

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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

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 OCT 1, 2000 and ending SEP 30, 2001

B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return. C Name of organization: CONNECTIONS FOR INDEPENDENT LIVING. D Employer identification number: 74-2418249. E Telephone number: 970-352-8682. F Check if application pending.

G Organization type (check only one): [X] 501(c)(3) (insert no) 527 OR [] 4947(a)(1). H(a) Is this a group return for affiliates? [] Yes [X] No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? N/A [] Yes [] No. H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [X] No. I Enter 4-digit group exemption no (GEN). 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

Table with 21 rows and columns for Revenue, Expenses, and Net Assets. Includes a 'RECEIVED' stamp from IRS-OSC, OGDEN, UT, dated JAN 08 2002.

SCANNED JAN 14 2002

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	38,333.	35,596.	1,961.	776.
26	Other salaries and wages	130,285.	120,980.	6,665.	2,640.
27	Pension plan contributions	2,174.	2,019.	112.	43.
28	Other employee benefits	8,535.	7,925.	437.	173.
29	Payroll taxes	14,968.	13,898.	766.	304.
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	5,398.	4,836.	562.	
34	Telephone	4,889.	3,915.	926.	48.
35	Postage and shipping	1,273.	1,063.	206.	4.
36	Occupancy	12,210.	10,098.	2,070.	42.
37	Equipment rental and maintenance	1,387.	1,087.	300.	
38	Printing and publications	314.	174.	100.	40.
39	Travel	2,313.	1,596.	617.	100.
40	Conferences, conventions, and meetings	535.	535.		
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	1,252.	931.	321.	
43	Other expenses (itemize)				
a	INSURANCE	521.		521.	
b	PROFESSIONAL FEES	4,692.	2,196.	2,496.	
c	SPECIFIC ASSISTANCE	6,498.	6,498.		
d	MISCELLANEOUS	2,605.	2,145.	460.	
e	IN KIND DONATIONS	792.	792.		
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	238,974.	216,284.	18,520.	4,170.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <input type="checkbox"/>	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts but optional for others)
ASSIST DEAF AND DISABLED INDIVIDUALS All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a INDEPENDENT LIVING SERVICES FOUR CORE SERVICES—INFORMATION AND REFERRAL, SYSTEMS AND INDIVIDUAL ADVOCACY, PEER COUNSELING AND SUPPORT, INDEPENDENT LIVING SKILLS TRAINING (Grants and allocations \$ _____)	120,474.
b OLDER BLIND PROGRAM ASSISTANCE TO PERSONS AGE 55 AND OLDER WHO ARE BLIND OR VISUALLY IMPAIRED (Grants and allocations \$ _____)	56,190.
c INTERPRETING SIGN LANGUAGE INTERPRETING PROVIDED ON A FEE SERVICE BASIS FOR INDIVIDUALS WHO ARE DEAF (Grants and allocations \$ _____)	21,737.
d COMMUNITY EDUCATION TRAINING TO SCHOOLS, BUSINESSES, GOVERNMENTAL AGENCIES, SERVICE CLUBS, ETC, ON DISABILITY AWARENESS AND ADA AWARENESS (Grants and allocations \$ _____)	17,883.
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	216,284.

Part IV Balance Sheets

Note		(A)		(B)	
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year	
Assets	45	Cash - non-interest-bearing		45	
	46	Savings and temporary cash investments	51,469.	46	72,820.
	47 a	Accounts receivable	47a 6,697.		
	b	Less allowance for doubtful accounts	47b	47c 9,673.	6,697.
	48 a	Pledges receivable	48a 121,350.		
	b	Less allowance for doubtful accounts	48b	48c 138,950.	121,350.
	49	Grants receivable		49 20,192.	10,200.
	50	Receivables from officers, directors, trustees, and key employees		50	
	51 a	Other notes and loans receivable	51a		
	b	Less allowance for doubtful accounts	51b	51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
	54	Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a	Investments - land, buildings, and equipment, basis	55a		
	b	Less accumulated depreciation	55b	55c	
56	Investments - other		56		
57 a	Land, buildings, and equipment, basis	57a 23,483.			
b	Less accumulated depreciation	57b 17,876.	57c 5,996.	5,607.	
58	Other assets (describe <input type="checkbox"/> SEE STATEMENT 2)		58 90,310.	45,159.	
59	Total assets (add lines 45 through 58) (must equal line 74)		59 316,590.	261,833.	
Liabilities	60	Accounts payable and accrued expenses	11,399.	60	15,151.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
	b	Mortgages and other notes payable	STMT 3	64b 3,264.	1,488.
65	Other liabilities (describe <input type="checkbox"/>)		65		
66	Total liabilities (add lines 60 through 65)		66 14,663.	16,639.	
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	72,667.	67	78,685.
	68	Temporarily restricted	229,260.	68	166,509.
	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	
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)		73 301,927.	245,194.	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)		74 316,590.	261,833.	

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

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

a	Total revenue, gains, and other support per audited financial statements		a	190,771.
b	Amounts included on line a 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) <u>STMT 4</u>	\$	8,530.	
	Add amounts on lines (1) through (4)		b	8,530.
c	Line a minus line b		c	182,241.
d	Amounts included on line 12, Form 990 but not on line a			
(1)	Investment expenses not included on line 6b, Form 990	\$		
(2)	Other (specify)	\$		
	Add amounts on lines (1) and (2)		d	
e	Total revenue per line 12, Form 990 (line c plus line d)		e	182,241.

a	Total expenses and losses per audited financial statements		a	247,504.
b	Amounts included on line a 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) <u>STMT 5</u>	\$	8,530.	
	Add amounts on lines (1) through (4)		b	8,530.
c	Line a minus line b		c	238,974.
d	Amounts included on line 17, Form 990 but not on line a			
(1)	Investment expenses not included on line 6b, Form 990	\$		
(2)	Other (specify)	\$		
	Add amounts on lines (1) and (2)		d	
e	Total expenses per line 17, Form 990 (line c plus line d)		e	238,974.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)

(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
SEE STATEMENT 6		38,333.	1,717.	0.

00-61 21 1105770

Part VI Other Information		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.	79		X
80 a	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?	80a		X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81 a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 81a 0.			
b	Did the organization file Form 1120-POL for this year?	81b		X
82 a	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?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions for reporting in Part III) 82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations			
a	Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations			
a	Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	501(c)(12) organizations			
a	Gross income from members or shareholders 87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A			
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 301.7701-3? If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations			
	Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> N/A, section 4912 <input type="checkbox"/> N/A, section 4955 <input type="checkbox"/> N/A			
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? If "Yes," attach a statement explaining each transaction N/A	89b		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 N/A			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization N/A			
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> NONE			
b	Number of employees employed in the pay period that includes March 12, 2000 90b 19			
91	The books are in care of <input type="checkbox"/> BETH DANIELSON Telephone no <input type="checkbox"/> 970-352-8682			
	Located at <input type="checkbox"/> 1024 9TH AVENUE, GREELEY, CO ZIP code <input type="checkbox"/> 80631			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A			

Part VII Analysis of Income-Producing Activities

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 PROGRAM SERVICE FEES					48,475.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	434.	
96 Dividends and interest from securities					
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					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			02		
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MISCELLANEOUS			01	566.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1,000.	48,475.
105 Total (add line 104, columns (B), (D), and (E))					49,475.

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

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)
93 A	PROGRAM FEES CHARGED TO COVER COST OF PROVIDING INTERPRETING SERVICES

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(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

(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)

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. (Important: See General Instruction W)

Please Sign Here: *Beth Danielson* 1-4-02 **BETH DANIELSON, EXEC DIRECTOR**
Signature of officer Date Type or print name and title

Paid Preparer's signature: *Ernest E. Heuer* Date: 12/10/2001 Check if self-employed: Preparer's SSN or PTIN: P00045039

Preparer's Use Only: Firm's name (or yours if self-employed) and address and ZIP code: **ERNEST E. HEUER & COMPANY, P.C., C.P.A.**
11990 GRANT STREET SUITE 101
NORTHGLENN, CO 80233-1122
EIN: **84-1036553**
Phone no: **303-450-0400**

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

CONNECTIONS FOR INDEPENDENT LIVING

Employer identification number

74 2418249

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE -----				

Total number of other employees paid over \$50,000 ▶ 0				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶ 0		

Part III Statements About Activities		Yes	No
1	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 ► \$ _____ 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		X
2	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?		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e	Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.?		X
4 a	Do you have a section 403(b) annuity plan for your employees?		X
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
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	171,478.	117,124.	403,668.	127,586.	819,856.
16 Membership fees received					
17 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	93,430.	21,054.	32,970.	17,026.	164,480.
18 Gross income from interest, dividends, amounts received from payments on securities loans (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	435.	147.		28.	610.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 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.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	5,281.	6,203.	SEE STATEMENT 7 2,253.	1,487.	15,224.
23 Total of lines 15 through 22	270,624.	144,528.	438,891.	146,127.	1,000,170.
24 Line 23 minus line 17	177,194.	123,474.	405,921.	129,101.	835,690.
25 Enter 1% of line 23	2,706.	1,445.	4,389.	1,461.	
26 Organizations described on lines 10 or 11					
a Enter 2% of amount in column (e), line 24					26a 16,714.
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental 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					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 835,690.
d Add Amounts from column (e) for lines	18 610.	19			26d 15,834.
	22 15,224.	26b			26e 819,856.
e Public support (line 26c minus line 26d total)					26f 819,856.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.1053%
27 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 (1999) (1998) (1997) (1996)	N/A				
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 these differences (the excess amounts) for each year (1999) (1998) (1997) (1996)	N/A				
c Add Amounts from column (e) for lines	15	16			27c N/A
	17	20			27d N/A
d Add Line 27a total and line 27b total					27e N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	27f N/A				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

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)

NONE

Part V Private School Questionnaire
(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?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? 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?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.) _____ _____		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? 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		

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

- Check here If the organization belongs to an affiliated group
- Check here 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												
		N/A													
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 -														
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">If the amount on line 40 is -</td> <td style="width: 50%; border: none;">The lobbying nontaxable amount is -</td> </tr> <tr> <td style="border: none;">Not over \$500,000</td> <td style="border: none;">20% of the amount on line 40</td> </tr> <tr> <td style="border: none;">Over \$500,000 but not over \$1,000,000</td> <td style="border: none;">\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td style="border: none;">Over \$1,000,000 but not over \$1,500,000</td> <td style="border: none;">\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td style="border: none;">Over \$1,500,000 but not over \$17,000,000</td> <td style="border: none;">\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td style="border: none;">Over \$17,000,000</td> <td style="border: none;">\$1,000,000</td> </tr> </table>	If the amount on line 40 is -	The lobbying nontaxable amount is -	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	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	41	
If the amount on line 40 is -	The lobbying nontaxable amount is -														
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														
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				N/A
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A)

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)			0.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. N/A

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► Yes No

b If "Yes," complete the following schedule. N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule B
(Form 990 or 990-EZ)

Schedule of Contributors

OMB No 1545 0047

Department of the Treasury
Internal Revenue Service

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

2000

Name of organization

CONNECTIONS FOR INDEPENDENT LIVING

Employer identification number
74-2418249

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.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ).

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ.

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

Caution Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

Public Inspection

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

General rule Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.

Section 501(c)(3) organizations For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1) 170(d)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(m)(a)).

Example A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or requests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III Section 501(c)(7), (8), or (10) organizations that received contributions or requests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization

Employer identification number

CONNECTIONS FOR INDEPENDENT LIVING

74-2418249

Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
1		\$ 93,888.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
2		\$ 17,832.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
3		\$ 5,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
4		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
5		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
6		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

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Federal Book

CONNECTIONS FOR INDEPENDENT LIVING 74-2418249

Reporting Period October 1, 2000 to September 30, 2001

+/s/b Current Amount
Reduced by ITC/
Salvage Value/Both
F/P Full/Partial Retirement

Asset ID	Description	Placed In Service	Life	Method/ Convention	Cost	Section 179	Depreciable Basis	Depreciation		Accumulated
								Prior	Current	
001	METAL DESK	06/01/1981	5y 0m	DB200 / HY	25	0	25	25	0	25
002	4 DRAWER FILE	06/01/1981	5y 0m	DB200 / HY	75	0	75	75	0	75
003	4 DRAWER FILE CAB	06/01/1981	5y 0m	DB200 / HY	100	0	100	100	0	100
004	OLYMPIA TYPEWRITER	06/01/1981	5y 0m	DB200 / HY	500	0	500	500	0	500
005	BOOKCASE	06/01/1981	5y 0m	DB200 / HY	75	0	75	75	0	75
006	SHARP CALCULATOR	06/01/1981	5y 0m	DB200 / HY	10	0	10	10	0	10
007	TDD MINICOM 87629	06/01/1983	5y 0m	DB200 / HY	150	0	150	150	0	150
008	TDD N=MINICOM 77085	06/01/1986	5y 0m	DB200 / HY	150	0	150	150	0	150
009	TDD MINICOM 44164	06/01/1986	5y 0m	DB200 / HY	150	0	150	150	0	150
010	SEC DESK METAL	06/01/1987	5y 0m	200SL / HY	25	0	25	25	0	25
011	DESK WOODEN EXECUT	06/01/1987	5y 0m	200SL / HY	75	0	75	75	0	75
012	DESK CHAIRS-3	06/01/1987	3y 0m	200SL / HY	15	0	15	15	0	15
013	SIDE CHAIRS-2	06/01/1987	5y 0m	200SL / HY	5	0	5	5	0	5
014	HON FILE CAB 4DR BLA	06/01/1987	5y 0m	200SL / HY	108	0	108	108	0	108
015	BOOKCASE-SMALL	06/01/1987	5y 0m	200SL / HY	5	0	5	5	0	5
016	REFRIGERATOR-AVANT	06/01/1987	5y 0m	200SL / HY	30	0	30	30	0	30
017	CLOCK	06/01/1987	5y 0m	DB200 / HY	14	0	14	14	0	14
018	COUCH & CHAIR	09/01/1987	5y 0m	DB200 / HY	1	0	1	1	0	1
019	TOSHIBA PHONES-2	09/01/1987	5y 0m	DB200 / HY	358	0	358	358	0	358

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CONNECTIONS FOR INDEPENDENT LIVING 74-2418249

Reporting Period October 1, 2000 to September 30, 2001

* Current Amount
+s/b Reduced by ITC/
Salvage Value/Both
F/P Full/Partial Retirement

Asset ID	Description	Placed In Service	Life	Method/ Convention	Cost	Section	Depreciable Basis	Prior	Depreciation		Accumulated
									Current	Current	
020	COPY TABLE	10/01/1987	5y 0m	DB200 / HY	6	179	0	6	0	0	6
021	BULLETIN BOARD	10/01/1987	5y 0m	DB200 / HY	33	179	0	33	0	0	33
022	WINDOW BLINDS	10/01/1987	5y 0m	DB200 / HY	85	179	0	85	0	0	85
023	FILE CABINET G R I P	02/01/1988	3y 0m	DB200 / HY	22	179	0	22	0	0	22
024	CALCULATOR-AIMS	03/01/1988	3y 0m	DB200 / HY	15	179	0	15	0	0	15
025	MINICOM TCC 16461	05/01/1988	5y 0m	DB200 / HY	200	179	0	200	0	0	200
026	OFFICE CHAIR-GRAY	06/01/1988	5y 0m	DB200 / HY	35	179	0	35	0	0	35
027	ROYAL ELEC TYPEWRIT	10/01/1988	5y 0m	DB200 / HY	200	179	0	200	0	0	200
028	4 DRAWER FILE-DONATI	03/10/1989	5y 0m	DB200 / HY	50	179	0	50	0	0	50
029	MINICOM TDD 61956	06/30/1989	5y 0m	DB200 / HY	196	179	0	196	0	0	196
030	USED SEC DESK-BROW	01/31/1990	5y 0m	DB200 / HY	20	179	0	20	0	0	20
031	FILE CABINET	04/27/1990	7y 0m	DB200 / HY	43	179	0	43	0	0	43
032	USED DESK	04/30/1990	7y 0m	DB200 / HY	70	179	0	70	0	0	70
033	2 USED SEC CHAIRS	04/30/1990	5y 0m	DB200 / HY	40	179	0	40	0	0	40
034	12 CLOTH STACK CHAIR	04/30/1990	7y 0m	DB200 / HY	150	179	0	150	0	0	150
035	WINDOW BLINDS	04/30/1990	10y 0m	DB200 / HY	228	179	0	228	0	0	228
036	4 FOLDING TABLES	04/30/1990	7y 0m	DB200 / HY	129	179	0	129	0	0	129
037	BOOKSHELF	04/30/1990	5y 0m	DB200 / HY	61	179	0	61	0	0	61
038	4 DRAWER FILE CAB	05/05/1990	7y 0m	DB200 / HY	53	179	0	53	0	0	53

Department

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CONNECTIONS FOR INDEPENDENT LIVING 74-2418249

Reporting Period October 1, 2000 to September 30, 2001

* Current Amount
+/s/b Reduced by ITC/
Salvage Value/Both
F/P Full/Partial Retirement

Asset ID	Description	Placed in Service	Life	Method/ Convention	Cost	Section 179	Depreciable Basis	Prior	Depreciation		Accumulated
									Current	Current	
039	286 COMPUTER	05/21/1990	5y 0m	DB200 / HY	1,240	0	1,240	1,240	0	0	1,240
040	A/B COMP SWITCH	05/21/1990	5y 0m	DB200 / HY	27	0	27	27	0	0	27
041	PANASONIC PRINTER	05/21/1990	5y 0m	DB200 / HY	195	0	195	195	0	0	195
042	OKIDATA WIDE PRINTEF	05/21/1990	5y 0m	DB200 / HY	249	0	249	249	0	0	249
043	TDD MINICOM	08/31/1990	5y 0m	DB200 / HY	160	0	160	160	0	0	160
044	MINICOM TDD 1 OF 9	09/22/1992	5y 0m	DB200 / HY	234	0	234	222	0	0	222
045	MINICOM TDD 2 OF 9	09/22/1992	5y 0m	DB200 / HY	234	0	234	222	0	0	222
046	MINICOM TDD 3 OF 9	09/22/1992	5y 0m	DB200 / HY	234	0	234	222	0	0	222
047	7 USED VU PHONES	09/22/1992	5y 0m	DB200 / HY	682	0	682	648	0	0	648
048	BRAILLE PRINTER	03/01/1995	5y 0m	DB200 / HY	1,600	0	1,600	1,260	0	0	1,260
049	SCANNER	03/01/1995	5y 0m	DB200 / HY	995	0	995	785	0	0	785
050	MCW COMPUTER	03/01/1995	5y 0m	DB200 / HY	1,400	0	1,400	1,103	0	0	1,103
051	COMPAQ 774 CDS	10/03/1995	5y 0m	DB200 / HY	3,098	0	3,098	2,238	0	0	2,238
052	COMPAQ 774	10/03/1995	5y 0m	DB200 / HY	1,394	0	1,394	1,008	0	0	1,008
053	XEROX 5016 COPIER	10/03/1995	5y 0m	DB200 / HY	3,999	0	3,999	2,890	0	0	2,890
054	COMPUTER	04/25/2000	5y 0m	DB200 / HY	3,373	0	3,373	675	1,079	1,079	1,754
055	800C GATEWAY COMPU	05/11/2001	5y 0m	DB200 / HY	863	0	863	0	173	173	173

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CONNECTIONS FOR INDEPENDENT LIVING 74-2418249

Reporting Period October 1, 2000 to September 30, 2001

* Current Amount
+s/b Reduced by ITC/
F/P Full/Partial Retirement
Salvage Value/Both

Asset ID	Description	Placed in Service	Life	Method/ Convention	Cost	Section 179	Depreciable Basis	Prior	Depreciation		Accumulated
									Current	Current	
Total for Department											
	Beginning Balances for Department				23,484	0	23,484	16,624	1,252	1,252	17,876
	Asset Additions for Department				22,621	0	22,621	16,624	1,079	1,079	17,703
	Asset Retirements for Department				863	0	863	0	173	173	173
	Ending Balances for Department				23,484	0	23,484	16,624	1,252	1,252	17,876
Grand Total for CONNECTIONS FOR INDEPENDENT LIVING											
	Beginning Balances				22,621	0	22,621	16,624	1,079	1,079	17,703
	Asset Additions				863	0	863	0	173	173	173
	Asset Retirement				0	0	0	0	0	0	0
	Ending Balances				23,484	0	23,484	16,624	1,252	1,252	17,876
Adjustments Due to Rounding											
	Beginning Balances				22,621 00	0 00	22,621 00	16,624 00	1,079 00	1,079 00	17,703 00
	Adjustments due to rounding				0 00	0 00	0 00	0 00	0 20	0 20	0 20
	Beginning Balance after adjustment				22,621 00	0 00	22,621 00	16,624 00	1,079 20	1,079 20	17,703 20
	Ending Balances				23,484 00	0 00	23,484 00	16,624 00	1,252 00	1,252 00	17,876 00
	Adjustments due to rounding				0 00	0 00	0 00	0 00	(0 20)	(0 20)	(0 20)
	Ending Balance after adjustment				23,484 00	0 00	23,484 00	16,624 00	1,251 80	1,251 80	17,875 80
Total Number of Assets on Report 55											

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
WINE TASTING EVENT	14,325.	5,795.	8,530.	8,530.	0.
TO FM 990, PART I, LINE 9	14,325.	5,795.	8,530.	8,530.	0.

FORM 990 OTHER ASSETS STATEMENT 2

DESCRIPTION	AMOUNT
UNCONDITIONAL PROMISES TO GIVE	45,159.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	45,159.

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 3

LENDER'S NAME TERMS OF REPAYMENT

IRS-INSTALLMENT AGREEMENT-W/H TAXES

DATE OF NOTE MATURITY DATE ORIGINAL LOAN AMOUNT INTEREST RATE

0. .00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION BALANCE DUE

0. 1,488.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 1,488.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 4

DESCRIPTION AMOUNT

SPECIAL EVENT DIRECT REVENUE 8,530.

TOTAL TO FORM 990, PART IV-A 8,530.

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 5

DESCRIPTION AMOUNT

SPECIAL EVENT DIRECT EXPENSES 8,530.

TOTAL TO FORM 990, PART IV-B 8,530.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 6

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BETH DANIELSON 1024 9TH AVENUE GREELEY, CO 80682	EXEC DIRECTOR 40 PLUS	38,333.	1,717.	0.
JIM DIEHL 1521 30TH AVEUNE GREELEY, CO 80634	PRESIDENT 1-2	0.	0.	0.
KEITH MCINTYRE 525 COLLINS ST EATON, CO 80615	PRES ELECT 1-2	0.	0.	0.
LINDA WINTER 24959 WCR 66 GREELEY, CO 80631	SECRETARY 1-2	0.	0.	0.
ALVINA LANG 3427 WINDMILL CT EVANS, CO 80620	TREASURER 1-2	0.	0.	0.
JIM ADAMS 19668 WCR 74 EATON, CO 80615	DIRECTOR 1-2	0.	0.	0.
BOB CARON 822 7TH STREET # 4 GREELEY, CO 80631	DIRECTOR 1-2	0.	0.	0.
DOUG DANE 1113 SIMPSON ST PO BOX 375 FT MORGAN, CO 80701	DIRECTOR 1-2	0.	0.	0.
DOROTHY LOFTUS-NALL 4329 1ST STREET GREELEY, CO 80634	DIRECTOR 1-2	0.	0.	0.
RONNIE LOPEZ 1110 7TH AVE GREELEY, CO 80631	DIRECTOR 1-2	0.	0.	0.
WALLY SCHREIBER 1432 11TH STREET GREELEY, CO 80631	DIRECTOR 1-2	0.	0.	0.

CONNECTIONS FOR INDEPENDENT LIVING

74-2418249

MATTHEW SCHUMAN 1726 8TH AVENUE # 2 GREELEY, CO 80631	DIRECTOR 1-2	0.	0.	0.
ARTHUR STONE 4543 CARLSBAD DR GREELEY, CO 80634	DIRECTOR 1-2	0.	0.	0.
KARL DUKSTEIN 1321 12TH STREET GREELEY, CO 80631	DIRECTOR 1-2	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V

38,333.	1,717.	0.
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SCHEDULE A OTHER INCOME STATEMENT 7

DESCRIPTION	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT	1996 AMOUNT
MISCELLANEOUS	5,281.	6,203.	2,253.	1,487.
TOTAL TO SCHEDULE A, LINE 22	5,281.	6,203.	2,253.	1,487.