Department of the Treasury Internal Revonue Service

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

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

OMB No 1545-0047 Open to Public inspection

eck if	C Name of organization D Em	-11	4 Alfi Ale
	Please V Marie Vi Viganization	pioyerii	dentification number
Addres:	use IRS		
change	print or Teen Charlenge of Arizona, inc		255257
change	Notifical and street for F.O. box it mains not delivered to street address)		
muten	Instruc-		
return			
return			
pending	must attach a completed Schodule & (Form 000 or 000-F7)		· — —
ah cita			
EU SILE			N/A Yes No
naniza		:U: 4	.47 41 [] 163 [] HU
		n filed h	v an or-
		<u>- 9,00p</u>	
		rganizal	tion is not required to attach
oss red		-	
11	Revenue, Expenses, and Changes in Net Assets or Fund Balances		
1	Contributions, grifts, grants, and similar amounts received	1	
а	Direct public support		
b	Indirect public support 1b		
C	Government contributions (grants)		
ď	Total (add lines 1a through 1c)		
		10	1,794,925.
2		2	
3	Membership dues and assessments	3	
4		4	10,717.
5		5	
6 a			
b			
_ C			
-			
0 4]	
h	· · · · · · · · · · · · · · · · · · ·	1	
	· · · · · · · · · · · · · · · · · · ·		
•		84	
		"	
а	·		
þ	Less direct expenses other than fundralsing expenses. 9b 107, 493.	1	
C	Net income or (loss) from special events (subtraction of the log o	9ɛ	398,168.
10 a	Gross sales of inventory, less returns and allowances . 10a 111, 403.		
b	Less cost of goods sold		
£	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) Stmt 2	10c	<12,099.>
11	Other revenue (from Part VII, line 103)	11	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c 2, 3 9 10 and 17	12	2,191,711.
13	Program services (from line 44, column (B))	13	1,769,923.
14	Management and general (from line 44, column (C))	14	192,824.
15			118,617.
16	Payments to affiliates (attach schedule)	16	
17	Total expenses (add lines 16 and 44, column (A))	17	2,081,364.
18			110,347.
	·		2,454,175.
			2.564.522
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,564,522.
	change branche	Number and street (or PO box if mail is not delivered to street address) Room/suite ETel	Number and street (or PO boar of mail is not delivered to street address) Room/suite ETelephnore (S20 Room/suite ETelephnore (Room/suite

Part II Functional Expenses (4) 0	rganızatı roanızatı	ons must complete column ons and section 4947(a)(1	ı (A). Columns (B), (C), and) nonexempt charitable tru:	(D) are required for section its but optional for others	1 501(c)(3) and
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22, Grants and allocations (attach schedule)					
cash \$noncash \$	22				,
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				,
25 Compensation of officers, directors, etc.	25	64,547.	16,137.	32,274.	16,136.
26 Other salaries and wages	26	756,329.	681,616.	69,828.	4,885.
27 Pension plan contributions	27				
28 Other employee benefits	28	62,780.	54,018.	7,266.	1,496.
29 Payroll taxes	29	71,380.	60,674.	8,878.	1,828.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34	57,367.	48,762.	6,884.	1,721.
35 Postage and shipping	35				
36 Occupancy	36	75,198.	47,170.	23,243.	4,785.
37 Equipment rental and maintenance	37	•			
38 Printing and publications	38		·		····
39 Travel	39	72,272.	61,431.	8,673.	2,168.
40 Conferences, conventions, and meetings	40				
41 Interest	41	45,773.	45,773.		
42 Depreciation, depletion, etc. (attach schedule)	42	117,956.	113,206.	3,939.	811.
43 Other expenses not covered above (itemize).	17-				
	43a	1	İ		
a	43b				
b	43c				
<u>-</u>	430			· · · · · · · · · · · · · · · · · · ·	
s See Statement 3	43e	757,762.	641,136.	31,839.	84,787.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these					
totals to lines 13-15	44	2,081,364.	1,769,923.	192,824.	118,617.
Joint Costs. Check 🕨 📖 If you are following SOP 9					
Are any joint costs from a combined educational campa					
If "Yes," enter (i) the aggregate amount of these joint co					 ;
(III) the amount allocated to Management and general			v) the amount allocated to	Fundraising \$	
Part III Statement of Program Servi		complishments			
What is the organization's primary exempt purpose?					Brane Carries
REHABILITATION OF ADDICT				 	Program Service Expenses
All organizations must describe their exempt purpose achievement achievements that are not measurable. (Section 501(c)(3) and (4) or					(Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
allocations to others)		(,,,			trusts; but optional for others)
a See Statement 4			·		
		(G	rants and allocations \$	0.)	<u>1,769,923.</u>
b					
		(G	rants and allocations \$)	
C					
		(G	rants and allocations \$)	
d					
			<u> </u>		
		10.	rants and allocations \$		
e Other program services (attach schedule)			ants and allocations \$		
f Total of Program Service Expenses (Should equal	ine 44				1,769,923.
	77, (Joining Sy, 1 Togram Servi			

Teen Challenge of Arizona, Inc

Form 990 (2001)

86-0255257

Page 2

Part IV Balance Sheets

Note:		re required, attached schedules and amounts within the description column Id be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45 46	Cash - non-interest-bearing	473,837.	45 46	488,353.
	47 a	Accounts receivable		47c	
	t .	Pledges receivable 48a Less allowance for doubtful accounts 48b		48c	
Ø	49 50	Receivables from officers, directors, trustees, and key employees		49 50	
Assets		Other notes and loans receivable	25,028.	51c 52	18,998.
	53 54 55 a	Prepaid expenses and deferred charges Investments - securities Cost FMV Investments - land, buildings, and	9,116.	53 54	15,609.
		equipment basis		55c	2.800.422
	56 57 a	Investments - other See Statement 5 Land, buildings, and equipment: basis 57a	550.	56	2,800,422. 550.
	58	Less. accumulated depreciation	63,262.	57c 58	40,182.
	59 60 61	Total assets (add lines 45 through 58) (must equal line 74) Accounts payable and accrued expenses	3,004,050.	59 60 61	3,364,114. 82,556.
Liabilities	62 63 64 a	Deferred revenue		62 63 64a	
3	l .	Tax-exempt bond liabilities	500,525.	64b 65	717,036.
	66 Organ	Total liabilities (add lines 60 through 65) nizations that follow SFAS 117, check here ► X and complete lines 67 through	549,875.	66	799,592.
iances	67 68	69 and lines 73 and 74 Unrestricted	2,102,773. 351,402.	67 68	2,299,000. 265,522.
Net Assets or Fund Balances	69 Organ	Permanently restricted		69	
Assets o	70 71 72	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, endowment, accumulated income, or other funds		70 71 72	
Net	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19, column (B) must equal line 21)	2,454,175.	73	2,564,522.
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	3,004,050.	74	3,364,114.

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

Form 990 (2001) Teen Challenge of Ari	zona, Inc	86-02552	257 Page 4
Part IV-A Reconciliation of Revenue per Audited	Part IV-B Reconciliat	ion of Expenses per A	Audited
Financial Statements with Revenue per	Financial St	tatements With Exper	nses per
Return	Return		
a Total revenue, gains, and other support per audited financial statements a N/A	 Total expenses and losses paudited financial statements)°	N/A
	b Amounts included on line a	but not on	
b Amounts included on line a but not on line 12, Form 990:	line 17, Form 990		`
(1) Net unrealized gains	(1) Donated services and use of facilities \$,
on investments \$	(2) Prior year adjustments		,
(2) Donated services	reported on line 20,		
and use of facilities \$,
	Form 990 \$		• • • •
(3) Recoveries of prior	(3) Losses reported on		,
year grants , \$			
(4) Other (specify):	(4) Other (specify).		·
			
Add amounts on lines (1) through (4) > b	Add amounts on lines (1) to	nrough (4) P B	
c Line a minus line b	c Line a minus line b	P C	
d Amounts included on line 12, Form	d Amounts included on line 1' 990 but not on line a	7, Form	
990 but not on line a.			
(1) Investment expenses	(1) Investment expenses		
not included on	not included on		
line 6b, Form 990 \$	line 6b, Form 990 \$	[
(2) Other (specify):	(2) Other (specify):		
\$\$	\$		
Add amounts on lines (1) and (2) .	Add amounts on lines (1) a	nd (2) ▶ d	
a Total revenue per line 12, Form 990	e Total expenses per line 17, l		
(line c plus line d)	(line c plus line d)	. ▶ e	
Part V List of Officers, Directors, Trustees, and Key E			
(A) Name and address	(B) Title and average hours (C) C per week devoted to (11 no	ompensation (D) Contributions to employee benefit plans & deferred	(E) Expense account and
(A) Name and address	position	plans & deferred compensation	other allowances
See Statement 7	6	4,547.	0.
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		1	1
75 Did any officer, director, trustee, or key employee receive aggregate compensation	in of more than \$100 000 from your	hatelas ile hae anitssinson	
and any amount amorest tradition of the cultivities referre additioner equilibrilibrilibrilibrilibrilibrilibrilib	o. more wear wide, occinion your	AND INTERNAL BILL BILL BILL LEIGICO	Form 990 (2001)

Page 4

Form	990 (2001) Teen Challenge of Arizona, Inc 86-0255	257	_	Page 5
Pa	rt·VI Other Information		Yes	
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
`	if "Yes," attach a conformed copy of the changes.			
78 a		78a		ΧÍ
b	77/3	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement			7
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	,
b	If 'Yes,' enter the name of the organization > AZ. DISTRICT OF ASSEMBLIES OF GOD			
	and check whether it is X exempt OR nonexempt.	,	. 1	
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81 a 81a 81a			ĺ
b	Did the organization file Form 1120-POL for this year?	81b		x
82 a				
	fair rental value?	82a	Х	ĺ
h	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an			
_	expense in Part II. (See instructions in Part III.)		1	į
83 a		83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
_	tax deductible?	84b		ļ
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
•	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax	- 555		7
	owed for the prior year.	1		
c	Dues, assessments, and similar amounts from members			
ď	Section 162(e) lobbying and political expenditures			-
R	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			i
1	Taxable amount of lobbying and political expenditures (line 85d less 85e)	1.		
	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g		
h		004		
"	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations. Enter, a Initiation fees and capital contributions included on line 12 86a N/A	00		
b	NT/A		74	
87	501(c)(12) organizations. Enter. a Gross income from members or shareholders		1	
b				
-	against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3?		1	
	If "Yes," complete Part IX	88	1	X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under:			
	section 4911 ► 0 • , section 4912 ► 0 • ; section 4955 ► 0 •	-		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	1 1		
-	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b	. }	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	لــــــــــــــــــــــــــــــــــــــ		
_	sections 4912, 4955, and 4958			0.
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	ADTRONA			
b				35
·	The most of ompreyous ompreyou in the pay period that modeles march 12, 200			
91	The books are in care of ► TEEN CHALLENGE Telephone no. ► (520)	292	-22	73
••	Tophone III.	<u></u> -	_ _	<u> </u>
	Located at ▶ 698 E WETMORE #200 tUCSON AZ ZIP+4 ▶ 8	570	5	
	LIFTE V	<u> </u>	<u> </u>	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶ [7
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/	ΑÜ	
12304 01-02-	and direct this striction of the exempt intolest received or destroy the tax year.		990	2001)

Note: Enter gross amounts unless other	rwise		business income	Exclud	led by section 512, 513 or 514	(E)
indicated.		(A)	(B)	(C) Exclu-	(D)	Related or exempt
93 Program service revenue		Business code	Amount	sion	Amount	function income
				Lucie		
	——— -			+		
c				+		
•				1		
0						
e						
f Medicare/Medicaid payments .						ļ
g Fees and contracts from government ag	gencies			↓		
94 Membership dues and assessments						<u></u>
95 Interest on savings and temporary	İ			}		
cash investments		j		14	10,717.	
96 Dividends and interest from securities						
97 Net rental income or (loss) from real est	_			1		
· · ·				1		
a debt-financed property	· · · · -					
b not debt-financed property						
98 Net rental income or (loss) from person	ial property			 		
99 Other investment income				 		
100 Gain or (loss) from sales of assets				1 1		
other than inventory						
101 Net income or (loss) from special events	1			01	398,168.	
102 Gross profit or (loss) from sales of inver				0.5	<12,099.	
103 Other revenue:						
		ł				
				1		
b				1		
C				 		
d				\vdash		
8						<u></u>
104 Subtotal (add columns (B), (D), and (E)) <u>L</u>		0.		396,786.	
105 Total (add line 104, columns (B), (D), a	nd (E))					396,786.
Note: Line 105 plus line 1d, Part I, should	d equal the amount	on line 12,	Part I.			
Part VIII Relationship of Acti	ivities to the A	ccomplis	hment of Exemp	t Pur	poses (See Specific Instri	uctions on page 32.)
Line No. Explain how each activity for wh	nich income is reporte	d in column (E) of Part VII contributer	l import	antly to the accomplishment	of the organization's
exempt purposes (other than by	•		,			
		. <u></u>				
						
						
					.1	
Part IX Information Regard		ibsidiarie		ed Er		
(A) Name, address, and EIN of corporation,	(B) Percentage of	1	(C) Nature of activities		(D) Total income	(E) End-of-year
partnership, or disregarded entity	ownership interest	· · · · · · · · · · · · · · · · · · ·	Autore of activities			assets
	%					
N/A	%					
	%					
	%					
Part X Information Regardi						ecific instructions on page 33)
(a) Did the organization, during the year, re	eceive any funds, dire	ctly or indired	tly, to pay premiums on	a perso	nal benefit contract?	Yes X No
(b) Did the organization, during the year, p	ay premiums, directly	or indirectly,	on a personal benefit co	ntract?		. Yes X No
Note: If "Yes" to (b), file Form 8870 and	1 Form 4720 (see ir	structions).	•		ŕ	
Under penalties of perjury, I declare that		um, including a				ge and belief, it is true,
Learnet and complete Deciantion of or	marer (other than officed	ic pased on all	information of which prepare	r has any	knowledge	
			7/29/00	02.1	5. 1 Pans.	Du OFA
			1-1/62	166	SNOW PEABO rint name and title	DY, CEO
		2				
			! Dat	e//	Check If	Preparer's SSN or PTIN

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k).

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2001

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the organization Employer identification number Teen Challenge of Arizona, Inc 86 0255257 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None") (b) Title and average hours per week devoted to d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other allowances (a) Name and address of each employee paid (c) Compensation more than \$50,000 position None Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services 0

Sche	dule A (f	form 990 or 990-EZ) 2001 Teen Challenge of Arizona, Inc 86-02	<u> 5525</u>	7_!	Page 2
Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
ا ا ا	oublic of obbying or line i	ne year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence binion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$\$ (Must equal amounts on line 38, Part VI-A, of Part VI-B.)	11		x
•	Yes," mı	tions that made an election under section 501(h) by filling Form 5768 must complete Part VI-A. Other organizations checking ist complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
1	rustees, person is	ne year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," and tataled statement explaining the transactions.)			
a (Sale, exc	hange, or leasing of property?	2a	-	X
bl	ending	of money or other extension of credit?	2b		х
c i	urnishir	ng of goods, services, or facilities?	2¢		X
d I	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	20	х	
e ¹	Fransfer	of any part of its income or assets?	28		X
		organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.) ave a section 403(b) annuity plan for your employees?	3		X
Note:	Attach	ave a section 403(b) annuity plan for your employees?			<u> </u>
	rt IV		ــــــــــــــــــــــــــــــــــــــ		
		ion is not a private foundation because it is: (Please check only ONE applicable box.)			
5	X	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6		A school Section 170(b)(1)(A)(II). (Also complete Part V)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9		A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)	l		
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
446		Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)			
11b 12	뭄	A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
12	L	receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired			
		by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in the section 509(a)(2) (See section 509(a)(3).)	ibed in.		
		Provide the following information about the supported organizations. (See page 5 of the instructions.)			
		(a) Name(s) of supported organization(s)	(b) Lin	e numi	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

Note: You may use the lar year (or fiscal year ing in) Gifts, grants, and contributions received (Do not include unusual grants See line 28) Membership fees received Gross receipts from admissions, merchandise sold or services	(a) 2000	(b) 1999	(c) 1998	(d) 1997		(e) Total
(Do not include unusual grants. See line 28) Membership fees received Gross receipts from admissions, merchandise sold or services						
Gross receipts from admissions, merchandise sold or services						
merchandise sold or services	******					
performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose						
Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975						
Net income from unrelated business						
activities not included in line 18						
Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
Other income Attach a schedule Do not include gain or (loss) from sale of capital assets						
Total of lines 15 through 22	0.	0.	0.		0.	0.
Line 23 minus line 17						
Enter 1% of line 23	· · · · · · · · · · · · · · · · · · ·					
Prepare a list for your records to sho unit or publicly supported organizatio Do not file this list with your return. Total support for section 509(a)(1) te	ow the name of and amou on) whose total gifts for 1 Enter the total of all thes est: Enter line 24, column	nt contributed by each pe 997 through 2000 excee e excess amounts (e)	erson (other than a govern ded the amount shown in 		26a 26b 26c	N/A N/A N/A
noa. Ambants nom column (e) for m		· · · · · · · · · · · · · · · · · · ·			264	N/A
Public support (line 26c minus line 2	_			···· _		N/A
	•					N/A %
to show the name of, and total amount for each year: (2000) For any amount included in line 17 th amount received for each year, that w ines 5 through 11, as well as individu	nts received in each year (1999) (at was received from eac vas more than the larger uals.) Do not file this list	from, each "disqualified p 	person." Do not file this li (1998) qualified persons"), prepar to 25 for the year or (2) \$5, computing the difference b	st with your retur	n Enter the (1997) cords to sho ne list organ at received a	sum of such amounts
Add. Amounts from column (e) for lin	nas 15		16		. ,	
· ·			21	▶	27c	N/A
Add: Line 27a total	and i	ne 27b total			27d	N/A
Public support (line 27c total minus li				▶	27e	N/A
Total support for section 509(a)(2) te	st Enter amount on line	23, column (e)	271 1	N/A		_
- · · · · · · · · · · · · · · · · · · ·	•				27g	N/A %
						N/A %
the contract of the contract o	con 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975. Net income from unrelated business activities not included in line 18. Fax revenues levied for the organization's benefit and either paid to it or expended on its behalf. The value of services or facilities furnished to the organization by a governmental unit without charge. On not include the value of services or facilities generally furnished to the public without charge. Other income Attach a schedule Do not include gain or (loss) from sale of capital assets. Fotal of lines 15 through 22. Intel 23 minus line 17. Enter 1% of line 23. Organizations described on lines 10. Prepare a list for your records to show that or publicly supported organization on of file this list with your return. Fotal support for section 509(a)(1) to Add. Amounts from column (e) for line 20 on show the name of, and total amount or each year: 2000) For any amount included in line 17 the imount received for each year, that we mes 5 through 11, as well as individual amount described in (1) or (2), enter 2000) Add Amounts from column (e) for line 20 on the column for section 509(a)(2) te organizations described on line 17 the imount received for each year, that we mes 5 through 11, as well as individual amount described in (1) or (2), enter 2000) Add Amounts from column (e) for line 27 total minus lines 5 through 11, as well as individual amount described in (1) or (2), enter 2000) Add Amounts from column (e) for line 27 total minus lines 17 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for section 509(a)(2) te 20 total support for se	tion 512(a)(5)), rents, royalties, and inrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities from the organization by a governmental unit without charge in the public without without charge in the public without without charge in the public without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without charge in the public without without wi	non 512(a)(5)), rents, royalties, and unrelated business taxable income less section 511 taxes) from purposesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Itax revenues levied for the organization is period and included in line 18 Itax revenues levied for the organization by a governmental unit without charge or not behalf. The value of services or facilities unmished to the organization by a governmental unit without charge or facilities generally turnished to he public without charge or facilities generally turnished to he public without charge or facilities generally turnished to he public without charge or folial of lines 15 through 22	inch 512(a)(5)), rents, royalties, and inrelated business taxable income (less section 5.11 taxes) from businesses acquired by the organization after June 30, 1975. Vet income from unrelated business activities or capacitation's exercised from a continuous of the organization's exercised from a committee of the organization by a powernmental unit without charge burnished to the organization by a powernmental unit without charge bor and in tick bearing the value of services or facilities generally furnished to the public without charge bor and included in the service of the public without charge bor and included in the services or facilities generally furnished to the public without charge bor on thincities generally furnished to the public without charge bor and included generally furnished to the public without charge bor and included generally furnished to the public without charge bor and included generally for the public without charge borner mome Atten a schedule 0 not included the value of services or facilities generally furnished to he public without charge borner mome Atten a schedule 0 not stream or foss) from sale of expension of the public of the public of the public of the public supported organization) whose total girls for 1997 through 2000 exceeded the amount shown in or or or or or organization or organization where the total of all these excess amounts. For all the public support for section 509(a)(1) test: Enter line 24, column (e) and fille this list with your return. Enter the total of all these excess amounts. For an organization described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a organization described in line 12: a For amounts included in lines 15, 16, and 17 that were received from a organization described in line 17 that was received from each peson (other than 'disqualified persons'), prepar immount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5, in an \$1.00 that the public support f	inch 512(a)(5)), rents, royathes, and increased business stazbile income [less section 511 taxes) from businesses acquired by the priganization after June 30, 1975 Vet income from unrelated business sectivities not included in line 18 Tax revenues leved for the organization is part of the public without charge to not include the value of services or facilities furnished to the organization by a governmental unit without charge to not include the value of services or facilities furnished to the organization by a governmental unit without charge to not include the value of services or facilities for facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to he public value of services or the public support of the services or the public support of the services or the services of the services or the services or the services or the services or the services or the services or the services or the services or the services or the services or show the name of, and total amounts received in each year from, each disqualified persons'), prepare a list for your received in each year: 2000) (1999) (1998) (1998) 20 (1998) (1998) (1998) (1998) (1998) 21 (1998) (1998) (1998) (1998) (1998) 22 (1998) (1998) (1998) (1998) (1998) 23 (1998) (1998) (1998) (1998) (1998) (1998) 24 (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) 25 (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (1998) (199	inch 512(a)(5), rents, royalties, and increlated business taxable income less section 511 taxes) from businesses acquired by the granization after June 30, 1975 Vet income from unrelated business scotivities not included in line 18 The value of the support of the suppor

Schedule A (Form 990 or 990-EZ) 2001 Teen Challenge of Arizona, Inc

86-0255257 Page 3

Does the organization receive any financial aid or assistance from a governmental agency?

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,

Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b. please explain using an attached statement

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Private School Questionnaire (See page 7 of the instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) 32 Does the organization maintain the following Records indicating the racial composition of the student body, faculty, and administrative staff? 32a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to Students' rights or privileges? 33b Admissions policies? Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 331 Athletic programs? 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)

Schedule A (Form 990 or 990-EZ) 2001

34a

34b

35

Scl	hedule A (Form 990 or 990-EZ) 2001 Teen Chal	lenge of Ariz	ona, I	nc			86	-0255257 Page 5
P	Part VI-A Lobbying (To be complet		ecting Public Chari nization that filed Form 5768)		ge 9 of t	he instruction	is)		N/A
Ch	eck 🕨 a 🔲 if the organiz	ation belongs to an affiliated	group Check	▶ b ☐ if	you chec	cked "a" and "	limited (controi"	provisions apply
	4	imits on Lobbying	Evnandituras		- 1		a)	- 1	(b)
					-	Affiliate	• .	ĺ	To be completed for ALL electing organizations
_	· (The ter	rm "expenditures" means am	ounts paid or incurred)				tals		electing organizations
					_	N/I	A.	ļ	
36	Total lobbying expenditures			•	36				
37	, , ,	-	y (airect loodying)	•	37				
38	Total lobbying expenditures of their exempt purpose expen				38				
39 40	Total exempt purpose expen	•	·		40				
41					70				
71	If the amount on line 40 is -		ng nontaxable amount is -					1	
		•	mount on line 40	١.					
	Over \$500,000 but not over \$1,00		s 15% of the excess over \$500,000					1	•
	Over \$1,000,000 but not over \$1,5	• • • • • • • • • • • • • • • • • • • •	s 10% of the excess over \$1,000,0	oo . }	41				
	Over \$1,500,000 but not over \$17,		s 5% of the excess over \$1,500,00	1					
	Over \$17,000,000	\$1,000,000							
42	Grassroots nontaxable amou	int (enter 25% of line 41)			42				
43	Subtract line 42 from line 36	Enter -0- if line 42 is more t	than line 36 🔒 🛒		43				
44	Subtract line 41 from line 38	Enter -0- if line 41 is more	than line 38		44				····
	Caution: If there is an amo	ount on either line 43 or li	ne 44, you must file Form	4720				1	
		(Some organizations that m	4-Year Averaging Perlod Un ade a section 501(h) election structions for lines 45 throug Lobbying Expe	do not have to h 50 on page 1	comple 11 of the	instructions)	nns	
_									N/A
	lendar year (or cal year beginning in)	(a) 2001	(b) 2000	(c) 1999)		(d) 1998		(e) Total
45	Lobbying nontaxable amount								0.
46	Lobbying ceiling amount								
	(150% of line 45(e))								0.
47	Total lobbying								
	expenditures								0.
48	Grassroots nontaxable								
	amount .								0.
49	Grassroots ceiling amount								0.
	(150% of line 48(e))				**********				·
อบ	Grassroots lobbying expenditures								0.
P		Activity by Nonelec	ting Public Charitie	<u> </u>					
			i not complete Part VI-A) (Se		e instru	ctions.)			N/A
Du	ring the year, did the organizati	ion attempt to influence natio	onal, state or local legislation,	including any	attempt	to	T.,]	
infl	uence public opinion on a legis	slative matter or referendum,	, through the use of				Yes	No	Amount
а	Volunteers								
b	Paid staff or management (In	iclude compensation in expe	nses reported on lines a thro	ugh h.)			L		
C	Media advertisements		•				L		
d	Mailings to members, legislat					•			
8	Publications, or published or				-				
1	Grants to other organizations					•			
g	Direct contact with legislators	·	-						
h	Railies, demonstrations, sem		s, lectures, or any other mean	S		-			
I	Total lobbying expenditures (If "Yes" to any of the above, a		a detailed description of the	lobbying activi	 itipe		<u> </u>		0.
123	141 29-01	noo attach a Statement Assinf	a actaiica acscribtion of the	TODDYING ACTIV			Cal	odula *	(Farm 990 or 990-EZ) 2001
12-2	∠ล ∙บ1						361	COUIC A	. 1. min 220 ni 220.er) con i

Schedu	le A (Form 990 or 990-EZ) 200	Teen Challenge	of Arizona,	Inc	86-02	55257	Page 6
Par		garding Transfers To and zations (See page 12 of the insti		d Relationships With	Noncharita	able	
51		rectly or indirectly engage in any of		r organization described in sec			
		section 501(c)(3) organizations) or i	•	•	(1011		
		ganization to a noncharitable exemple		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ye	s No
_	(i) Cash	,				51a(i)	X
	(ii) Other assets		• • •		• • •	a(ii)	X
	Other transactions.				•••		
	(i) Sales or exchanges of asse	its with a noncharitable exempt orga	nization			b(i)	Х
	(ii) Purchases of assets from a	noncharitable exempt organization				b(ii)	X
(ill) Rental of facilities, equipme	ent, or other assets				b(iii)	X
((iv) Reimbursement arrangeme	ents	· · · · · · · · · · · · · · · · · · ·			b(iv)	X
	(v) Loans or loan guarantees					b(v)	X
	(vi) Performance of services or	membership or fundraising solicital	tions			b(vi)	X
C	Sharing of facilities, equipment,	mailing lists, other assets, or paid e	mployees			C	X
	_	e is "Yes," complete the following scl	• •	•			
	-	given by the reporting organization	~		any		
	transaction or sharing arrangem	nent, show in column (d) the value o	f the goods, other assets, o	r services received.		N/	<u>A</u>
(a)	(b)	(c)			(d)	•	
Line no	Amount involved	Name of noncharitable ex	empt organization	Description of transfers, tra	isactions, and st	aring arrang	ements
							
		 	· ····································				
				ļ			
							
							
							
				<u> </u>			
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		· · · · · · · · · · · · · · · · · · ·		 			
							
				 			
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	 		· · · · · · · · · · · · · · · · · · ·	 			
	 			 			
(Is the organization directly or inc Code (other than section 501(c) f "Yes," complete the following s	schedule N/A	one or more tax-exempt org	anizations described in section	501(c) of the	Yes [X No
	Name of org	ganization	Type of organization	Descripti	on of relationship	p	
	· · · · · · · · · · · · · · · · · · ·						
							
		·					
		 		 			
	<u>-</u> -			ļ <u></u>			
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100151			<u></u>	L			
123151 12-29-01				Sc	hedule A (Form	990 or 990-E	Z) 2001

Form 990'	Special Eve	nts and Acti	Statement 1		
Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income
Banquets	505,661.		505,661.	107,493.	398,168.
To Fm 990, Part I, line 9	505,661.		505,661.	107,493.	398,168.

Form 990	Income and Cost of Goods Sol Included on Part I, Line 10		Statement	2
Income				
2. Returns and all	owances	111,403	111,	403
4. Cost of goods s 5. Gross profit (1 Cost of Goods Sold	sold (line 13)	123,502	<12,	099>
6. Inventory at be 7. Merchandise pur 8. Cost of labor 9. Materials and s 10. Other costs .	eginning of year	123,502	123,	502
	nd of year		123,	502

990 Other Expenses				
(A)	(B) Program	(C) Management	(D)	
Total	Services	and General	Fundraising	
60,268.	50,268.		10,000.	
47,928.	46,235.	1,404.	289.	
85,425.	72,611.	10,251.	2,563.	
177,818.	104,566.	5,090.	68,162.	
101,743.	86,482.	12,209.	3,052.	
14,013.	11,911.	1,682.	420.	
136,670.	136,670.			
123,873.	123,873.			
10,024.	8,520.	1,203.	301	
757,762.	641,136.	31,839.	84,787	
	(A) Total 60,268. 47,928. 85,425. 177,818. 101,743. 14,013. 136,670. 123,873. 10,024.	(A) (B) Program Services 60,268. 50,268. 47,928. 46,235. 85,425. 72,611. 177,818. 104,566. 101,743. 86,482. 14,013. 11,911. 136,670. 136,670. 123,873. 123,873. 10,024. 8,520.	(A) (B) (C) Program Management and General 60,268. 50,268. 47,928. 46,235. 1,404. 85,425. 72,611. 10,251. 177,818. 104,566. 5,090. 101,743. 86,482. 12,209. 14,013. 11,911. 1,682. 136,670. 136,670. 123,873. 123,873. 10,024. 8,520. 1,203.	

Description of Program Service One

TEEN CHALLENGE PROVIDES RESIDENTIAL AND OUTPATIENT SERVICES FOR ADDICTIVE DISORDERS. IT IS A FAITH BASED PROGRAM CALLING FOR A CHANGED LIFE BASED ON GOD'S STRENGTH RATHER THAN THE INDIVIDUAL'S OWN STRENGTH. THE PROGRAM LASTS 14 MONTHS.

	Grants	Expenses
To Form 990, Part III, line a	0.	1,769,923.
Form 990 Other Investments		Statement 5
Description	Valuation Method	Amount
Other Investments	Cost	550.
Total to Form 990, Part IV, line 56, Column B		550.

Form 990	Other Assets		Stat	ement	6
Description			A	mount	
Impounds Employee Receivable Donated Vehicles for resale TC Distributing net assets Donated Land for resale Deposits Insurance Receivable					00. 12.
Total to Form 990, Part IV, 1:	ine 58, Column B			40,1	82.
	st of Officers, Dire es and Key Employees		State	ement	7
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expen	
REV. SNOW PEABODY TUCSON AZ	EXEC. DIR.	64,547.	0.		0.
REV. VIRGIL JONES TUCSON AZ	CHAIRMAN 1	0.	0.		0.
REV. RICHARD PETERSON	VICE CHAIRMAN 1	0.	0.		0.
MR. JIM SPRINGER MESA AZ	SECRETARY 1	0.	0.		0.
REV ED BRADFORD	TREASURER 1	0.	0.		0.
REV. STEPHEN HARRIS PHOENIX AZ	DIRECTOR 1	0.	0.		0.

Teen Challenge of Arizona, Inc	;		86-0255257	
DR. CLIVE BEATTIE	DIRECTOR 1	0.	0.	0.
MR. DALE FULLER SUN CITY AZ	DIRECTOR 1	0.	0.	0.
MR. PAUL COX	DIRECTOR 1	0.	0.	0.
DR. MICHAEL LOES SCOTTSDALE AZ	DIRECTOR 1	0.	0.	0.
MR. ROBERT STEWART	DIRECTOR 1	0.	0.	0.
MR. DWAYNE ALFORD	DIRECTOR 1	0.	0.	0.
MRS. DEANNA WHEELER	DIRECTOR 1	0.	0.	0.
Totals Included on Form 990, Part	: V	64,547.	0.	0.