SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization: COMMUNITY HOMES OF PATAGONIA, INC.

Employer identification number: 83 0463916

PART VI

Line 6.

Excerpted from COMMUNITY HOMES OF PATAGONIA, INC.'s Bylaws -

ARTICLE II: Membership 1. Initial Members. The Initial Members empowered to vote at the first annual Membership meeting shall be those persons 18 years of age or older who have attended at least one of the orientation meetings held between January 1, 2006 and the time of the first annual Membership meeting, as recorded in the minutes of these meetings

2. Regular Members. Subsequent to the first annual Membership meeting, the Regular Members of the Corporation, with with full voting rights, shall be: a. The Lessee Members, who shall be all persons 18 years of age or older who lease land or housing from the Corporation or who lease or own housing that is located on land leased by another entity from the Corporation. b. The Nonlessee Members, who shall be all other persons, 18 years of age or older, who have complied with the following requirements: (1) Attendance at one of the "orientation meetings" that shall be scheduled from time to time by the Board of Directors for the purpose of introducing prospective members to the purposes and methods of the Corporation; and (2) Submission of a Membership application including a signed statement of support for the purposes of the Corporation in a form to be determined by the Board of Directors; and (3) Payment of dues for the current calendar year; and (4) Residency in the Town of Patagonia, Arizona and its vicinity for at least 6 of the last 12 months.

3. Requirements for Continuing Regular Member Status. To maintain Regular Member status beyond a person's first year, the person must either be a Lessee Member or: a. Have attended at least one Meeting of the Membership or Board of Directors during the previous twenty-four months, showing continued interest in the Corporation; or have shown good cause for non-attendance; and b. Have paid dues established for the current calendar year; and c. Have resided in the Town of Patagonia, Arizona and its vicinity for at least 6 of the last 12 months.

5. Supporting Members. a. Any person who has paid the annual dues established for the current calendar year but who does not wish to become a Regular Member or has not met all the requirements of Regular Member status shall be designated a Supporting Member of the Corporation.

Name of the organization: COMMUNITY HOMES OF PATAGONIA, INC.

Employer identification number: 83 0463916

PART VI

Lines 7a & 7b

Excerpted from COMMUNITY HOMES OF PATAGONIA, INC.'s Bylaws

4. Rights of Regular Members. a. Every Regular Member shall have the right to participate in meetings of the Membership to cast one vote on all matters properly put before the Membership for consideration, to nominate and participate in the election of the Board of Directors as provided by these Bylaws, to serve on the Board of Directors or on committees if chosen, to receive notices and minutes of Membership Meetings and Annual Reports of the Corporation,

b. The assent of the Regular Members, in accordance with these Bylaws , shall be required before action may be taken on the establishment of membership dues, the removal of Directors, the sale of land, the establishment or alteration of the "resale formula," the amendment of the Articles of Incorporation or these Bylaws, and the dissolution of the Corporation.

PART VI

Line 10.

COMMUNITY HOMES OF PATAGONIA, INC.'s Finance Committee, currently consisting of the Board Treasurer and Board President, collaborate on completing Form 990, Schedules, and attachments before filing them with the IRS.

PART VI

Line 12c.

Annually, each of COMMUNITY HOMES OF PATAGONIA, INC.'s Board Directors read and review the Conflict of Interest Policy; and, sign a statement that they have done so, and understand it.

PART VI

Line 19.

COMMUNITY HOMES OF PATAGONIA, INC. provides access to its organizational documents, conflict or interest policy, and financial statements upon request. Also, the information is currently being posted on the organization's website: www.chopatagonia.org

PART VIII

Line 1g & 7a-d

Understanding of these lines was the reason we filed for an extension. By the time an IRS agent was assigned and got back to us, our May 15th deadline was approaching. With the help of our accounting consultant, we received a sufficient understanding to these line items, that has allowed us to now file our form 990.

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Schedule

Schedule O (Form 990) is used by an organization that files Form 990 to provide the IRS with narrative information required for responses to specific questions on Form 990, or to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990.

Who Must File

All organizations that file Form 990 must file Schedule O (Form 990). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 10 and 19. If an organization is not required to file Form 990 but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990) as needed.

Complete the required information on the appropriate line of Form 990 or its schedules prior to using Schedule O (Form 990).

Identify clearly the specific part and line(s) of Form 990 or its schedule(s) to which each response relates. Follow the part and line sequence of Form 990 or the part and line sequence of its schedule(s).

Late return. If the return is not filed by the due date (including any extension granted), use Schedule O (Form 990) to provide a statement giving the reasons for not filing on time.

Amended return. If the organization checked the *Amended Return* box on Form 990, line B, use Schedule O (Form 990) to list each part or schedule and line item of the Form 990 that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a) but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Do not use** this schedule. See the Instructions for Form 990, *I. Group Return.*

Parts III, V, VI, VII, and XI. Use Schedule O (Form 990) to provide any narrative information required for the following questions.

1. Part III, *Statement of Program Service Accomplishments.*

a. "Yes" response to line 2.

b. "Yes" response to line 3.

c. Other program services on line 4d.

2. "No" response to Part V, *Statements Regarding Other IRS Filings and Tax Compliance,* line 3b.

3. Part VI, *Governance, Management, and Disclosure.*

a. Material differences in voting rights in line 1a.

b. "Yes" responses to lines 2–7.

c. "No" responses to lines 8 or 9b.

d. Description of process for review, if any, on line 10.

e. "Yes" response to line 11.

f. "Yes" response to line 12c.

g. Description of process for determining compensation on lines 15a and 15b.

h. Description for making documents public on lines 18 and 19.

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

a. Estimate of average hours per week, if any, devoted to related organizations for which compensation was reported in columns (E) or (F).

b. Description of reasonable efforts undertaken in regard to column (E).

5. Part XI, *Financial Statements and Reporting.*

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

Schedule G (Form 990 or 990-EZ). If applicable, use Schedule O (Form 990) to describe payments of fundraising expenses or reimbursements as required in Part 1, line 2b, column (v).

Schedule K (Form 990). If applicable, use Schedule O (Form 990) to describe the organization's use of alternative 12-month reporting periods with respect to bond issues reported on Schedule K (Form 990).

Schedule L (Form 990 or 990-EZ). Use Schedule O (Form 990) if additional space is needed to report information required by Schedule L (Form 990 or 990-EZ).

Schedule R (Form 990). Use Schedule O (Form 990) to provide the group exemption relationships described on Schedule R (Form 990).

Other. Use Schedule O (Form 990) to provide narrative explanations and descriptions to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.