

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)

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning 07/01, 2008, and ending 06/30, 20 09

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization **SHELTERING ARMS**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
3838 Aberdeen Way
 City or town, state or country, and ZIP + 4
Houston, TX 77025

D Employer identification number
74 1152601

E Telephone number
(713) 956-1888

G Gross receipts \$ **17,822,012**

F Name and address of principal officer: **Peggy K Carlin**
3838 Aberdeen Way, Houston, TX 77025

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c) (**3**) (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.shelteringarms.org**

K Type of organization: Corporation Trust Association Other ▶

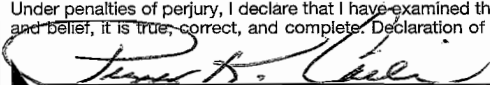
L Year of formation: **1974** **M** State of legal domicile: **TX**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Our mission is to provide services which enable the elderly to live with dignity and independence</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3 41	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 35	
	5	Total number of employees (Part V, line 2a)	5 0	
	6	Total number of volunteers (estimate if necessary)	6 990	
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a 0	
	b Net unrelated business taxable income from Form 990-T, line 34	7b 0		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	12,052,330	14,328,991
	9	Program service revenue (Part VIII, line 2g)	2,987,808	3,206,485
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	31,018	4,124
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	541,511	282,412
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,612,667	17,822,012	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,835,733	6,806,183
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
		b Total fundraising expenses (Part IX, column (D), line 25) ▶	204,600	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	10,098,179	10,973,811
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	16,933,912	17,779,994	
19	Revenue less expenses. Subtract line 18 from line 12	-1,321,245	42,018	
Net Assets or Fund Balances			Beginning of Year	End of Year
	20	Total assets (Part X, line 16)	9,962,707	10,185,223
	21	Total liabilities (Part X, line 26)	1,253,100	1,492,425
22	Net assets or fund balances. Subtract line 21 from line 20	8,709,607	8,692,798	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

 Signature of officer Date **02/15/2010**
Peggy Carlin, Vice President
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature Date Check if self-employed Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 EIN Phone no. ()

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
Our mission is to provide services which enable elderly to live with dignity & independence

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
See Statement 2

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 3,097,608 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► \$ 16,569,332 (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	✓
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	✓
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	✓
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	✓
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	✓
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11	✓
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	✓
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	14b	✓
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	✓
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	✓
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	✓
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	✓
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	✓
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	✓
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	✓
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	23	✓
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.</i>	24a	✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	✓
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b	✓
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	✓

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		✓
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		✓

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 73		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		✓
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		✓
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Table with 3 columns: Question, Yes, No. Rows include: 1a (41), 1b (35), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9a, 9b, 10, 11.

Section B. Policies

Table with 3 columns: Question, Yes, No. Rows include: 12a, 12b, 12c, 13, 14, 15, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: See Statement 3

Part VII Statement of Revenue			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a	0			
	b	Membership dues	1b	0			
	c	Fundraising events	1c	293,208			
	d	Related organizations	1d	0			
	e	Government grants (contributions).	1e	9,245,602			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,790,181			
	g	Noncash contributions included in lines 1a-1f: \$		0			
	h	Total. Add lines 1a-1f ▶		14,328,991			
Program Service Revenue	Business Code						
	2a	Fees	624000	3,206,485	0	0	3,206,485
	b					
	c					
	d					
	e					
	f	All other program service revenue		0	0	0	0
g	Total. Add lines 2a-2f ▶		3,206,485				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		4,124	0	0	4,124
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0
	5	Royalties ▶		0	0	0	0
	6a	(i) Real		(ii) Personal			
		Gross Rents					
		b Less: rental expenses					
		c Rental income or (loss)		0	0		
	d	Net rental income or (loss) ▶					
	7a	(i) Securities		(ii) Other			
		Gross amount from sales of assets other than inventory					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)		0	0		
	d	Net gain or (loss) ▶					
	8a	Gross income from fundraising events (not including \$ 293,208 of contributions reported on line 1c). See Part IV, line 18		a	0		
		b Less: direct expenses		b	0		
c Net income or (loss) from fundraising events ▶			0	0	0		
9a	Gross income from gaming activities. See Part IV, line 19		a				
	b Less: direct expenses.		b				
	c Net income or (loss) from gaming activities ▶						
10a	Gross sales of inventory, less returns and allowances		a				
	b Less: cost of goods sold		b				
	c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue			Business Code				
11a	Life Line & Misc Income	623000	282,412	0	0	282,412	
b						
c						
d	All other revenue		0	0	0	0	
e	Total. Add lines 11a-11d ▶		282,412				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶		17,822,012	0	0	3,493,021	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	5,513,064	4,886,113	456,451	170,500
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	221,740	185,791	35,949	0
9	Other employee benefits	606,285	542,135	43,690	20,460
10	Payroll taxes	465,094	424,596	26,858	13,640
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	2,572,238	2,532,011	40,227	0
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	0			0
12	Advertising and promotion				
13	Office expenses	2,577,999	2,479,170	98,829	
14	Information technology	161,403	146,270	15,133	
15	Royalties				
16	Occupancy	419,277	265,067	154,210	
17	Travel	140,166	139,180	986	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	104,781	82,661	22,120	
20	Interest	15,030	0	15,030	
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	74,883	55,996	18,887	0
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a	Bad Debt	29,387	29,387	0	0
b	Financial Assistance	4,490,655	4,490,655	0	0
c	Dues & Subscription	18,545	9,702	8,843	0
d	Postage	42,612	25,386	17,226	0
e	Depreciation	326,835	275,212	51,623	0
f	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	17,779,994	16,569,332	1,006,062	204,600
26	Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,061,674	1	1,342,725
	2 Savings and temporary cash investments	0	2	
	3 Pledges and grants receivable, net	1,443,523	3	1,439,431
	4 Accounts receivable, net	419,230	4	652,432
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	
	7 Notes and loans receivable, net	0	7	
	8 Inventories for sale or use	0	8	
	9 Prepaid expenses and deferred charges	118,384	9	74,690
	10a Land, buildings, and equipment: cost basis 10a	9,135,568		
	b Less: accumulated depreciation. Complete Part VI of Schedule D 10b	2,489,855		
	11 Investments—publicly traded securities	29,574	11	30,232
	12 Investments—other securities. See Part IV, line 11	0	12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,962,707	16	10,185,223	
Liabilities	17 Accounts payable and accrued expenses	904,724	17	1,417,425
	18 Grants payable	0	18	75,000
	19 Deferred revenue	348,376	19	
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	1,253,100	26	1,492,425
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	284,507	27	179,933
	28 Temporarily restricted net assets	8,339,100	28	8,426,865
	29 Permanently restricted net assets	86,000	29	86,000
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	8,709,607	33	8,692,798	
34 Total liabilities and net assets/fund balances	9,962,707	34	10,185,223	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		✓
b Were the organization's financial statements audited by an independent accountant?	✓	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	✓	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	✓	
b If "Yes," did the organization undergo the required audit or audits?	✓	

Statement 1

Form: 990

Page: 1

Line Number:

ReasonableCauseExplanation

SHELTERING ARMS

74-1152601

Reasonable Cause Explanations

Explanation

N/A

Program Service Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Utility Bills Assistance: Comprehensive Energy Assistance Program: U.S Department of Energy Program funded through Texas Department of Housing & Community Affairs that assists low income families with young children, seniors (60 years & older) and the disabled in the payment of gas & electric bills (17,532 Families)	\$7,671,187	\$0	\$0
	Weatherization Programs: Emergency Home Repair & Weatherization: US Department of Energy program funded through the Texas Department of Housing & Community Affairs that offers an energy efficient environment and Community Development funds for minor repairs at no cost to the eligible older adult (502 client)	\$2,394,881	\$0	\$0
	Group Home Care for individuals with Disabilities: Home Care Services- providing trained capable staff to assist older adults on a part-time basis with personal care cooking, shopping and other household duties they themselves are no longer able to perform (949 clients)	\$3,405,656	\$0	\$0
	Adult Day Care programs: Adult Day Centers: Adult Day Care programs for victims & families of Alzheimers disease and related disorders (499 clients)	\$1,118,731	\$0	\$0
	Emergency Medical Care: Emergency Response: A personal emergency response system is a portable alarm which links the caller at home with lifeline services (1160)	\$172,999	\$0	\$0
	Comprehensive Senior Services, General/Other: Care for Elders: The Agency is directing a collaborative planning process for improved community-based approaches for care and services for older adults and their caregivers in Houston & Harris County. This involves more than 65 Houston- Area Agencies, business, government organizations & individuals partnering under the Care for Elders (876 Families)	\$865,242	\$0	\$0
	Comprehensive Senior Service, General/other: Volunteer Services- Includes Telephone Reassurance, Public Education & Friendly Visitor programs (432 clients)	\$119,685	\$0	\$0
	Adult Day Care Programs: Social Services & Case Work Counseling: Providing professionally trained staff to assist older adults and their families with emotional or late life adjustments problems (45,814 Clients)	\$820,951	\$0	\$0
Total:		\$16,569,332	\$0	\$0

Statement 3

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Line Number: Part VI Section C Line 20

TheBooksAreInCareOf

SHELTERING ARMS

74-1152601

The Books Are In Care Of

Name and address:

Telephone Number

Sheltering Arms
3838 Aberdeen Way
Houston, TX 77025

(713)558-6300

Statement 4

SHELTERING ARMS

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74-1152601

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Line Number: Part VII Section A

Form990PartVIISectionA

Form990 PartVII SectionA

Name	Title	Hours	C1	C2	C3	C4	C5	C6	Reportable Comp From Organization	Reportable Comp From Related Orgs	Other Compensation
Kelley Moseley	Board Member	0	Yes						\$0	\$0	\$0
Dr Craig Friedmann	Board Member	0	Yes						\$0	\$0	\$0
Mrs John R Butler Jr	Board Member	0	Yes						\$0	\$0	\$0
Rick Diaz	Board Member	0	Yes						\$0	\$0	\$0
Thomas H Wilson	Board Member	0	Yes						\$0	\$0	\$0
Lynda BoydstunNielsen	Board Member	0	Yes						\$0	\$0	\$0
Deanna Grimes PhD	Board Member	0	Yes						\$0	\$0	\$0
Ed Haran	Board Member	0	Yes						\$0	\$0	\$0
Sabra Harrington	Board Member	0	Yes						\$0	\$0	\$0
Kathy Rapp	Board Member	0	Yes						\$0	\$0	\$0
Paul Waldner	Board Member	0	Yes						\$0	\$0	\$0
Joycelyn Marek	Board Member	0	Yes						\$0	\$0	\$0
Dr Kristin Moore	Board Member	0	Yes						\$0	\$0	\$0
Carrin Patman	Board Member	0	Yes						\$0	\$0	\$0
Robert Peck	Board Member	0	Yes						\$0	\$0	\$0
Laura Talbert	Board Member	0	Yes						\$0	\$0	\$0
Rick Burnett	Board Member	0	Yes						\$0	\$0	\$0
Michelle Beale	Board Member	0	Yes						\$0	\$0	\$0
Bonnie Baldwin	Board Member	0	Yes						\$0	\$0	\$0
Jim Burke	Board Member	0	Yes						\$0	\$0	\$0
Paul Pizzi	Board Member	0	Yes						\$0	\$0	\$0
James Renfroe	Board Member	0	Yes						\$0	\$0	\$0
Chris Tagoe	Board Member	0	Yes						\$0	\$0	\$0
Bill Wehner	Board Member	0	Yes						\$0	\$0	\$0
Debbie Korenek	Board Member	0	Yes						\$0	\$0	\$0
Gary Orr	Board Member	0	Yes						\$0	\$0	\$0
Dr Asaf Qadeer	Board Member	0	Yes						\$0	\$0	\$0
Debbie Adams	Board Member	0	Yes						\$0	\$0	\$0
Cecil Barcelo	Board Member	0	Yes						\$0	\$0	\$0
Mark Quartermain	Board Member	0	Yes						\$0	\$0	\$0
Dr Parvez Qureshi	Board Member	0	Yes						\$0	\$0	\$0
Keith Rowden	Board Member	0	Yes						\$0	\$0	\$0
Bill Wehner	Board Member	0	Yes						\$0	\$0	\$0

Statement 4

SHELTERING ARMS

Dr Lara Longo	Board Member	0	Yes		\$0	\$0	\$0
Dr Lewis Clarke	Board Member	0	Yes		\$0	\$0	\$0
Robert Phillips	President	40		Yes Yes	\$223,815	\$0	\$0
Peggy Carlin	Vice President	40		Yes	\$125,913	\$0	\$0
Jane Bavineau	Vice President	40		Yes	\$128,274	\$0	\$0
Susan Thompson Dunn	Vice President	40		Yes	\$102,182	\$0	\$0
Lynne Cook	Vice President	40		Yes	\$60,932	\$0	\$0
Patrick Lay	Administrator	40		Yes	\$101,561	\$0	\$0
Mrs Jackson C Hinds	Board Member	0		Yes	\$0	\$0	\$0
Mrs Charles R Franzen	Board Member	0		Yes	\$0	\$0	\$0
Mrs Louise Erwin	Board Member	0		Yes	\$0	\$0	\$0
Total:					\$742,677	\$0	\$0

C1 = Individual Trustee Or Director

C2 = Institutional Trustee

C3 = Officer

C4 = Key Employee

C5 = Highest Compensated Employee

C6 = Former