saigon Deann Henry & Kjell Lundberg Box 14, Thi Nghe PO 70401 Ho Chi Minh City, VIETNAM	\$179.00
Total	\$568.05

Missionary Support for Missions Providing:  
Humanitarian Aid & Relief Work

Family Aid Project Jeff & Claire Wells 6234 Firdale Ln. Houston, TX 77057	\$5,500.00
Family Educational Services, Istanbul Steven Levenberg, Renee Crossman & John Scott MBE 138 Mecidiyerkoy Istanbul 80470, TURKEY	\$7,399.13
Healing Hearts, Bosnia Geoffrey & Anna Wormus PO Box 881 1001 Skopje>Former Prishtina, KOSOVO	\$135.78
Family Int'l Vol. Svc. James & Klara Brownwood P.P. 91 Zagreb-Dubrava 10040, CROATIA	\$3,090.91

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 9 of 16

Miles for Smiles Mario & Sandra Bellaviti PO Box 1944 Arusha, TANZANIA	\$17,442.79
Matumaini Malika Bagnulo & Andras Namenyi PO Box 689 Westville, Durban 3630, Rep. S. AFRICA	\$7,785.00
South Reach Jason & Cedar Spain Santa Ana #122 Col. Las Fuentes Zapopan, Jal., CP 45070 MEXICO	\$4,718.37
Asia Quest Peter & Maria Deutsch 9199 Coogan Dr Cincinnati, OH 45231 VIETNAM	\$1,125.00
AB Care John Sooter Rua Ambar 43, Nova Higienopolis Jandira, Sao Paulo, 0600-000 BRAZIL	\$805.00
Overseas Missions Michael & Maria Poe Casilla 56-T Agencia Tajamar Santiago, CHILE	\$1,517.00
Hearts in Hands, Chile Steven Colon & Agueda Martin Correo Villa La Reina, Casilla 101 Penalolen, Santiago, CHILE	\$178.00
Total	\$49,696.98



Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 10 of 16

Missionary Support for Missions Providing:  
Services to the Sick

Caring Hearts, Hungary  
Rafael & Amy Sarkozy  
Budapest 1535 PF 880  
Budapest, HUNGARY \$5,756.95

Samaritans  
L. & Lily Sridhar  
PBS, TNR Chambers 1st Floor  
¼ Church Street  
Bangalore, Karnataka, INDIA \$4,371.79

Total \$10,128.74

Missionary Support for Missions Providing:  
Medical Supplies Distribution

Eternal Vision  
Michael Medich  
1822 Kings Love Blvd., #203  
Naples, FL 34112-5365 \$4,652.29

Total \$4,652.29

Missionary Support for Missions Providing:  
Music Ministry

Mission to Mexico  
Cindy Thompson & Mike Edwards  
Calle Georgia 139, Col. Napoles  
Mexico City 03810. MEXICO \$1,695.00

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 11 of 16

The Salem Family  
Ronald & Margarido Harboe  
PO Box 2253  
Salem, OR 97308

\$44.50

Calico Charities  
Brian & Yvette McGrath  
Apdo. 310  
Zamora, Mich., 59601 MEXICO

\$667.50

Cheer-Up Missions  
Kenneth Landriault  
596 E. Marlin Ct.  
Terrytown, LA 70056

\$667.50

Firefly Project  
George & Lois Champ  
PO Box 1953  
La Porte, TX 77572-1953  
Ufa Bashkortostan, RUSSIA

\$890.00

Promised Land Ministries  
Tom & Amy Morrow  
PO Box 126  
La Porte, TX 77571

\$846.34

Total

\$4,810.84

Missionary Support for Missions Providing:  
Orphan Ministries

Love in Action  
Lisa Wurr  
PO Box 223564  
Dallas, TX 75222-3564

\$3,460.20

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 12 of 16

Love's Bridge, Perm  
Avraham & Katrina Markoff, & Anna Mara  
PO Box 5886  
Perm 614077, RUSSIA

\$536.50

FAVOR  
Paul Katz  
Rigoudi Efthymia,  
CP 137 Of.P.1  
Bacau 5500, ROMANIA

\$3,942.90

Family Care Africa  
Scott Ward  
Utomi Aire Ave, off Admiralty Way  
Dunez, Lekki Peninsula  
Phase 1, Lagos, NIGERIA

\$700.00

PEARL  
Maria Peck, Sidney & Elizabeth Williams  
C/-D. Schnieder AM Sulzbach 12  
Sulzbach Nord 65843  
Monrovia, LIBERIA

\$8,887.50

Action in Focus, Branch 1  
Olivier Richard  
PO Box 58282  
Nairobi, KENYA

\$855.04

Accao Voluntaria em Mozambique  
Avenida Vladimir Lenine 1071, Flat 6  
Maputo, MOZAMBIQUE

\$17.80

Central Thailand Mission  
Toni Wysocki & Deborah Ekner  
PO Box 40, Minburi PO  
Bangkok 10510, THAILAND

\$3,082.50

Total

\$21,482.44

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 13 of 16

Missionary Support for Missions Providing:  
Parent/Teacher Training and Seminars

Family Educational Services  
Daniel & Josyane Lanthier  
#148 ST. 48, F-10/4  
Islamabad 44000, PAKISTAN

\$90.00

Educational Workshops Mission  
Luis Rivero & Monica Mantilla  
Apdo. 253  
Chiclayo, Peru  
Cuenca, ECUADOR

\$2,071.00

Total

\$2,161.00

Missionary Support for Missions Providing:  
Prison/Inmate/Juvenile Delinquent Rehabilitation

Philippine/China Mission  
John & Victoria Wilson  
PO Box 1487 CPO  
Macau, CHINA

\$165.50

Total

\$165.50

Missionary Support for Missions Providing:  
Christian Publications

Asia Vision/Hindi Vision  
Guy DesRuisseaux  
Suite #127  
173/3 Surawog Rd. Bangrak  
Bangkok 10500, THAILAND

\$7,948.81

Total

\$7,948.81

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 14 of 16

Missionary Support for Missions Providing:  
Renovations, Handyman Services to Missions & Disadvantaged Families

Creative Care Services Arthur & Sandra Scott 2618 N. 10th St., #159 McAllen, TX 78501	\$111.25
Total	\$111.25

Missionary Support for Missions Providing:  
Training Young Missionaries

Tampa Family Mission Glen & Kathy Rogers PO Box 130311 Tampa, FL 33681-0311	\$20,749.06
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The Family Outreach Program Catherine Edson & Lawrence George 2223 Plainfield Rd Crest Hill, IL 60435	\$74.76
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Youth Mission Network Lauren Stevens & Stephan Schmidt F.C.G.E. Malabo, EQUATORIAL GUINEA	\$272.60
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New Horizons Project Arthur & Becky Lindfield 3337 S. Bristol Santa Ana, CA 92704 Poona, INDIA	\$1,473.25
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Corazones Unidos Charles & Kay Pribyl Apdo 475. Admon. 1 Morelia, Mich. 58000, MEXICO	\$14,887.88
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Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 15 of 16

Friends for Life  
Mark & Kay Adair  
Sendai 853-22  
Tonami Shi  
Toyama Ken, JAPAN

\$1,718.80

Missionary Student Exchange  
Robert & Kay Robb  
Caixa Postal 11  
Lauro de Freitas, Bahia, CEP 42700-0  
BRAZIL

\$89.00

Total

\$39,265.35

Missionary Support for Missions Providing:  
Services to Youth at Risk

From the Heart  
Cynthia Salazar & Phillip Slown  
3842 Palm Dr  
Bonita, CA 91902

\$1,701.90

Portland Family Mission  
Patrick & Christine Lumbroso  
11918 SE Division, PMB #113  
Portland, OR 97236

\$3,250.16

Friends in Deed  
Gary & Nancy Johnson  
#106, 109-c. 1st Floor  
Bangalore, INDIA

\$2,944.50

Total

\$7,896.56

Gifts to Other Non-Profits

The International Religions Directory Project  
Gordon Melton  
PO Box 90709  
Santa Barbara, CA 93190-0709

\$10,065.83

Total

\$10,065.83

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #2, Page 16 of 16

GRAND TOTAL

\$303,186.99

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Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 1 of 7

II. Non-Cash Grants Food Donated to Missionary Projects:

Fair Market Value of Food Donated to Missionary Projects:

Milk and Milk products, Assorted Produce, Meat, Canned Goods, Eggs, Juices, Cheese, Bread, Rice, Oats, Tea. All food was obtained by donation from vendors. Book Value is equal to the fair market value, which was determined by the reference to the usual retail cost normally charged by vendor.

Fair Market Value of Vehicles Donated to the Missionary Project:

Book Value of the vehicles is equal to the fair market value, which was determined by reference to the Kelly Blue book.

Fair Market Value of Clothing Donated to Missionary Projects:

Shirts, pants, dresses, underwear, coats, shoes. All clothing was obtained by donation from vendors. Book value of the clothing is equal to the fair market value, which was determined by reference to the usual retail cost normally charged by vendor.

Fair Market Value of Other Items Donated to Missionary Projects:

Glasses, Cameras, Office Supplies, Printers, Computers, Copiers, Floor Tiles, Carpet, Office Desks, Furniture, Auto Parts/Glass/Tires, Cosmetics/Toiletries, Bedding, First-Aid & Medical Supplies, Kitchen Supplies, Sleeping Bags, Tent, Photo Equipment, Wheelchairs, Hardware Items, Camper Shells, Building Materials, Paint, Fitness Equipment, Spa pump, Gravel, Vacuum Cleaner, Above-ground Swimming Pool. All Items were obtained by donation from vendors. Book value of the items is equal to the fair market value, which was determined by reference to the usual retail cost normally charged by vendor.



Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 2 of 7

Missionary Support for Missions Providing:  
Evangelism

Family Christian Outreach  
Mark & Christine Fuller  
835 E. Lamar Blvd., #219  
Arlington, TX 76011

Mission Support in the form of: Clothes	\$53,921.32	
Mission Support in the form of: Other	\$105.00	
Mission Support in the form of: Vehicle	\$104.88	
Total		\$54,131.20

HopeReach Missions  
Lex & Betty Tincher  
3575 N. Beltline Rd. #278  
Irving, TX 75062-7896

Mission Support in the form of: Medical	\$390.02	
Total		\$390.02

Family Project Hope  
Evelyn Owens  
9231 SW 148th St.  
Miami, FL 33176

Mission Support in the form of: Food	\$10,461.00	
Mission Support in the form of: Other	\$541.59	
Mission Support in the form of: Medical	\$4,430.97	
Total		\$15,433.56

Mission Assist  
Gary & Diane Branson  
114 ½ E Third St.  
Fairmont, MN 56031

Mission Support in the form of: Other	\$600.00	
Total		\$600.00

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22  
SCHEDULE #3, Page 3 of 7

Street Ministries  
Rory & Rachel Huber  
PO Box 3456  
Gresham, OR 97030

Mission Support in the form of: Food	\$1,150.00	
Mission Support in the form of: Clothes	\$1,250.00	
<b>Total</b>		<b>\$2,400.00</b>

Fresh Start  
Adrian & Cheri Ramirez  
Apdo 2187-300  
Heredia, San Jose, Costa Rica

Mission Support in the form of: Vehicle	\$2,450.00	
<b>Total</b>		<b>\$2,450.00</b>

Mapuche Quest  
Diane Archibald  
Psje. Los Copihues, Cabana #3  
Casilla 427  
Villarrica, IX Region, CHILE

Mission Support in the form of: Other	\$497.95	
<b>Total</b>		<b>\$497.95</b>

Missionary Support for Missions Providing:  
Food and Clothing Distribution

Hands At Work  
Dale & Mary Ann Borst  
2245 Hikes Ln 2245 #239  
Louisville, KY 40218

Mission Support in the form of: Other	\$150.00	
Mission Support in the form of: Medical	\$628.00	
Mission Support in the form of: Vehicle	\$330.00	
<b>Total</b>		<b>\$1,108.00</b>

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 4 of 7

Proyecto Esperanza de Puerto Rico  
Nancy Costello  
Box 193678  
San Juan, PUERTO RICO 00919

Mission Support in the form of: Clothes	\$700.00	
Total		\$700.00

Seck & Help Mission  
Robin Miller & Henry Olinger  
PO Box 2818  
Smithfield, NC 27577

Mission Support in the form of: Other	\$269.00	
Total		\$269.00

Love in Action, Guad.  
Chrispin Seaman  
Calzada Club Atlas Sur #500A  
Colonia Club Atlas de Golf  
Tlaquepaque  
Guadalajara, Jal., MEXICO

Mission Support in the form of: Vehicle	\$522.50	
Total		\$522.50

Project Queretaro  
415 Bedford Dr  
Duluth, GA 30096

Mission Support in the form of: Medical	\$250.00	
Total		\$250.00

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 5 of 7

Missionary Support for Missions Providing:  
Humanitarian Aid & Relief Work

Family Educational Services, Istanbul  
Steven Levenberg, Renee Crossman & John Scott  
MBE 138  
Mecidiyerkoy  
Istanbul 80470, TURKEY

Mission Support in the form of: Rescue cameras	\$16,121.20	
Total		\$16,121.20

New Horizons, Mexico  
Martha Villanueva  
Manuel Ponce 428  
Colonia Lomas del Roble  
San Nicholas, Nuevo Leon, MEXICO

Mission Support in the form of: Other	\$80.00	
Total		\$80.00

Missionary Support for Missions Providing:  
Medical Supplies Distribution

Eternal Vision  
Michael Medich  
1822 Kings Love Blvd., #203  
Naples, FL 34112-5365

Mission Support in the form of: Other	\$716.97	
Total		\$716.97

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 6 of 7

Missionary Support for Missions Providing:  
Music Ministry

Cheer-Up Missions  
Kenneth Landriault  
596 E. Marlin Ct.  
Terrytown, LA 70056

Mission Support in the form of: Wheelchairs	\$5,000.00	
Total		\$5,000.00

Missionary Support for Missions Providing:  
Training Young Missionaries

Teens On Track  
Dan & Katie Roselle  
PO Box 8038  
Anaheim, CA 92812

Mission Support in the form of: Other	\$463.49	
Mission Support in the form of: Medical	\$358.78	
Mission Support in the form of: Vehicle	\$58.80	
Total		\$881.07

Eastern US Family Outreach  
Jackie Roberts  
PMB 491, 3100 Briarcliff Rd NE  
Atlanta, GA 30329

Mission Support in the form of: Food	\$1,736.80	
Mission Support in the form of: Vehicle	\$299.86	
Total		\$2,036.66

Family Care Foundation  
F.E.I.N. 33-0734917  
Federal Form 990, Part II line 22

SCHEDULE #3, Page 7 of 7

Missionary Support for Missions Providing:  
Services to Youth at Risk

Portland Family Mission  
Patrick & Christine Lumbroso  
11918 SE Division, PMB #113  
Portland, OR 97236

Mission Support in the form of: Carpet	\$1,125.00	
Mission Support in the form of: Food	\$43.15	
Mission Support in the form of: Medical	\$300.00	
Mission Support in the form of: Office Equip.	\$4,075.00	
Mission Support in the form of: Other	\$805.05	
Mission Support in the form of: Vehicle	\$433.82	
<b>Total</b>		<b>\$6,782.02</b>
<b>GRAND TOTAL</b>		<b>\$110,370.15</b>
Food Assistance to Organizations	\$355.64	
Activated Ministries		
2120 W. Mission Rd., Suite G		
Escondido, CA 92029		
Medical Assistance to Organizations	\$175,500.00	
The Municipalities of El Bosque		
and Huechuraba		
Santiago, Chile		
<b>GRAND TOTAL</b>		<b>\$589,412.78</b>

If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box

**Note:** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

<b>Part II: Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.</b>		
Type or Print	Name of Exempt Organization <b>Family Care Foundation</b>	Employer Identification Number <b>33-0734917</b> For IRS Use Only
	Number, Street, and Room or Suite Number, if a P.O. Box. See instructions. <b>1373 Marron Valley Road</b>	
	City, Town or Post Office, State, and ZIP Code. For a Foreign Address. See instructions. <b>Dulzura, CA 91917</b>	

Check type of return to be filed (file a separate application for each return):

Form 990     Form 990-EZ     Form 990-T (Section 401(a) or 408(a) trust)     Form 1041-A     Form 5227     Form 8870

Form 990-BL     Form 990-PF     Form 990-T (trust other than above)     Form 4720     Form 6069

**Stop: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

If the organization does not have an office or place of business in the United States, check this box .  
If this is for a group return, enter the organizations four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 2001.

5 For calendar year 2000, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_.

6 If this tax year is for less than 12 months, check reason:  Initial return     Final return     Change in accounting period

7 State in detail why you need the extension: Organization is undergoing financial audit. Final figures were not available at expiration of extension.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. \$ \_\_\_\_\_

c Balance due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ \_\_\_\_\_

**Signature and Verification**

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

Signature Pete Coulston    Title CPA    Date 8/1/01

**Notice to Applicant - To be Completed by the IRS**

We have approved this application. Please attach this form to the organization's return.

We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return. Please attach this form to the organization's return.

We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

We cannot consider this application because it was filed after the due date of the return for which an extension was requested.

Other: \_\_\_\_\_

Director \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or Print	Name <b>Pete Coulston, CPA</b>	<b>EXTENSION APPROVED</b> <b>AUG 22 2001</b>
	Number and Street (include suite, room, or apartment number) or a P.O. Box Number <b>511 S. Coast Highway 101, #208</b>	
	City or Town, Province or State, and Country (including postal or ZIP code) <b>Encinitas, CA 92024</b>	

# Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
  - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I** Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>Family Care Foundation</b>	Employer Identification Number <b>33-0734917</b>
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions <b>1373 Marron Valley Road</b>	State ZIP Code
	City, Town or Post Office. For a foreign address, see instructions. <b>Dulzura, CA, 91917</b>	

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a group return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 8/15, 20 01, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 20 00 or

▶  tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_ 0

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_ 0

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_ 0

### Signature and Verification

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, and that I am authorized to prepare this form.

Signature ▶ *Pat Coulter* Title ▶ CPA Date ▶ 5/2/01

KFA For Paperwork Reduction Act Notice, see Instructions. Form 8868 (12-2000)