Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Orien to Public

OMB No. 1545-9947

Dogge	ment of	the Treasury	▶ Do not enter Social Security numbers on this form as it may be m ▶ Information about Form 990 and its Instructions is at www.lrs.g	age public.		Inspection
intern						
AI	or the	2013 calend	ar year, or tax year beginning 07-01 , 2013, and er	nding	06-	
	Inack d		Employer Identification no.			
	Address :	change	Doing Business As			62-0723592
	Jame ch	enge	Number and street (or P.O. box if mail to not delivered to street address)	Room/suite	E	Telephone number
ñ.	nilial rate	ım.	319 SOUTH 4TH STREET	<u> </u>		(615)244-4802
\equiv	eminali		City or town, state or province, country, and ZIP or foreign postal code			1,016,353
=	/mender	- 1	NASHVILLE, TN 37206		G	Gross receipts 5
=		in pending	F Name and address of pancipal officer:	Mint le érie a er	nen tatel	miler cm
L	(pp::sum	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		H(a) Is this a gr subordinat	1237	Yes X No
		npl status: X	501(c)(3)	H(b) Are all sub	endinale	s includes? Tyes ho (see Instructions) umber
	Vebsite:		CTR.ORG	H(c) Group exc	mption n	umber ≯
		manization: X				domicile: TM
к г Ра		Summar	V			
1, 4		Decordored	be the organization's mission or most significant activities: THE MISSION OF S	SAMARITAN R	ECOV	ERY COMMUNITY
	1	THE WO DE	OVIDE THE HIGHEST QUALITY OF CARE POSSIBLE TO PEOPLE WI	HO ARE SUFF	ERIN	G FROM
8		IS TO PRO	E USE DISORDERS OR CO-OCCURING DISORDERS IN AN ENVIRON	MENT THAT P	RESE	RVES AND
ıan	İ	SUBSTANC	THE DIGNITY OF THE PERSONS SERVED.			
Activities & Governance	١	PRUMUTES	ox ► ☐ If the organization discontinued its operations or disposed of more than 25% of	i its net assets.		
é	2	Check this bu	oting members of the governing body (Part VI, line 1a)		3	9
ಷ	3	Number of vo	oling members of the governing body (Part VI, line 1a)		4	9
59	4	Number of in	dependent voting memoers of the governing body (Fact Village Sal)		5	30
₹	5	Total number	of individuals employed in calendar year 2013 (Part V, line 2a)		6	10
Ā	6	Total number	of volunteers (estimate if necessary)		7a	0
•	7 ₄	Total unrelate	ed business revenue from Part VIII, column (C), line 12		7b	0
	b	Net unrelated	business taxable income from Form 990-T, line 34	Prior Your	L <u>'</u>	Current Year
				1,681	198	1,469,075
	8	Contributions	and grants (Part VIII, line 1h)		,235	
Revonue	9	Program serv	rice revenue (Part VIII, line 2g)		,993	56,191
	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		,177	
ĕ	11	Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12	Total revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,874	1247	2,003,200
	13	Grants and s	Imilar amounts paid (Part IX, column (A), lines 1-3)			0
	14	Benefits pald		959,155		
£3	15	Salaries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)	1,109	, 648	777.
Expenses	16a	Professional	fundraising fees (Part IX, column (A), line 11e)	terify terror and a sit polestors.		
pad	Į b	Total fundrals	sing expenses (Part IX, column (D), fine 25) >0			
Щ	17	Other expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		,660	
	18	Total expens	es. Add lines 13-17 (must equal Part iX, column (A), line 25)	1,935		
	19	Revenue less	s expenses. Subtract line 18 from line 12		, 259	
5 5 5				Beginning of Curreni		End of Year
Net Assota Fund Baismo	20	Total assets	(Part X. line 16)	2,831		2,839,008
¥2 12	21		s (Part X, line 26)	97	,485	
훒	22	Net assets or	fund balances. Subtract line 21 from line 20	2,734	,170	2,753,379
Pal	+ 113	Signatu	re Block			
			the host of my	inowledge and ballof.	ii is	
true, c	arract, ar	id complete. Decl	are that I have examined the return, including accompanying screening and some statements and to the property are the property from officer) is passed on all information of which proparer has any knowledge.	····	1	
		№ дони	YORK Dela Yal			11/7/14
Sign	n		e of officer		Date	/ /
Her		<i>r</i> -	YORK, EXECUTIVE DIRECTOR			
. ,	-	19k	orint name and/rite			
		Print/Type pre	C a a fill Date	Check _	ii b	TIN
Paid	i		LENFANT CPA DIN CONTROL OF 2014	self-employ	ea	P00285790
	parer		BELLENFANT & MILES PLLC	Firm's EIN ≯		
	Only			Երգու տա		
-36	Om	1 11111 2 41/11/11/23	BRENTWOOD TN 37027	6.	15-3	70-6700
5/121/	the ID	I discuse this	return with the preparer shown above? (see instructions)			🔀 Yes 🗌 No
** 1 P Y						

	990 (2013) SAMARITAN RECOVERY COMMUNITY, INC. 62-0723592 Page 2
	Or to the Account Service Accomplishments
rai	Statement of Program Service Accompnishments Check if Schedule O contains a response or note to any line in this Part III
	Check If Schedule O contains a response of note to dry line in the
1	Briefly describe the organization's mission:
	THE MISSION OF SAMARITAN RECOVERY COMMUNITY IS TO PROVIDE THE HIGHEST QUALITY OF CARE
	THE MISSION OF SAMARITAN RECOVERY COMMUNITY IS TO TROY POSSIBLE TO PEOPLE WHO ARE SUFFERING FROM SUBSTANCE USE DISORDERS OR CO-OCCURING DISORDERS IN
	AN ENVIRONMENT THAT PRESERVES AND PROMOTES THE DIGNITY OF THE PERSONS SERVED.
2	Did the organization undertake any significant program services during the year which were not listed on the
4	Did lhe organization undertake any significant program services during the year Which violation and program services during the year which will be program services and program services during the year which will be program to the year which will be year which will be year.
	buot Latur and ot and the second of the seco
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	Did the organization cease conducting, or make significant changes affect to the organization cease conducting, or make significant changes affect to the organization cease conducting. Yes
	rome at the three phanese on Schodula O
4	and the standard and the second services accomplishments for each of its three largest program services, as measured by
-7	Describe the organization's program service accomplishments to organizations are required to report the amount of grants and allocations to others, expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, it any, for each program services
	(Code:) (Expenses S 1,496,758 including grants of S) (Revenue S 1,665,183)
4a	(Code:) (Expenses 5 1,496,756 including grains of To PROVIDE THE HIGHEST ONALTTY OF CARE
	(Code:) (Expenses 5 1,230,730 MILITY, INC. IS TO PROVIDE THE HIGHEST QUALITY OF CARE THE MISSION OF SAMARITAN RECOVERY COMMUNITY, INC. IS TO PROVIDE THE HIGHEST QUALITY OF CARE
	THE PROPERTY AND STREETING FROM STREETANCE USE DISURDERS OR CO-OCCURRENCE DISURDERS
	THE PERSONS SERVED RECOMMEND THE DIGNITY OF THE PERSONS SERVED RELIGIOUS
	IN AN ENVIRONMENT THAT PRESERVES AND PROMOTED THE SOCIAL CIRCUMSTANCE, SEXUAL DRIENTATION, OR REGARD TO RACE, COLOR, CREED, GENDER, ECONOMIC OR SOCIAL CIRCUMSTANCE, SEXUAL DRIENTATION, OR
	NATIONAL ORIGIN.
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$including grants of \$) (Revenue 5
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4¢	(Code:) (Expenses \$ Including grants of \$) (Revenue \$
<u> </u>	Olly and a service of Describe in Schedule ()
4đ	Other program services. (Describe in Schedule O.) (Revenue 5)
	(Expenses S including grants of \$\tag{\text{including grants of }\tag{\text{v}}}
4e	Total program service expenses ► 1,496,758 Form 990 (2013)

	TIV Checklist of Required Schedules	 -	<u>1</u>	
Line			Yos	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		ا ۔۔	
•	complete Schedule A	_1_	Х	
_	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		İ	
4	Section 501(c)(3) organizations. Did title digatilization engage in cooping common and a section for the law year? If "Yes " complete Schedule C. Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.		ł	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedula C,	5		Χ
	Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		Х
	"Yes," complete Schedule D, Part 1			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
	the environment, bistoric land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the prognization maintain collections of works of art, historical treasures, or other similar assets (1) Tes.	8	[х
	complete Schedule D. Partill			
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a		- 1	
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			Х
	debt pendilation services? If "Yes." complete Schedule D, Part IV	9		<u> </u>
10	Did the crospization, directly or through a related organization, hold assets in temporarily restricted			X
	andowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	501720	<u>^</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		6.65	
	Vit Vit IX or X as applicable.	iana di	MMG	15,754 pr
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes,"		٠,	
		11a	X	
h	Did the prognization report an amount for investments - other securities in Part X, line 12 that is 6% or more	١		v
	of the total assate conorded in Part X. line 167 If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			₩.
	of its total assist reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
rī	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			7.5
_	reported in Part Y line 167 ff "Yes," complete Schedule D, Part IX	11d		X
В	Tild the amonization report as amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
ſ	Did the amenication's separate or consolidated financial statements for the tax year include a tootnote that addresses		٠,	
-	the crondization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Sehedula D. Pade XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			٦,
-	the amanization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the prognization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the openization maintain an office, employees, or agents outside of the United States?	14a		Λ
b	Did the organization have apprepate revenues or expenses of more than \$10,000 from grantmaking.			
•	fundations, business, investment, and program service activities outside the United States, or aggregate]		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	146		X
15	Did the proprieting report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
1.5	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	But the appropriate and an Boot IV, column (A) line 3, more than \$5,000 of appreciate grants or other	}		
10	essistance to prior foreign individuals? If "Yes." complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			i
* /	Pert IX column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Bid the exercised report more than \$15 ONO total of fundraising event gross income and contributions on	l .		١,,
10	the Will lines to and 8a? If "Yes" complete Schedule G. Part II	18	<u> </u>	X
19	Did the proprietation report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a r			٠,
,	If "Yes " complete Schedula G. Part III	19	<u> </u>	X
20a	Did the prognization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
 b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	205	1	P0421
		⊢om	990 (ZU (3)

Did the organization report more than \$5,000 of grants or other assistance to any domustic organization or grants. Column (A), line 19 if "Yes," complete Schedule I. Parts I and II 21 X 22 X 32 Did the organization report more than \$5,000 of grants or other assistance to individual bits in the United States on Part IX, column (A), line 27 if "Yes," complete Schedule I. Parts I and III 22 X 32 X 33 Did the organization cover more than \$5,000 of grants or her assistance to individual bits in the United States on Part IX, column (A), line 27 if "Yes," complete Schedule V. Bart III 32 X 42 X 33 Did the organization cover the organization Annual Assistance of the III 32 X 34 X 44 X 44 X 44 X 44 X 44 X 44 X	Pa	t IV. Checklist of Required Schedules (continued)		T 1	
poverment on Part IX, Column (A), Ibar 17 II "Yes", complete Schedule I, Parts I and II 20 Did the organization report more barn \$5,000 of grants or other assistance to individuals in the United States and Part IX, Column (A), Yes 27 II "Yes", complete Schedule I, Parts I and III 21 Did the organization survers and Samon of the survey of the parts I and III 22 Did the organization survers and Samon of the survey of the parts I and III 23 Did the organization have a tax everent broad issue with an culturating principal amount of more files 31 Did the organization have a tax everent broad issue with an eculturating principal amount of more files 31 Did the organization have a tax everent broad issue with an eculturating principal amount of more files 32 Tay and the last day of the year, that was issued after Decomption 51, 20022 II "Yes", anawer lines 24b 33 Did the organization invest any proceeds of tax-exercit broads and serve becoming 51, 20022 II "Yes", anawer lines 24b 34 Did the organization invest any proceeds of tax-exercit broads or the last of the parts of the server and the server account of the throad naturation of the server account of the server accou	(1),000		···	Yes	Na
poverment on Part IX, Column (A), Ibar 17 II "Yes", complete Schedule I, Parts I and II 20 Did the organization report more barn \$5,000 of grants or other assistance to individuals in the United States and Part IX, Column (A), Yes 27 II "Yes", complete Schedule I, Parts I and III 21 Did the organization survers and Samon of the survey of the parts I and III 22 Did the organization survers and Samon of the survey of the parts I and III 23 Did the organization have a tax everent broad issue with an culturating principal amount of more files 31 Did the organization have a tax everent broad issue with an eculturating principal amount of more files 31 Did the organization have a tax everent broad issue with an eculturating principal amount of more files 32 Tay and the last day of the year, that was issued after Decomption 51, 20022 II "Yes", anawer lines 24b 33 Did the organization invest any proceeds of tax-exercit broads and serve becoming 51, 20022 II "Yes", anawer lines 24b 34 Did the organization invest any proceeds of tax-exercit broads or the last of the parts of the server and the server account of the throad naturation of the server account of the server accou	71	Did the organization regort more than \$5,000 of grants or other assistance to any domestic organization or			7.5
22 X an Part IX. Costem (A), line 27 IV-xg. "complete Schedule Parts is ontil 1 23 Did the organization answer Year large x IVI, Section A in as 3.4, or 6 should compensation of the organization answer Year large x IVI, Section A in as 3.4, or 6 should compensation of the organization scrums and firmer officers, discolor, instease, key employees, and highest compensated employees? If Year complete Schedule X x value large x	<i>-</i> 1	covernment on Part IX column (A), line 1? If "Yes," complete Scheudle I, Parts I and II	21	<u> </u>	
on Part IX. cabarna (A), five 27 if "Year," complete Schedule I, Parta I and III Did the organization saver" size in Part IVI, Section A. Iline 3, 4 or 8 should compensated employees? If "Yes", complete Schedule I, and the property of the Part IVI, Section A. Iline 3, 4 or 8 should compensate employees? If "Yes", complete Schedule I, and the property of the property in the property of the property in the property of the property in the property of the prope	77	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			-v-
23 In the organization answer "Yes" to Pen VII, Section A, Isine 3. 4, or 6 stood compensation of well organizations current and foremer officers, discontine, fixuales, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 In the well of the last day of the year, that was leaved after December 31, 2002? If "Yes," answer inso 24b through 24d and complete Schedule K. If "No", go in line 25a in 25a		on Part IX column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		
amphixed In Yes, Complete Schedule J. 23 X 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of notre than 510,000 as of the last day of the yesr, that was seve darke December 31, 2002? If Yes, "answer lines 24b 15 through 24d and complete Schedule K, If Yeo," go to line 23a 15 Did the organization invest any proceedes of tax-exempt bonds beyond a temporary profod exception? 24 Did the organization invest any proceedes of tax-exempt bends beyond a temporary profod exception? 25 Did the organization invest any proceedes of tax-exempt bends beyond a temporary profod exception? 26 Did the organization invest any proceedes of tax-exempt bends beyond a temporary profod exception? 27 Did the organization and 501(c)[4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 28 Socious 901(c)[3] and 501(c)[4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a first profit to the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E2? 29 Did the organization evera my amount on Part X, line 9, 6, er 22 for receivables from or payables to any current or former offices, directors, fusities, key employees, highwat compensation exproves and my amount on Part X, line 9, 6, er 22 for receivables from or payables to any current or former offices, directors, fusities, key employees, highwat compensation exproves are grant or other assistance to an officer, director, fusities, key employee, substantial contributor or employee thereof, a grant selection current former officer, director, fusities, and exceptions; 29 Did the organization are grant or other assistance to an officer, director, fusities, fusities, and exceptions; 29 Did the organization are grant or other assistance to an officer, director, fusities, and exce	22	Did the omanization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
employees? If "Yes," complete Schedule J 240 Dit the regnanziation have a tax-exempt bond issue with an outstanding principal amount of more than 3100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," canwer fines 24b 340 Did the organization invest any proceeds of sur-exempt bonds beyond a temporary period exception? 241 Did the organization ministal an escrow account other than a refurding secrow at any time during the year? 242 to delease any lax-exempt bonds? 243 Did the organization and as an "on behalf of Issuer for bonds outstanding at any time during the year? 244 Did the organization and as an "on behalf of Issuer for bonds outstanding at any time during the year? 245 Section 501(3) and 501(4)(4) organization. Bid the organization engage is an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 255 Section 501(3) and 501(4) organization. Bid the organization engage is an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 590 or 990-E27 256 If the organization are the proper of the organization prior Forms 590 or 990-E27 257 Section 501 Schedule I, Part II 258 Did the organization prior year and the the transaction of Part X, lines 5, 6, or 22 for receivables from or payatites to any current or former officers, directors, trusteos, key employees, brightest compensated employees, or disqualified person? If if yes, organization prior Forms 590 or 990-E27 259 Did the organization provide a grant or other assistance be an officer, director, fusitee, key employees, or disqualified contributor or employee thereol, a grant selection currentifities member or to a 59% contribed analty or fraction in the prior of the prior of the enganization provide a grant or other assistance be an officer, director, fusitee, key employee? If Yes, complete Schedule I, Part IV 250 A neithy of which is current or former		expositation's gurrent and former officers, directors, trustees, key employees, and highest compensated			3.7
24a Dit the organization have a tax-exempt bond issue with an outstanding principal amount of more trains 510,000 as of the last day of the year, that was seaved after December 31, 2002 if "Yeas," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a Did the organization maintain an exerce account other than a refunding estrow at any time during the year Did the organization maintain an exerce account other than a refunding estrow at any time during the year Did the organization as an "on behalf of Issuer for bonds outstanding at any time during the year? 24d Did the organization as an "on behalf of Issuer for bonds outstanding at any time during the year? 24d Did the organization avaire that it engaged in an excess benefit transaction with a disqualified person in a prince year, and that the transaction has not been reported un any of the organization person in a prince year, and that the transaction has not been reported un any of the organization person in a prince year, and that the transaction has not been reported un any of the organization person of 980-E27 If "Yes," complete Schedule L, Part I Did the organization report only amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourset or former officers, directors, fursiens, key employees, highest compensated employees, or		amployees 7 If "Yes 1 complete Schedule J	23		
S100.000 as of the leat day of the year, that was issued after December 37, 2002/11 "Yes, answer interest through 24 dand complete Schedule K. I. "No.", go to line 250 or 10 days and the property period exception? Did the organization invest any proceeds of bux-excerng bends beyond a temporary period exception? Did the organization invest any proceeds of bux-excerng bends beyond a temporary period exception? Did the organization invest any proceeds of bux-excerng bends beyond a temporary period exception? Did the organization and as an "on behalf of Issuer for bonds outstanding at any time during the year? Did the organization exerned bear of the process of the transaction was any time during the year? Did the organization exerned bear is engaged in on excess boent transaction was any time during the year? If "Yes," occeptiols Schedule L, Parl I Is the organization exerned his engaged in on excess boent transaction which a dequalitied person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Parl I Did the organization reproduce any amount on Parl X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustess, key employees, highest compensated employees, or disqualified person if any of these persons? If "Yes," complete Schedule L, Parl II Did the organization provide a grant or other assistance to an officer, director, trustes, key employee, substantial contributor or employee thereat, a grant selection, committee employee, or a 55% controlled anity or family member of sany of these persons? If "Yes," complete Schedule L, Parl II Was the organization or former officer, director, trustes, or key employee? If "Yes," complete Schedule L, Parl IV A nearby or former officer, director, trustes, or key employee? If "Yes," complete Schedule L, Parl IV A nearby or former officer, director, trustes, or key employee? If "Yes," complete Schedule II, Parl IV A nearby	245	Did the exceptation have a tax-exempt bond issue with an oulstanding principal amount of more than			
brough 24d and complete Schedule K, If No.7 go to line 25a Did the organization minest any proceeds of turn-excempt broads beyond a temporary period exception? Did the organization maintain an excrow account other than a refunding secrow at any time during the year' to defease any tax-exempt bonds? Did the organization maintain an excrow account other than a refunding secrow at any time during the year? 24d Did the organization and sort (p(4) organizations. Did the organization engage in an excess benefit transaction with a dequalified person in a prior year, and the title entanaction that not been reported on any of the organization with a dequalified person in a prior year, and the title entanaction has not been reported on any of the organization's prior Forms 990 or 990-E27 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, develors, fusitions, key employees, highest comparabled employees, or disqualified persons? If so, complete Schedule L, Part I Did the organization provide a grant or other anselsation to be notificer, director, fusities, key employee, substantial contributior or employee thereof, a grant selection committee member, or to a 35% controlled substantial contributior or employee thereof, a grant selection committee member, or to a 35% controlled any of these persons? If Yes, complete Schedule L, Part II Was the organization appricable filter fusition, and exceptions? Part IV instructions for applicable filting thresholds, conditions, and exceptions? A current of former officer, director, fusites, or key employee? If Yes, complete Schedule L, Part IV A family member of a current or former officer, director, fusites, or key employee? If Yes, complete Schedule L, Part IV A family member of a current or former officer, director, fusites, or key employee? If Yes, complete Schedule L, Part IV A nonlity of which a current or former officer, director, fusites, or key employee? If Yes, complete Schedule R, Part II,	<u> 2</u> -7u	Stop not as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 249			v
b Did the organization invest any proceeds of tax-excent bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding servor at any time during the year to deferee any tax-excenty bonds? 24d John the organization and as as in on behall of its suer for bonds outstanding at any time during the year? 24d John the organization and as as in on behall of its suer for bonds outstanding at any time during the year? 25d Suction 501((2)) and 501((2)) arganizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the irransaction has not been reported on any of the organization reported on any of the organizations prior Forms 990 or 990-E2? 17 "Yes," complete Schedule L, Part I 25b J X 27D Old the organization evarate that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the irransaction has not been reported on any of the organizations prior Forms 990 or 990-E2? 17 "Yes," complete Schedule L, Part II 27D Old the organization provide a grant or other assistance to an officer, director, frustee, key employees, or disqualified persons? If so, complete Schedule L, Part II 27D Us the organization provide a grant or other assistance to an officer, director, frustee, key employees, substanied contributor or employee thereol, a grant selection complete Schedule L, Part III 28D Was the organization as party to a business transaction with one of the following persies (see Schedule L, Part IV 28D A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV 28D A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV 28D A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV 28D Old the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II 29D Old the organization re		through 24d and complete Schedule K. If "No." go to line 25a			_ <u></u> _
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Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV Instructions for applicable filling thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X. A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X. An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28c X. In the organization receive contributions of art, historical treasures, or other similar assets, or qualified 29c X. In the organization receive contributions of art, historical treasures, or other similar assets, or qualified 29c X. In the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 31 X. In the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 33 X. Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, 34 X. So Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X. If "Yes" to line 35a, did the organization receive any paymant from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X. Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X. Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that its treated as a partnership for federal income tax purposes? If "Y		substantial continuous or employee stereor, a grant second complete Schedule L, Part III	27		X
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Form 990 (2013)

Part V Statements Regarding Other IRS Fillings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	Yes X	No No
Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this relum Statements, filled for the calendar year ending with or within the year covered by this relum If at least one is reported on line 2a, did the organization file all required federal employment tax relums? Noto. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a linencial account in a foreign country (such as a bank account, securities account, or other financial account?) If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the lax year? Did any taxable party notify the organization file Form 8866-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).	X	No
Enter the number reported in Box 3 of Form 1096. Enter -0- in not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return Statements, filled for the calendar year ending with or within the year covered by this return 2a 30 bif at least one is reported on line 2a, did the organization file all required to e-file (see instructions) 3b Did the organization have unrelated business gross Income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross Income of \$1,000 or more during the year? 3a Did the organization apont or for this year? If "No" to line 3b, provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8866-T? 5c Drives t		
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b If "Yes," did the organization include with every solicitation an express statement that such continuously of gifts were not tax deductible?		- <u></u>
gifts were not lax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 7 Did the granization receive a navment in excess of \$75 made partly as a contribution and partly for goods		
7 Organizations that may receive a payment in excess of \$75 made partly as a contribution and partly for goods	11111111	3.77.77.27
Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		
to the provided on the power?		<u>X</u>
7b		
The state of the s		
		X
required to file Form 8282?		11597/4
at 16"Vas * indicate the number of Forms 6282 tiled oursily tile year		X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
F. Tild the consideration, during the year, pay premiums, directly or indirectly, on a personal beneat contract:		
n. If the proportization received a contribution of qualified intellection property, did the organization has a first a first and the organization for the contribution of qualified intellection property, did the organization for the contribution of qualified intellection property, and the organization for the contribution of qualified intellection property.		
b. If the proprietion meniced a contribution of cars, boats, airplanes, or other vehicles, did the organization nie a norm 1999-27		100.4
R Sponsoring grounizations maintaining donor advised funds and section 509(a)(3) supporting		
organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		- #2// ·
organization, have excess business holdings at any time during the year?	#1 (w i 14)	315/11/2
o Spengaring organizations maintaining donor advised funds.	ragion po	7.7
a Did the organization make any texable distributions under section 49667		
b Did the organization make a distribution to a donor, donor advisor, or related person?	. Historia	227 (5.5)
40 Region 604/eV7) group/rations. Folet:		
Street Park and another contributions included on Part VIII line 12		1.46
the state of the s	4.45 1	8.5
The sea physical design of the sea of the se		
to the part and amounts due or paid to other sources	177	
against amounts due or received from them.)		
against amounts due or received from filear.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10417 12b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the digardant form the unit of the		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>
a le the grospization licensed to issue qualified health plans in more than one state?	12:0	
Note. See the instructions for additional Information the organization must report on Schedule O.	No.	1367
b. Enter the amount of reserves the groanization is required to maintain by the states in which	144	
the americation is licensed to issue qualified health plans		122
e. Enter the amount of reserves on hand) <u> </u>	X
14a Did the proprietion receive any payments for indoor tanning services during the tax year?		1 1
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Form	990	(2013)

SAMARITAN RECOVERY COMMUNITY, INC.

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

Check If Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the

- organization's tax year. List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	Ī		(C	;)			(D)	(E)	(F)
Name and Title	Average hours per week (list any neurs fer related	bax, u	៧មន	pers	ore th	an one both an trustee)		Reponable compansation from the organization	Reportable compensation from related organizations (W-Z/1099-MISC)	Eslimated amount of other compensation from the
	organizationa below dotted line)	Individual faustien		Officer		7	Fanner	(W-2/1099-MISC)		erganization and related organizations
(1) BETTY BENOIT TRUSTEE	1.00	х							0	0
(2) WALKER CHOPPIN VICE CHAIRMAN	2.00	X		х					0	0_
(3) MIKE COODE TRUSTEE	1.00_	x						(0	0
(4) KIM FREDRICKSON TROSTEE	1.00	X							D	O
(5) TODD FRIEDENBERG CHAIRMAN	2.00	x		X				(0	00
[6] STACEY GARRETT TRUSTEE	1.00	Х							0	0
(7) HANK GILDEMEISTER TRUSTEE	1.00	X						(0	0
(8) MONA LISA MCGHEE TRUSTEE	1.00	x							0	O
(9) JULIE SMITH	1.00	Х							0	0
(10)										
[11]										
(12)										
[13]										
(14)					<u> </u>					Form 990 (2013)

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd	High	est	Comp	ens	ated Employees (Continued	753
444.444.5	(A)	(6)			ło	;)			(u)	\1	(F) Estimated
	Name and fille	Averago	(du r:	ot cho	Posi sk m		an pre		Reportable compensation	Reportable compensation from	
		hours per week (list any	bez, t	untesi	s pers	en is	both an		from	related	elher compensation
		hours for	ollica	r					the organizalish	organizations (W-2/1099-MISC)	from the
		tetated enaitesinemo	Individual trustee or director	Institutional Irus	Officer	Key emplayed	Highest compensated	Farmar	(W-2/1099-MISC)		orgenization
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16	Sub-total				• •			>			
c	Total from continuation sheets to Part VII, Section	on A.			- •			>			0
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2	Total number of Individuals (including but not limited	l to those list	ed abo	ive)	Who	160	eived r	more	than STUU,UUU oi		0
	reportable compensation from the organization 🕨										Yes No
		1		احاد	,00	or bi	inhaet	rom	nensated		
3	Did the organization list any former officer, director employee on line 1a? If "Yes," complete Schedule	, or nusiee, r	iuidusi	ipiu) I	GC,	O; (3)	911444				3 X
	For any individual listed on line 1a, is the sum of rep	ndable com	nensa	ion :	and:	oihe	r comi	bens	allon from the		
4	organization and related organizations greater than	S150.0007 II	"Yes.	* ca	mple	ete S	chedu	ile J	for such		
	individual								. ,		4 X
5	Did any person listed on line 1a receive or accrue of	ompensation	ताकारे व	апу	unro	ılate	d orga	nlza	lion or individual		
-	for services rendered to the organization? If "Yes,"	complete Scl	hedule	Jf⊏	rsu	ch p	erson			<u> </u>	5 X
Sect	on B. Independent Contractors										
1	Complain this table for your five biolest compensal	ed independ	ent co	ntrac	ctors	lha	t recei	ved :	more than \$100,00)() ()()	
	compensation from the organization. Report compe	nsation for th	re cale	enda	ryea	ar er	ıding v	yitin c	or within the organ	zauon s lax	
	year.								1 (2)		(C)
	(A)								(B) Description o		Compensation
	Name and business address	arres 7	20	1383	372	219				T SERVICE	216,66
XMI I	HOLDINGS, INC, 618 CHURCH STREET,	BULLE 4	<u>. ,</u>	* *1							
2	Total number of independent contractors (including	but not limite	ed to th	1050	tiste	ed at	ove) i	who			
_	received more than \$100,000 of compensation from	the organiz	ation	⊳						1	Form 990 (2013)

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (D) **(C)** 15) Revenue excluded from tox Unrelated business revence Related or Total revenue exempl function under sections 512-514 revenue 1a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1b 10 c Fundralsing events 1d d Related organizations 18 1,298,720 e Government grants (contributions) . . f All other contributions, gifts, grants, and similar amounts not included above 170,355 g Noncash contributions included in lines 1a-1f; \$ 1,469,075 Total, Add lines ta-tf Business Code 206,386 206,386 623990 2a CLIENT FEES Service Revenue f All other program service revenue 205,386 3 Investment income (including dividends, interest, 34,574 34,574 and other similar amounts) Income from investment of tax-exempt bond proceeds (i) Resi 60.936 6a Gross rents 129,553 b Less; rental expenses (68,617)c Rental income or (loss) . . . (68,617 (68,617 d Net rental income or (loss) . (i) Securities (ii) Other 7a Gross amount from sales of 43,234 assets other than inventory b Less: cost or other basis 21,617 and sales expenses . . . 21,617 c Gain or (loss) 21,617 d Net gain or (loss) 8a Gross income from fundraising Revenue events (not Including \$ of contributions reported on line 1c). Other See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundralsing events 9a Gross Income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities . . . 10a Gross sales of inventory, less returns and allowances b Less; cost of goods sold b c Net income or (loss) from sales of inventory . Business Cods Miscellaneous Revenue 900099 2,148 11a OTHER ь d All other revenue 2,148 e Total, Add lines 11a-11d 36,722 1,665,183 Form 990 (2013)

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check If Schedule O contains a response or note to any line in this Part IX (D) (8) (A) Total expenses Do not include amounts reported on lines 6b, 7b, Management and Program service general expenses expenses expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the United States, See Part IV, line 21 . Grants and other assistance to Individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 51,765 705,785 757,550 Pension plan accruals and contributions (include 1,933 12,173 14,106 section 401(k) and 403(b) employer contributions) 7,938 111,271 119,209 Other employee benefits Q 4,307 63,983 68,290 10 Fees for services (non-employees): 11 51,256 153,258 204,514 b Legal.,..... 7,900 7,900 **对是由此是各种的特别中国的特别的**。 e Professional fundraising services. See Part IV, line 17 . Other, (If line 11g amount exceeds 10% of line 25, column 9,708 45,702 (A) amount, list line 11g expenses on Schedulo O.) . . 55,410 12 814 4,895 5,709 13 14 15 13,903 195,184 209,087 16 7,084 7.084 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 9,845 9,B45 Conferences, conventions, and meetings 19 20 21 82,918 203 B3,121 Depreciation, depletion, and amortization 22 3,121 22,365 25,486 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses in line 24o. If line 24e amount exceeds 10% of line 25, column (A) amount, fist line 24e expenses on Schedule O.) 76,021 76,021 a FOOD 30,870 30,870 b SUPPLIES 31,450 31,450 C EQUIPMENT RENTAL & MAINT. 11,781 11,781 d MISCELLANEOUS 1,496 16,384 14,888 e All other expenses 0 237,059 1,496,758 Total functional expenses. Add lines 1 through 24e 1,733,817 Joint costs. Complete this line only if the organization reported in column (B) Joint costs from a combined educational campaign and fundraising solicitation. Check here 🕟 🗌 if following SOP 98-2 (ASC 958-720) Form 990 (2013)

Par	t:X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	 		
			(A)		(8)
			Beginning of year	<u> </u>	End of year
	1	Cash - non-interest-bearing	22,326	1_1_	124,518
	2	Savings and temporary cash investments	252,418	2	137,505
	3	Pledges and grants receivable, net		3	99,197
	4	Accounts receivable, net	122,795	4	6,565
	5	Loans and other receivables from current and former officers, directors,			
	"	frustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	<u> </u>
	6	Loans and other recolvables from other disqualified persons (as defined under section	网络沙罗克纳马克		14. 14. 14. 14. 14. 14. 14. 14. 14. 14.
	-	4956((X1)), personal described in section 4958(cX3XB), and contributing amployers and		14,5	
		sponsering organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Pari II of Schedule L		5	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
Assots	9	Prepaid expenses and deferred charges	18,759	9	22,668
_	10a	Land, buildings, and equipment cost or			
	100	other basis. Complete Part VI of Schedulc D 10a 2,960,681			
	ь	Less; accumulated depreciation 10b 1,664,919	1,365,910	10c	1,295,762
	11	Investments - publicly traded securities	1,048,263	11	1,152,793
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intendible assets		14	
	15	Other assets. See Part IV, line 11	1,184	15	
		Total assets. Add lines 1 through 15 (must equal line 34)	2,831,655	16	2,839,008
	16	Accounts payable and accrued expenses	97,485	17	85,629
	17 18	Grants payable		18	
		Defend revenue		19	
	19 20	Tax-exempt bond fiabilities		20	
	21	Escrew or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors,			
Jabilities	44	trustees, key employees, highest compensated employees, and			
<u> </u>		disqualified persons. Complete Part II of Schedule L	1	22	
Ï	23	Secured montgages and notes payable to unrelated third parties		23	
	23	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal Income tax, payables to related third			
	20	parties, and other liabilities not included on lines 17-24). Complete Part X			
	ı	of Schedula D		25	
	26	Total Nabilities. Add Ilnes 17 through 25	97,485	26	85,629
	20	Organizations that follow SFAS 117 (ASC 958), check here > X and			
tπ		complete lines 27 through 29, and lines 33 and 34.			
100	27	Unrestricted net assets	2,734,170	27	2,753,379
nia,	28	Temporarily restricted net assets		28	
ED TO	29	Permanently restricted net assets		29	
in in		Organizations that do not follow SFAS 117 (ASC 958), check here and			上的
<u> </u>		complete lines 30 through 34.			
Net Assets of Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
žΑ	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	2,734,170	33	2,753,379
	34	Total liablifies and net assets/fund balances	2,831,655	34	2,839,008
EEA					Form 990 (2013)

Form 990 (2013) SAMARITAN RECOVERY COMMUNITY INC.	62-U/2359	ट । उपूर	
Part YI. Reconciliation of Net Assets		Γ'''	7
Check if Schedule O contains a response or note to any line in this Part XI	- 	1,665,183	<u></u>
1 Total revenue (must equal Part VIII, column (A), line 12)	· 1		
2 Total expenses (must equal Part IX, column (A), line 25)	. 2	1,733,817	
3 Revenue less expenses. Subtract line 2 from line 1	. 3	2,734,170	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	· 4	87,843	
5 Net uprealized pains (losses) on investments,	. 5	87,043	
6 Donated services and use of facilities	' 		
7 Investment expenses			
B Prior period adjustments	. 8	0	 }
9 Other changes in net assets or fund balances (explain in Schedule O)	. 9		_
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1 1	0 753 370	1
33, calumn (B))	. 10	2,753,379	_
Part XII Financial Statements and Reporting			7
Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>) 1	<u>.</u>
1 Accounting method used to prepare the Form 990: Cash Accrual Other		Yes No	
If the organization changed its method of accounting from a prior year or checked "Other," explain in			
Schedule D.		Za X	[
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
If "Yes," check a box below to indicate whether the limitation statements for the year work semiplical statements.			
reviewed on a separate basis, consolidated basis, or both: Separate basis			
		2b X	
b Were the organization's financial statements audited by an independent accountant?		医发展性	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
separate basis, consolidated basis, or both:			
gy departe of the state of the			
of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c X	Č
of the audit, review, or compliation of its linearities statements and set compliant of the lay year, explain in		可能量 生豆硷 基件	- T
If the organization changed either its oversight process or selection process during the tax year, explain in			
Schedule O.		1 1 1	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	. <i></i>	3a X	[
b It "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		36	
required audit or audits, explain why in Schedula O and describe any steps taken to undergo such audits		Form 990 (201)	3)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treesury

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 998 or 990-62) and its instructions is at www.irs.gov/form999.

OMB No. 1545-0947

2013

Open to Public Inspection

		ense acivice	7 (1)(0)(1)(1)						Employer	identificatio	դ դսլաբու		
		organization TAN RECOVERY	COMMUNITARY 7	NTC .					1	723592			
	rt I	Passon for	Public Charity	Status (All organiz	ations m	ust com	plete thi	s part.) S	See instr	uctions.			
The		INCOSOTI TOT I	le foundation becau	se it is: (For lines 1 throu	Jah 11. che	ck only or	e box.)						
	organ	A church coguentio	n of churches or s	ssociation of churches de	escribed in	section 1	70(b)(1)(A)(i).					
1	님	A cabacl decembed	in section 170(b)(1	VAVII) (Attach Schedule	n E.)			,,,,					
2	H	A school described in section 170(b)(1)(A)(ii). (Attach Schedulo E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
3	H	A madical appoint	eranysation coers;	ed in conjunction with a l	hospital de:	cribed in	section 17	'0(b)(1)(A)	(iii). Enter	the			
4				ea in conjunction man o	.,0-μ			, ,, ,, ,	, ,				
_	hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in												
5		section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, state, or it	car government or	governmental dist descri e subslantial part of its st	unnord from	a govern	mental unit	or from th	e ceneral c	ublic			
7	X	An organization that	normally receives	Sansialo Ose il \	spport nom		.,_,,,_,						
	1	described in section	1 17U(B)(T)(A)(VI). (Complete Fett II.)	data Bart II	1							
8	Н	A community trust d	escribed in Section	170(b)(1)(A)(vi). (Comp (1) more than 33 1/3% o	The evener	1 timm con	dribulions	membersh	io fees, an	d aross			
9	Ш	An organization that	normally receives:	(1) more than as 1/3/20	o cadajo e:	centions	and (2) no	more than	33 1/3% c	ıf ils			
		receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses											
		support from gross i	nvesiment income i	30, 1975. See section 5	:ne/-1/91 //	'amplete i	Part III 1						
	-	acquired by the orga	inization after June	d exclusively to test for p	najaytek (See ser	tion 509(a	1(4).					
10	님	An organization orga	inized and operated	d exclusively to the bone	eficial to oc	riorm the i	functions o	n or Enringar	rv out the				
11	Ш	An organization orga	anized and operated	rted organizations descri	ibad in coc	ilon 509/si	1/1) or sect	lion 509/a)	(2). See se	ction			
		purposes of one or r	nore publicly suppo	the type of supporting o	rocolzation	and com	niele lices	11e throud	h 11h.				
					ili Eusation	aliu intend	ated	н Г	Type III-	Non-funtio	nally integrated		
	L	a [Type!	ь 🗌 Тур	e II — c — i ype rganization is not control	m+rujjuu: Ind dienellu	or Indirec	go pa vue i Area	1000					
Ð	ليا	By checking this box	t, i ceruiy that ine o	rganization is not condon ier than one or more pub	diela enuno	ded ornan	ilzallons de	escribed in	section 50	9(a)(1)			
				let than one of more pou	werk antibo	1124 01901							
		or section 509(a)(2).	al.a_d a curittee de	termination from the IRS	that if is a	Tune I Tu	ne II. or Tv	ne III suoc	orting				
f					thick it io a								
		organization, check		ation accepted any gift o				•					
ā			UO, Has the Organic	anou accebied any aura	, 0011111001		,,						
		following persons?	din attendis and section	controls, either alone or	innelher w	lb serson!	s described	d in (II) and			Yes No		
				re supported organization		ui porde					119(i)		
		(iii) delow, the g	governing body or i	ribed in (I) above?	•	• • • • •					11g[ii)		
		(li) A tamily memb	er or a person desc	noso in (i) above r							11g(iii)		
		(III) A 35% controll	en entity of a persor	n described in (i) or (ii) ab							1		
<u>h</u>				the supported organization (iii) Type of organization	(iv) is the cr		(v) Did yo	su natify	(vi) is	the	[vii] Amount of manelary		
	(i) 141	me ci suppeded organizalion	(II) EIN	(described on lines 1-9	in col. (1) Bat		the organi	ization in	organizati		support		
		-	[above or IRC section	gaverning d	pcument?	501. (1) c	of your port?	(I) erganiz U.:				
				(see (astructions))	Yes	No	Yes	No	Yes	No			
					155	1110	1						
(A)													
(51			<u> </u>		 								
(B)													
			 		 	<u> </u>							
(C)													
(D)					<u> </u>		<u> </u>	1	<u> </u>				
(D)													
(E)				7									
\ <u>-</u> }								<u></u> .					
			AUSTRALIS CONTRACTOR	and the second second					344 644	e Great.			

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or If the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Part II

Sec	tion A. Public Support				1	1	(5 T-1-1
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(ь) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,609,129	1,665,512	1,593,223	1,681,198	1,469,075	8,018,137
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					1 150 075	8,018,137
4	Total. Add lines 1 through 3	1,509,129	1,665,512	1,593,223	1,681,198	1,469,075	9,010,131
5	The portion of total contributions by					地區與其中跨到	
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount			建设制设施			
	shown on line 11, column (i)			Alerta Sale		566万年至355年5月 5	1,107,165
6	Public support. Subtract line 5 from line 4			理論等分析指			6,910,972
Sec	tion B. Total Support						
	idar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,609,129	1,665,512	1,593,223	1,681,198	1,469,075	8,018,137
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	101,625	88,011	100,576	148,416	193,960	632,589
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	6,117	37,436	4,252	4,326		54,279 8,705,005
11	Total support. Add lines 7 through 10 .						8,705,005
12	Gross receipts from related activities, etc. (s	ree instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here			n, or fifth tax year a	s a section 501(c)(3)	
	tion C. Computation of Public St Public support percentage for 2013 (line 6, c	ipport Percen	u Pag 11 column /	f))		14	79.39 %
14	Public support percentage for 2013 (line b, c	olumn (1) Givided B	iy nile 11, columii (,,, , , , , , , ,	,,	15	93,27 %
15	Public support percentage from 2012 Sched 33 1/3% support test - 2013. If the organize	ule A, Part II, line	the her on ting 13		/3% or more, checi		
16a	box and stop here. The organization qualifier	3807 010 110(C) CCK	anded ernanizatio	n			> 図
	33 1/3% support test - 2012. If the organization	es as a publicly suf	a bay on line 13 or	,, ,,,,,			
Þ	check this box and stop here. The organiza	iiliiii iiii iiii iiii iii ean	a bbx crimic to or	organizalion			▶ □
	10%-facts-and-circumstances test - 2013.	in ce salliend Homi	did not check a be	organisaeuu. or on line 13, 16a, <i>t</i>	or 16b, and line 14	is	•
178	10%-racts-and-circumstances test - 2014. 10% or more, and if the organization meets	. II liis organization	imetaneae" tast et	eck this box and s	too here. Explain i	in	
	Part IV how the organization meets the "fact	e and circumstant	es" lest. The grost	ization qualifies as	a publicly support	ед	
	organization	2-6110-64001131316116				,	▶ □
	10%-facts-and-circumstances test - 2012.	If the organization	did not check a be	x on line 13, 16a, 1	165, or 17a, and lin	c	
Ü	15 is 10% or more, and if the organization m	nots the "facts-and	i-circumstances" te	est, check this box	and stop here.		
	Explain in Part IV how the organization mes	ts the "facts-and-ci	rcumstances" test.	The organization of	qualifies as a public	:ly	
	supported organization				, , , , , , , , , ,		▶ □
18	Private foundation. If the organization did r	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		_
	instructions					,	▶ □
							000 es 888 E71 7017

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

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

	ction A. Public Support			·		1	10.77.44
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2009	(ь) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership leas received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any eclivity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus, under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5		<u> </u>				
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
_	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on the 13 for the year						
C	Add lines 7a and 7b		to Section 1	• 000 000 000 000 000 000 000	n debetetimikettiside	10 (1908) Prof. (180, 60, 190, 190)	A
В	Public support (Subtract line 7c from line 6.)						2) 2)
	ction B. Total Support		1		1	1-1-00+3	(f) Total
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(권) 2012	(e) 2013	(1) TOTAL
9	Amounts from line θ			<u> </u>			
10a	Gross Income from interest, dividends, payments received on securilies loans, rents, royalties and income from similar sources					-	
	Unrelated business toxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b		[_	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for the organization, check this box and stop here			, or fifth tax year a	s a section 501(c)	(3)	
Sec	tion C. Computation of Public St	pport Percer	tage			T 45 1	%
15	Public support percentage for 2013 (line 8, co			,,			
16	Public support percentage from 2012 Schadu	le A, Part III, line		 		16	70
Sec	tion D. Computation of Investme	nt Income Pe	rcentage	L /6'		1 47	*/6
		10c column (f) di	yided by line 13, co	lumn (f))			
17	Investment income percentage for 2013 (line	TOG, COMMINE (1) OF				1 10 1	w/
18	Investment income percentage from 2012 So	hedula A, Part III.	line 17				%
18 19a	Investment income percentage from 2012 So 33 1/3% support tests - 2013, if the organization of more than 33 1/3%, check this box	hedule A, Pert III, ation did not check and stop hero. Th	line 17 . the box on line 14 e organization qual		ire than 33 1/3%, a supported organiza	ation	
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Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schodule B (Form 930, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/torm999.

OMB No. 1545-0047

2013

Name of the organization	<u> </u>	Employer identification number
SAMARITAN RECOVERY C	OMMUNITY, INC.	62-0723592
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	ered by the General Rule or a Special Rule. 8), or (10) organization can check boxes for both the General Rule and a Special	Rula, See
General Rule		
	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in nontributor. Complete Parts I and II.	noney or
Special Rules		
under sections 509(a)(1)	rganization filing Form 990 or 890-EZ that met the 33 1/3% support test of the reg r and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a co or (2) 2% of the amount on (I) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	ntribution of
during the year, total con	(8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific or the prevention of cruelty to children or animals. Complete Parts 1, 11, and 111.	tributor, ic, literary,
during the year, contribut not total to more than \$1, year for an exclusively re	(8), or (10) organization filing Form 990 or 990-EZ that received from any one contitions for use exclusively for religious, charitable, etc., purposes, but these contributions that were received during the standard contributions that were received during the standard contributions that were received during the standard contributions of the parts unless the Geron because it received nonexclusively religious, charitable, etc., contributions of \$50.	vions did uring the neral Rule
990-EZ, or 990-PF), but it must a	not covered by the General Rule and/or the Special Rules does not file Schedule I Inswer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Fo tify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ	rm 990-EZ or on ils

Employer identification number 62-0723592

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is n	eeded.
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TENNESSEE DEPT OF MENTAL HEALTH 425 5TH AVENUE NORTH NASHVILLE, TN 37243	\$ 1,281,265	Person [X] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2	ONITED WAY OF MIDDLE TENNESSEE 250 VENTURE CIRCLE NASHVILLE, TN 37228	\$ <u>118,011</u>	Person 🔯 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

2013

Open to Public

Department of the Treasury Internat Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

m990. Inspection
Employer Identification number

SAMARTTAN RECOVERY COMMUNITY, INC. 62-0723592 Part Organizations Maintaing Donor Advised Funds or Other Similar Funds or Accounts. Complete If the organization answored "Yes" to Form 990, Part IV, line 6. Total number at end of year		of the organization		Employer Identification number
Paint		-		62-0723592
Complete if the organization answered "Yes" to Form 990, Part IV, line 6. 1 Total number at and of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate grants from (during year) 4 Aggregate grants from (during year) 5 Did the organization informs all cloners and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Old the organization informs all grantees, donors, and donor advisors in writing that that some be used only in charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confirming impairable informs the benefit? Part. Conservation Essements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. 1 Purposely) of conservation essements held by the organization (check all that apulp). Preservation of land for public use (e.g., receasion or education) Preservation of an instantiant of the preservation of the public use (e.g., receasion or education) Preservation of an anterial hobbit. Preservation of the preservation of a certificat historic structure included in (e) accepted the preservation of a certificat historic structure included in (e) accepted the preservation of a certificat historic structure included in (e) acquired after B17/06, and not on a historically innormant land stream of the last stoy of the tax year. 1 Total number of conservation assements in acceptable of the preservation of a certificat historic structure included in (e) acquired after B17/06, and not on a historic structure lasted in the National Register 1 Number of conservation assements and exertifical historic structure included in (e) acquired after B17/06, and not on a historic structure lasted in the National Register 2 Number of conservation assements would be conservation essements in located by the conservation assement is located by the preparation of the preservation during the last axis and			s or Other Similar Funds or A	ccounts.
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violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year No Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year No No Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and betance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Pairt III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization enswered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII,	4	Number of states where properly subject to conservation easement	is located >	
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Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year S		violations, and enforcement of the conservation easements it holds?		
Amount of expenses incurred in monitoring, Inspecting, and enforcing conservation easements during the year > \$ B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii))? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and belance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets included in Form 990, Part VIII, line 1 (iv) Assets in	6	Staff and volunteer hours devoted to monitoring, inspecting, and enf	orcing conservation casements durin	g the year
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(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and belance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in Its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1 Assets included in Form 990, Part IVIII, line 1		> \$		
(i) and section 170(n)(4)(8)(iii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 938), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part XIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Revenues included in Form 990, Part VIII, line 1 Revenues included in Form 990, Part VIII, line 1	В	Does each conservation easement reported on line 2(d) above satis	fy the requirements of section 170(h)	(4)(D)
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If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Form 990, Part VIII, line 1 Form 990, Part VIII, line 1 Form 990, Part VIII, line 1	Har	Organizations waintaining Collections of A	em 000 Part IV lice R	Other ontine Floories
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1		Complete if the organization answered it es to inc	and to control in the revenue statemen	nt and halance sheet
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b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1		WORKS OF BIT, DISCOTICAL TREASURES, OF Other Similar assets field for pur	noisi statements that describes these	items.
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	1.	public service, provide, in Part Am, the text of the countries as a marriage wind as SEAS 116 (ASC 958)	to report in its revenue statement ar	nd balance sheet
public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	Þ	If the digatization elected, as partition under at no 110 (100 500)	lin exhibition, education, or research	In furtherance of
(i) Revenues included in Form 990, Part VIII, line 1				
(ii) Assets included in Form 990, Part X		W. Revenue included in Form 990, Part VIII, fine 1	· 	> \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1		(ii) Assate included in Form 990 Part X		
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1	2	If the organization received or held works of art, historical treasures.	or other similar assets for financial g	
a Revenues included in Form 990, Part VIII, line 1	~	following amounts required to be reported under SFAS 116 (ASC 9)	58) relating to these items:	
▶ S	а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b Assets included in Form 990, Part X		Assets included in Form 990, Part X		⊁\$

Caba	nule D (Form 990) 2013 SAMARITAN REC	OVERY	COMMUNIT	, INC.				62-072		Page 2
	art III Organizations Maintaining	Colle	ections of A	rt, Hist	orical T	reasures,	or Ot	ner Similar A	ssets (con	linued)
3	Using the organization's acquisition, accession	n. and c	ther records, c	heck any o	of the follow	ving that are	a signiño	cant use of its		
,	collection items (check all that apply):			·						
a			d 🗌 Loai	n or excha	inge progra	ams				
ь	m .		e 🗍 Othe	er					.,,,,	
c	Preservation for future generations		_							
4	Provide a description of the organization's col	ections	and explain ho	w they fun	ther the org	ganization's :	exempt p	urpose in Part		
-•	XIII.									
5	During the year, did the organization solicit or	receive	donations of ar	t, historica	al treasures	s, or other si	milar			r
	assets to be sold to raise funds rather than to	be mair	italned as part (of the orga	inizalion's	collection?		,	Ye	s No
Pa	et W. Fecrow and Custodial Arra	ngem	ents.							
£	Complete if the organization is	пswe	red "Yes" to	Form 9	190, Part	IV, line 9	, or rep	orted an amo	unt on Fort	n
	990 Part X, line 21.									
1a	Is the groanization an agent, trustee, custodia	n or oth	er intermediary	ior contrib	outions or a	ther assets	not		_	
	Included on Form 990, Part X?								Ye:	s [] No
ь	If "Yes," explain the arrangement in Part XIII a	nd com	plete the followi	ng table:			r			
	•							Ai	mount	
e	Beginning balance									
ď	Additions during the year						10			
e	Distributions during the year						10			
f	Ending balance	. , ,					11			
2a	Did the organization include an amount on For	m 990,	Part X, line 217					<i></i>	, . Tye	=
b	If "Yes," explain the arrangement in Part XIII.	Check h	ere if the explai	nation has	been prov	ided in Part	וווא			<u>· · · · · · · · · · · · · · · · · · · </u>
Pa	rt V Endowment Funds.			_						
	Complete if the organization a	inswe	red "Yes" to	Form 9	90, Part				- 1	
		(a)	Current year	(b) Pri	oryear	(ב) דאים אַפּטוּ	s bock	(d) Three years back	(e) Fouryt	ars back
12	Beginning of year balance					ļ				
ь	Contributions									
c	Net investment earnings, gains, and								ĺ	
	losses									
đ	Grants or scholarships	 								
6	Other expenditures for facilities and		1							
	programs									
ſ	Administrative expenses	ş								
g	End of year balance	L								
2	Provide the estimated percentage of the curre	ıt year (end balance (lin	ie 1g. colu	ımıı (a)) he	ld as:				
a	Board designated or quast-endowment		<u></u> %							
b	Permanent endowment ▶%	,								
C	Temporarily restricted endowment									
	The percentages in lines 2a, 2b, and 2c should	l equal	100%.			1 1	41			
За	Are there endowment funds not in the possess	ion of th	ne organization	that are h	eld and ad	ministered to	or me		[V	es No
	organization by:								. 3a(i)	= 110
	(I) unrelated organizations								. 3a(ii)	-
	(ii) related organizations	• • •							. 3b	
ь	If "Yes" to 3a(II), are the related organizations				7					
4	Describe in Part XIII the intended uses of the o			ent iunos.						
Par	t VI Land, Buildings, and Equip Complete if the organization a	ment.	rad IIVaali ia	Earm 0	an Part	1\/ line 1:	1a Sec	Form agn P	art X. line 1	10.
		:ISWe				rother basis		Accumulated	[d] Bask v	
	Description of property		(a) Cost croins finvestme		1	r oiner casis other)	, , ,	epreciation	lat page .	
			historion	****	<u> </u>		nensi.		a o	7,480
18	Land	• • •		•	}	197,480 180,796	37.00.00.00	1,381,306		9,490
þ	Buildings	• • •			<u> 4,</u> L	סבו, טטי	 	T, 101, 100		
6	Leasehold improvements	• • •			ļ .	15 cos	 	53,607	ĸ	2,888
Д	Equipment					116,495	 	230,006		5,904
_ e	Other STMD	LE	DB0 E 3'			265,910	<u> </u>			5,762
Total	i. Add lines 1a through 1e. (Column (d) must ec	ual Fon	m 990, Parl X, i	E) nmuio:), iine 1U(c	<i>J.)</i> • •		<u> </u>	1,49	2,192

Schodule D (For		OVERY COMMUNITY, L	NC. 02-07	
Part VII	Investments - Other Securities Complete if the organization answe	and "Vor" to Form 000	Part IV line 11b See Form 990	. Part X. line 12.
	Complete if the organization answe			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valual Cost or end-of-year marka	
(1) Financial	derivatives			
	eld equity Interests			
(3) Other	ela equity interests			
(A)				
(B)	10000			
(C)				
(D)				
(E)				
(F)				
(G)				
(H)		- <u> </u>		av men kreve ikredikt 10
	p) must equal Form 990, Part X, cal. (8) line 12.)			jang gara Arragang dan panganakan kan
Part VIII	Investments - Program Related.		God IV Vice 11a Son Form 000	Part X line 13
	Complete if the organization answe	red "Yes" to Form 990,	Part IV, line TTC. See Form 990	, mart A, line to.
	(a) Description of investment	(b) Book value	(c) Meirrod of valuat Cost or end-of-year marke	
			Cost of Bio-physis marks	
(1)				
(2)				
_(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	through acrost Sport S90 Pag X cod (B) line 13.)			
Part IX	Other Accets			
FERTHAL	Complete if the organization answe	red "Yes" to Form 990,	Part IV, line 11d. See Form 990	, Part X, line 15.
) Description		(b) Book value
(1)				
(2)	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
(3)				
(4)				
(5)				
(6)				1
(7)				<u> </u>
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 1	(5.)		<u> </u>
Part X	Other Liabilities.	!!V==!! to Carm 000	Bod IV line 11e or 11f See For	m 990 Parl X.
	Complete if the organization answe	red Yes to Form 990,	Part IV, line Tie of Tit. Occ For	111 3001 1 01174
	line 25.		建筑的现在分词 建石矿 医克拉克氏	
1.	(a) Desorption of Hability	(b) Bock value		
	income taxes			
(2)				
(3)				
<u>(4)</u>				
(5)	45,000			
(6)				
(8)				
(9)				
) must equal Form 950, Pan X, col. (B) line 25.)		工程的证据的证据的	學是學科學學學學
	7 11 DS1 EQUEL 1 State MEB; 7 State 1 4 4 11 (4 7 11 11 11 11 11 11 11 11 11 11 11 11 1		entration's financial statements that report	s the

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Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 SAMARITAN RECOVERY COMMUNITY, INC.	62-0723592	Page 5
Part XIII Supplemental Information (continued)		
The state of the s		
	n 21	
02. Other expenses not included on Form 990 (Part XII, lin	.e 2a)	
RENTAL EXPENSES-\$129,553		
	· · · · · · · · · · · · · · · · · · ·	
03. Footnote for uncertain tax position under FIN 48 (Part	X)	
03. FOOTNOTE FOR Uncertain cax position ander 121, 10 (124)		
THE ORGANIZATION HAS EVALUATED ITS TAX POSITIONS IN ACCORDANCE WITH THE CODE	EFICATION	
THE ORGANIZATION HAS EVALUATED III THE CONTRACT OF THE ORGANIZATION HAS EVALUATED III		
STANDARD RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE ORGANIZ	LATION BELIEVES	
of at 25 table based a second partial to the		
THAT IT HAS TAKEN NO UNCERTAIN TAX POSITIONS.		

the state of the s		
Market 1 to 1 to 1 to 1 to 1 to 1 to 1 to 1		
	· · · · · · · · · · · · · · · · · · ·	

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Schedulo D (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Survico Name of the organization

Information about Schedule O (Form 990 or 990-62) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer (dontilication number

OM9 No. 1545-0047

2013

SAMARITAN RECOVERY COMMUNITY, INC.	62-0723592
01. Management duties delegation (Part VI, line 3)	
XEBEC MANAGEMENT, INC. PROVIDES MANAGEMENT SERVICES TO THE ORGANIZ	ATION.
02. Form 990 governing body review (Part VI, line 1	11)
THE EXECUTIVE DIRECTOR AND THE BOARD OF DIRECTORS REVIEW THE FORM	
THE IRS.	
03. Conflict of interest policy compliance (Part V	[, line 12c)
NEW BOARD MEMBERS RECEIVE THE CONFLICT OF INTEREST FOLICY AND SIGN	THE CONFLICT OF
INTEREST STATEMENT WHEN THEY JOIN THE BOARD AND EACH FEBRUARY ALL	BOARD MEMBERS RE-SIGN
THE CONFLICT OF INTEREST STATEMENT.	
04. Governing documents, etc, available to public	(Part VI, line 19)
ALL GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AV	ALLEGE LON LORDE
INSPECTION UPON REQUEST.	
	1 24 10000

F	FOR YOUR RECORDS ONLY defend Supporting Stateme		2013	PG01
Name(s) as shown on relum			FEIN 60-01	723592
SAMARITAN RECOVERY COMM	UNITY, INC.		02-0	
FORM 990	, SCHEDULE D, PART VI, INVESTMENTS - OTHER	LINE 1E	STA:	TEMENT #DIE
DESCRIPTION	COST/BASIS COST/BA	SIS		BOOK
OF INVESTMENT	(INVESTMENT) (OTHE	R) DEP	<u>R</u>	VALUE
FURNITURE AND FIXTURES	0 178	,583 15	3,079	25,504
VEHICLES	0 86	,387 7	6,927	9,460
CIP-BRIDGEWAY CROSSING	0	940		940
TOTAL	0 265	,910 23	0,006	35,904

990 Overflow Statement		2013 Page 1
Name(s) as shown on relum SAMARITAN RECOVERY COMMUNITY, INC.	FEIN	62-0723592
OTHER EXPENSES-PROGRAM		
Description TELEPHONE MEMBERSHIP DUES	Total: =	Amount \$ 9,202 5,686 \$ 14,888
OTHER EXPENSES-MANAGEMENT AND Description TELEPHONE MEMBERSHIP DUES	Total:	Amount \$ 1,271 225 \$ 1,496