

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990** 

**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 Open to Public Inspection

		tment of th		Open to Public Inspection
			008 calendar year, or tax year beginning and ending	
-			C Name of organization	D Employer identification number
	- et	heck if opticable.	USE INS AMERICAN INDIAN SCIENCE AND ENGINEERING	
	Г	Address	label or look temy	
	$\vdash$	Name change	type Doing Business As	73-1023474
	F	Initial   return	See Number and street (or P.O. box if mall is not delivered to street address) Room/suit	
	F	Termin-	Specific DOOR DENTADD DIACE CE CO	505-765-1052
	는	Jation Amended	11000	G Gross receipts \$ 2,479,026.
	$\vdash$	Jretum Applica- tion	ALBUQUERQUE, NM 87106	H(a) Is this a group return
	_	beugiud Triou	F Name and address of principal officer:PAMALA M. SILAS	for affiliates?
			2305 RENARD SE SUITE 200, ALBUQUERQUE, NM	8 H(b) Are all affiliates included? Yes No
	Т	ay-eyem	ppt status: X 501(c) (3 ) ◀ (insert no )	If "No," attach a list. (see instructions)
			▶ WWW.AISES.ORG	H(c) Group exemption number
				ar of formation: 1977 M State of legal domicile: NM
1			Summary	
			iefly describe the organization's mission or most significant activities: TO PROMOT	E EDUCATIONAL
	nce	o	PPORTUNITIES FOR NATIVE AMERICAN YOUTH IN TH	E FIELDS OF SCIENCE AND
	Governance	_	neck this box Fig. if the organization discontinued its operations or disposed of me	
	)Ve		umber of voting members of the governing body (Part VI, line 1a)	[3] 9
			umber of independent voting members of the governing body (Part VI, line 1b)	4 9
	Activities &		otal number of employees (Part V, line 2a)	5 14
	įŧį		otal number of volunteers (estimate if necessary)	6 0
	Ę,		<u> </u>	7a 0.
	4	b N	otal gross unrelated business revenue from Part VIII, the 12 column (C)	7b 0.
	_			Prior Year Current Year
	•	8 C	ontributions and grants (Part VIII, line 1h) $\frac{\overline{E}}{2}$ SEP. 1.3.2010.	1,519,278. 1,651,538.
	Revenue	i	rogram service revenue (Part VIII, line 2g)	526,849. 790,749.
	eve	1	vestment income (Part VIII, column (A), lines 3, 4, and 70)	45,627. 25,438.
	Œ		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 100, and 101,	8,491. 3,579.
			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,100,245. 2,471,304.
			rants and similar amounts paid (Part IX, column (A), lines 1-3)	309,460. 243,392.
			enefits paid to or for members (Part IX, column (A), line 4)	
	ø	l		561,222. 615,666.
	Expenses	16a P	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  rofessional fundraising fees (Part IX, column (A), line 11e)  otal fundraising expenses (Part IX, column (D), line 25)	
	ĝ	ЬТ	otal fundraising expenses (Part IX, column (D), line 25) 114, 402.	
	ũ		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,288,836. 1,609,536.
			otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,159,518. 2,468,594.
		19 R	evenue less expenses. Subtract line 18 from line 12	< <b>59,273.</b> > 2,710.
	58			Beginning of Year End of Year
	Sign	20 T	otal assets (Part X, line 16)	1,705,914. 1,979,962.
	S.S.	21 T	otal liabilities (Part X, line 26)	120,105. 410,666.
	Net Assets or Fund Balances	22 N	et assets or fund balances. Subtract line 21 from line 20	1,585,809. 1,569,296.
2010	P	art II	Signature Block	
			Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledge and belief, it is true, correct,
		l'	and of the	10/10/00
_	Sig	n	March Sus	10119109
ت	Her	re	Signature of officer	Date
0			PAMALA M. SILAS, CHIEF EXECUTIVE OFFICER	
			Type or print name and title	
.U ≫	Pai	, [	Preparer's Date	Check if Preparer's identifying number (see instructions)
2			signature	employed >
CANNED OCT 05	Use	Only I	run's name (or PULAKOS & ALONGI, LTD.	EIN ▶
5	200	· •,	self-employed) 8801 HORIZON BLVD., NE, SUITE 300	,
-			ZIP+4 ALBUQUERQUE, NM 87113	Phone no. ► (505) 338-1500
	Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)	X Yes No
	8320	001 12-18-	08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions. Form 990 (2008

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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#### AMERICAN INDIAN SCIENCE AND ENGINEERING

	n 990 (2008) SOCIETY 73	-1023474	Page 2
Pat	irt. III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission: TO PROMOTE EDUCATIONAL OPPORTUNITIES FOR NATIVE AMERICAN Y FIELDS OF SCIENCE AND ENGINEERING.	OUTH IN T	HE
		<del></del>	
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	X No
3	If "Yes", describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?	□ voe	X No
	If "Yes", describe these changes on Schedule O.		[22] 140
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expens Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gran allocations to others, the total expenses, and revenue, if any, for each program service reported.	ses ts and	
4a	(Code: )(Expenses \$ 947,489. Including grants of \$ )(Revent CONFERENCE - THE ANNUAL NATIONAL CONFERENCE IS AISES' MAJOR HOSTED EVERY YEAR FOR ITS CONSTITUENTS, AND THE CAREER FACOMPANIES A UNIQUE FORUM FOR RECRUITING AMERICAN INDIAN STRUCTURE THAN HALF OF THOSE BEING AMERICAN INDIAN HIGH SCHOOL STUDENTS.	OR EVENT IR OFFERS FUDENTS AN ENCE, WITH	Ι
4b	(Code: )(Expenses \$ 598,164. including grants of \$ )(Revertable of the control of	AL PROGRAM AMERICAN DUATE SCHO	DOL.
4c	(Code: )(Expenses \$ 243,400. including grants of \$ 243,392.)(Reverse SCHOLARSHIPS - AISES SCHOLARSHIPS ARE AWARDED TO UNDERGRAGE GRADUATE STUDENTS WHO ARE MEMBERS OF AISES FOR LEADERSHIP ACHIEVEMENT. AISES ADMINISTERS FIVE TYPE OF SCHOLARSHIPS	DUATE AND ACAD	EMIC
			<del></del>
4d	(Expenses \$ 121,872 including grants of \$ ) (Revenue \$	)	
<del>4e</del>	Total program service expenses ▶ \$ 1,910,925. (Must equal Part IX, Line 25, column (B).)		
		Form	990 (2008)

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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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	_	X
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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	l		
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	]		l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	_8_		X
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			i
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			1
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	<u> </u>
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	the others is an annual transfer that	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		Ì	۱
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
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	1		<b>.</b>
40	located outside the United States? If *Yes,* complete Schedule F, Part II	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		Ì	
47	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<del>  x</del>
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	├	<del>  x</del>
20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	-	$\frac{1}{x}$
21	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	├	X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	22	x	╀╧╌
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	<del>  ^</del>	<del>  x</del>
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		┢	+
_ 73	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.	1		
	If "No", go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<b>†</b>	1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		1	1
	any tax-exempt bonds?	24c	1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	†	1
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		1	1
	disqualifled person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			1
_	prior year? If "Yes," complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			$\top$
-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			1
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
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#### 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:	4 4.7%	رمی ریس	t±
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	1		25.
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other		7 £	194
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
ь	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	1	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	1	X
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			$\Box$
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			$\Box$
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

Par	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			1	1	
	U.S. Information Returns Enter -0- if not applicable	1a	58			7.3
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_1b	0		167	15.0
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	eport	able gaming	1.15	Care	Sec.
	(gambling) winnings to prize winners?	, ·		1c	# di Fm	2-75 Hand
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	l	1		\$ 3	
	filed for the calendar year ending with or within the year covered by this return	2a			0.64	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			11 T T	多数	
	Did the organization have unrelated business gross income of \$1,000 or more during the year cover	ed by	this return?	3a		Х
				3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				ļ	l
_	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a	0.45.47	X
b	If "Yes," enter the name of the foreign country: ▶			<b>188</b>	4	100
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank	and			张:
_	Financial Accounts.			13:3	200	1300
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<u> </u>	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b	<b>-</b>	Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	/ Rega	arding Prohibited	١_		1
60	Tax Shelter Transaction?			5c	├	X
	Did the organization solicit any contributions that were not tax deductible?			6a		<del> </del> ^
	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?	itions	or gifts		1	1
7	The state of the s			6b	76.00	Y5us
a	Organizations that may receive deductible contributions under section 170(c).		- #750	<b>经数</b>	1170°	X
b	Did the organization provide goods or services in exchange for any quid pro quo contribution of mo If "Yes," did the organization notify the donor of the value of the goods or services provided?		·	7a 7b		┿
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it			/6	╂	╁─
·	to file Form 8282?	vas re	donea	7c		$ \mathbf{x} $
đ	If "Yes," indicate the number of Forms 8282 filed during the year	Ï 7d	T	12301	No.	1000
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a			<b>W</b>	, 11	
•	benefit contract?	perso	1101	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?		71	_	<del>l x</del>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			79	1	<del>                                     </del>
•	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098	•	required?	7h	1	+
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and se			<b>基础</b>	## Y	18
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization.				7	北流
	excess business holdings at any time during the year?	•		8	1	T
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	-		71.2	De	10.5
а	Did the organization make any taxable distributions under section 4966?		* *************************************	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter: N/A					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10t		微し		引器
11	Section 501(c)(12) organizations. Enter: N/A					
a	Gross income from members or shareholders	116	<u> </u>		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1		
	amounts due or received from them.)	111	<u> </u>	學校	銀	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ոլ104	1?	128	4	<u> </u>
<u>_b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	121	o	1		<b>東</b> 城
				For	m <b>99</b> 0	(2008

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

Sec	tion A, Governing Body and Management			
		آ	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,	綴	1	
	processes, or changes in Schedule O. See instructions	1	25	
1a	Enter the number of voting members of the governing body	77.33 21.53		
b	Enter the number of voting members that are independent		遙	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			SAP:
	by the following:	10000		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b	Х	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X	
Sec	tion B. Policies			
40-	Parather 1 to 1 t		Yes	No
12a	Does the organization have a written conflict of Interest policy? If "No," go to line 13	12a	X	<u> </u>
Đ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	l	٠.	
_	to conflicts?	12b	X	
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	1.0.	x	
13	Parallel 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	12c	<b>├</b> ^	x
14	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	13	<del> </del>	X
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	HANNE	20735
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
А	The organization's CEO, Executive Director, or top management official?	15a	T	Mr. but
b	Other officers or less complete and the conscient and	15b	1	<del>                                     </del>
-	Describe the process in Schedule O (see instructions)	1 19.8	19.70	4432
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	188		
	taxable entity during the year?	160	124%	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	447	#5 C	38456
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		1. 1. 1. 1.	134
	exempt status with respect to such arrangements? .,	16b		1
Sec	tion C. Disclosure	1 114		
17	List the states with which a copy of this Form 990 is required to be filed ▶NM			-
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	e for		
	public inspection. Indicate how you make these available. Check all that apply	•		
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fin	ancial	
-	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.	ation:	<b>&gt;</b>	
	MATTHEW BECHTEL - 505-765-1052			
	2305 RENARD PLACE SE, # 200, ALBUQUERQUE, NM 87106			
83200			- 000	

SOCIETY

Form 990 (2008)

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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
- 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.

(A)	(B)			(0	>)			(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
	hours per week	<u> </u>	heck	all	that	арр	ly)	compensation from the	compensation from related organizations	amount of other compensation
!	WOOK	Individual trustee or director	Institutional trustee	Olficer	Key employee	Highest compensated employee	Former	organization (W 2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
AMBER FINLEY SR. STUDENT REP. (NON-VO	3.00							0.	0.	0
HARLAN GREELEY JR. STUDENT REP. (NON-VO	3.00							0.	0.	0
TWYLA BAKER-DEMARAY STUDENT REP. (NON-VOTING	3.00		-					0.	0.	0
DOROTHY PENDER CHAIR		х			-			0.	0.	
EVERETT CHAVEZ					├╌	-				0
VICE CHAIR MARY JO ONDRECHEN	3.00				_	├-		0.	0.	0
SECRETARY KIUTUS TECUMSEH	3.00	Х			-	-	_	0.	0.	0
TREASURER ANTHONY KAHN	3.00	х	_		_		_	0.	0.	0
MEMBER DEAN SENECA	3.00	х	ļ			_		0.	0.	0
MEMBER	3.00	x						0.	0.	0
PAMALA M. SILAS CHIEF EXECUTIVE OFFICER	40.00	х		х				73,514.	0.	2,511
SHIRLEY LACOURSE DEPUTY DIRECTOR	40.00	Х		Х				63,753.	0.	1,913
DONALD R FARAONE FINANCE DIRECTOR	40.00	х		x				71,583.	0.	2,160
IONA BLACK MEMBER	3.00	x						0.	0.	0
JAMES H. MAY MEMBER	3.00	x						0.	0.	0
MARLENE D. WATSON		Ť	T			$\top$	Η			
MEMBER	3.00	х		-	-	<u>                                     </u>	_	0.	_0.	0
		-	_	-	_					
					<u> </u>					Farm 990 (200)

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Form 990 (2008)

Page 7

SOCIETY

Par	Section A. Officers, Directors, Tru	istees, Key Er	nplo	yee	s, a	nd l	high	est	Compensated Employ	ees (continued)	
(A)		(B)			(0				(D)	(E)	(F)
	Name and title	Average	١,,		Posi				Reportable	Reportable	Estimated
		hours per		neck	all	ınat	арр	ıy)	compensation from	compensation from related	amount of other
		week	adividual frustee or director				_		the	organizations	compensation
			8	Sie	l '	1	Highest compensated employee		organization	(W-2/1099-MISC)	
			E SE	institutional trustee		byce	adwo.		(W-2/1099-MISC)		organization and related
			dwd	stute	O U	Key employee	phest	ja E			organizations
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		<del> </del>	$\vdash$	1	$\vdash$	+	+	╌		-	
					L.		_				
1b	Total								208,850.		0. 6,584.
2	Total number of individuals (including thos	e in 1a) who re	cen	/ed r	nore	tha	ап \$*	00	,000 in reportable		_
	compensation from the organization	<del></del>				•			44- 414- 411911 111   4 4 1	179 8	Yes No
3	Did the organization list any former officer	. director or tru	ıste	e. ke	v er	nolo	vee.	or	highest compensated e	mplovee on	<b>製造 機能 対理</b>
	line 1a? If "Yes," complete Schedule J for				, 0.		-	,	The second secon		3 X
4	For any individual listed on line 1a, is the s						n an	d of	ther compensation from	the organization	保留 速数 は利
_	and related organizations greater than \$15										4 X
5	Did any person listed on line 1a receive or										5 X
Sec	the organization? If "Yes," complete Sched tion B. Independent Contractors	oue J for such	per	son	<u> </u>		<u> </u>				5 X
1	Complete this table for your five highest co	ompensated in	dep	end	ent (	cont	tract	ors	that received more than	\$100,000 of comp	ensation from
	the organization.	· · · · · · · · · · · · · · · · · · ·	•							<u> </u>	
	(A)								(B)		(C)
	Name and business	address							Description of	services	Compensation
					-				<b></b>		
2	Total number of independent contractors	(including thos	e in	1) w	ho i	rece	ived	mo	re than \$100,000 in cor	npensation \$	時的建學結構
	from the organization ▶	0							•		是對於自然的特別可
											Form <b>990</b> (2008

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Form 990 (2008)

#### Part X Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and			y	7 13 72 0 miles
	organizations in the U.S. See Part IV, line 21			1. 11 12 to 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Contract Man
2	Grants and other assistance to individuals in				ر عاد من المنظم ١١/١٤ ع
	the U.S. See Part IV, line 22	243,392.	243,392.	S	ا الله الله الله الله الله الله الله ال
3	Grants and other assistance to governments,	-			
	organizations, and individuals outside the U.S.				و الروس التي التي التي التي التي التي التي التي
	See Part IV, lines 15 and 16			The same of the sa	
1	Benefits paid to or for members			The street is given	in the part of the said
5	Compensation of current officers, directors,				
	trustees, and key employees	215,434.	120,643.	73,247.	21,544
3	Compensation not included above, to disqualified		······································		
	persons (as defined under section 4958(f)(1)) and	<b>!</b>			
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	276,779.	154,391.	95,411.	26,977
3	Pension plan contributions (include section 401(k)			27/334	~~,,,,,
	and section 403(b) employer contributions)	13,934.	7,246.	5,156.	1,53
,	Other employee benefits	67,934.	36,352.	25,620.	
)	Payroll taxes	41,585.	23,288.	13,723.	4,57
	Fees for services (non-employees):	/5551	23,200.	23,723.	
	Management	Î			
b	Legal	1,462.		1,462.	ļ
-	A	22,824.		22,824.	
ď		22,024.	· · · · · · · · · · · · · · · · · · ·	44,044.	<u> </u>
e	Professional fundraising services. See Part IV, line 17		प्रमेक : ६८८ ६ <b>० व्ह</b> ा	259 1 80 H1 512 H1 1 10 15	<u> </u>
	Investment management for			国 网络维护 原	ļ
f 	Investment management fees				
	Other				ļ
!	Advertising and promotion,	16 660	44 800	F 000	10.
}	Office expenses	16,660.	11,075.	5,087.	49
,	Information technology				
•	Royalties	01 508	20.202	76 040	
;	Occupancy	91,588.	39,383.		
	Travel	210,294.	187,701.	18,656.	3,93
1	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		**************************************		
	Conferences, conventions, and meetings	471,087.	471,087.		
	Interest				
	Payments to affiliates				
•	Depreciation, depletion, and amortization	34,593.		34,593.	
l	Insurance				
ļ	Other expenses. Itemize expenses not covered		9', 4 H2		
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				門。在正學家
	expenses shown on line 25 below.)	" Car	は強いいた		一点人 有一多
a	PROFESSIONAL FEES	321,013.	242,302.	70,090	8,62
b	PARTICIPANT COSTS	135,750.	135,750.	0.	
	AWARDS & GIFTS	100,524.	98,499.	2,025	
d	PRINTING	53,190.	41,457.	339	11,39
	MISCELLANEOUS	51,217.	26,388.	18,214	6,61
	All other expenses	99,334.	71,971.	13,867	13,49
•	Total functional expenses. Add lines 1 through 24f	2,468,594.	1,910,925	443,267	114,40
,	Joint Costs. Check here if following	2,200,334.	-12±0,283.	240,407	
•	SOP 98-2. Complete this line only if the organization				
				<b>!</b>	i
	reported in column (B) joint costs from a combined				

832010 12-18-08

AMERICAN INDIAN SCIENCE AND ENGINEERING Form 990 (2008) SOCIETY 73-1023474 Page 11 Part X Balance Sheet Beginning of year End of year Cash · non-interest-bearing .... 333,514 156,187. 1 2 Savings and temporary cash investments 690,761. 1,013,946. 2 49,777. 3 Pledges and grants receivable, net .... 38,525 3 Accounts receivable, net 189,721 342.846. 4 4 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L. 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 \_\_\_\_\_ A 36,914. Notes and loans receivable, net 7 .. . .. .. 13,706. Inventories for sale or use 11,620.Prepaid expenses and deferred charges 18,652. 88,800. 9 10a Land, buildings, and equipment cost basis 10a 309,306 b Less: accumulated depreciation. Complete 157,426. 162,916. Part VI of Schedule D 151,880 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 186,305. 12 159,360. investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, Ime 11 34,900. 15 Ō. Total assets. Add lines 1 through 15 (must equal line 34) ..... 1,705,914. 16 1,979,962. 56,262. 17 17 71,645. 18 18 63,843. 19 Deferred revenue 339,021. 19 20 Tax-exempt bond liabilities 20 Escrow account liability. Complete Part IV of Schedule D 21 21 品、特殊 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable 24 24 Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 ..... 120,105. 410,666. 26 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29, and lines 33 and 34. or Fund Balances ,315,645 27 Unrestricted net assets 536,608. 27 371,457. 213,933 28 Permanently restricted net assets 56,231. 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 Total net assets or fund balances 1,585,809. 33 1,569,296. 1,705,914. 979,962. Total liabilities and net assets/fund balances Financial Statements and Reporting TVon I No

			100		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		. f	-	ı
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X	
ь	Were the organization's financial statements audited by an independent accountant?	2b	X		
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?	2c	Х		
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-1337	3a	X	<u> </u>	
ь	If "Yes," did the organization undergo the required audit or audits?	3b	X		
32011	12-18-08	Form	990	(2008)	,

832011 12-18-08

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Employer Identification number

AMERICAN INDIAN SCIENCE AND ENGINEERING 73-1023474 SOCIETY Reason for Public Charity Status (All organizations must complete this part ) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its 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 acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III - Functionally integrated d \_\_\_\_ Type III - Other e Sy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above?........ 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? ..... 11g(iii) Provide the following information about the organizations the organization supports. h (III) Type of (iv) is the organization (v) Did you notify the (vi) Is the (I) Name of supported (ii) EIN (vii) Amount of organization in col. (I) organized in the U.S.? organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section Yes Nο Yes No Yes (see instructions))

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

. 4.

Schedule A (Form 990 or 990-EZ) 2008 SOCIETY 73-1023474 Page 2 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) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2007 (a) 2004 (b) 2005 (c) 2006 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 889,540. 729,160. 1570733. 1519278. 1654716. 6363427. 2 Tax revenues levied for the organ ization'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 4 Total. Add lines 1 - 3 889,540 729,160. 1570733. 1519278 1654716. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 671,381. 5692046. 6 Public Support. Subtract line 5 from line Section B. Total Support (a) 2004 Calendar year (or fiscal year beginning in) (e) 2008 (b) 2005 (c) 2006 (d) 2007 (f) Total 889,540. 1654716. 7 Amounts from line 4 729,160. 1570733. 1519278 6363427. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 147,518. 11,148. 22,607 42,698 45,627. 25,438. and income from similar sources 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 81,145. 111,306. 34,927. 65,768. 3.894. 297,040. assets (Explain in Part IV) 6807985. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 3,439,994. 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 83.61 14 % 76.65 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization ightharpoonsmeets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

832022 12-17-08 Schedule A (Form 990 or 990-EZ) 2008

Sche	edule A (Form 990 or 990-EZ) 2008						Page 3
	rtill Support Schedule for C	rganizations	Described in S	Section 509(a	(2) (Complete only	if you checked the box	on line 9 of Part I.)
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	( <b>b</b> ) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and				ŀ		
	membership fees received. (Do not					1	
	include any "unusual grants.")					\ <u></u>	
2	Gross receipts from admissions, merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-		[ [		1	i i	
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to		]			]	
	or expended on its behalf						
5	The value of services or facilities					[	<u> </u>
	furnished by a governmental unit to					1	
	the organization without charge			<u> </u>			
6	Total. Add lines 1 - 5						
7 a	Amounts included on lines 1, 2, and						<del>-</del>
	3 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9 10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b				<del> </del>		
	Public support (Subtract line 7c from line 6)		The state of the s	質が強いい。	THE STORES	JANE DESCRIPTION OF THE PARTY O	
	ction B. Total Support	44 c (27. 3)K-18	6	\$1 47 halfs 44 10 15 70 1801	San 2 3 March 1 Translation	- Action of the State of the St	
_	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income				<del> </del>		<del></del>
	(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)	经到的证 計	高いた。大量は	<b>大大大小小小大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大</b>	的表现不是		
	First five years. If the Form 990 is fo				فنحاص بننات كروسيات		zation,
	check this box and stop here	,			•		
Sec	ction C. Computation of Publ	ic Support Pe				<del>``````````````````````````</del>	
	Public support percentage for 2008 (			column (f))		15	%
	Public support percentage from 2007					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from	-				18	%
	33 1/3% support tests - 2008. If the		•		e 15 is more than	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box a	-					▶□
t	33 1/3% support tests - 2007. If the	•	•				and
_	line 18 is not more than 33 1/3%, che						. [-]
20	Private foundation. If the organization		_				▶□
						hedule A (Form 99	0 or 990-EZ) 2008

### Schedule D

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Schedule D (Form 990) 2008

Name of the organization

AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY

Employer identification number 73-1023474

Par	t [ ] Organizations Maintaining Donor Advise	ed Funds or Other Similar Fun	ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Im		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor ad	vised funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor	or donor advisor or other impermissible	private benefit? Yes No
Pa			), Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an	historically important land area
	Protection of natural habitat	Preservation of cei	rtified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified con	servation contribution in the form of a c	onservation easement on the last day
	of the tax year.		
			提稿 Held at the End of the Year
а	Total number of conservation easements	*** ** * * * * * * * * * * * * * * * * *	2a
þ	Total acreage restricted by conservation easements	** * * * * * * * * * * * * * * * * * * *	2b
C	Number of conservation easements on a certified historic si	tructure included in (a) 🔒 .	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re-	eleased, extinguished, or terminated by	the organization during the taxable
	year ▶		
4	Number of states where property subject to conservation e	asement is located >	_
5	Does the organization have a written policy regarding the pr	eriodic monitoring, inspection, violations	s, and
6	Staff or volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	•	
_	and section 170(h)(4)(B)(ii)?		Yes L No
9	In Part XIV, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organiz	ation's financial statements that describ	es the organization's accounting for
.Da	conservation easements.		011 - 01 - 11 - 1 - 1
ार्थ	till, Organizations Maintaining Collections		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8.	
	<b>"</b>		
ıa	If the organization elected, as permitted under SFAS 116, n		
	treasures, or other similar assets held for public exhibition,		public service, provide, in Part XIV, the text
	the footnote to its financial statements that describes these		
Ь	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education,	or research in furtherance of public ser	vice, provide the following amounts relating t
	these items:		
	(I) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		, ,,,,, ▶ \$
2	If the organization received or held works of art, historical to	reasures, or other similar assets for final	ncial gain, provide
	the following amounts required to be reported under SFAS	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		, <b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>~ ^</b>
b	Assets included in Form 990, Part X		> \$

832051 12-23-08

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

#### AMERICAN INDIAN SCIENCE AND ENGINEERING

	dule D (Form 990) 2008 SOCIETY				73-1	023474 Page 2
Par	t-III Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or	Other Similar Ass	sets (continued)
3	Using the organization's accession and other	r records, check any	of the following that	t are a significa	ant use of its collection	items (check all
	that apply).					
а	Public exhibition	d	Loan or exch	nange program	ns	
b	Scholarly research	е	Other			
C	Preservation for future generations					
4	Provide a description of the organization's ca	ollections and explain	how they further th	ne organization	n's exempt purpose in F	Part XIV
5	During the year, did the organization solicit of	or receive donations o	of art, historical treas	sures, or other	similar assets	
	to be sold to raise funds rather than to be m	aintained as part of the	ne organization's co	llection?		Yes No
Par	t IV Trust, Escrow and Custodia	Arrangements.	Complete if organi	zation answere	ed "Yes" to Form 990, I	Part IV, line 9, or
	reported an amount on Form 990, Pa					
1a	Is the organization an agent, trustee, custod	ian or other intermed	ary for contribution	s or other asse	ets not included	
	on Form 990, Part X?		4 1 tresett a =+= 4 -			Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:			
						Amount
C	Beginning balance				tc	
d	Additions during the year				,, 1d	
0	Distributions during the year				te	
t	Ending balance	1 412 14141 49 144 44		T	1f	
2a	Did the organization include an amount on F	form 990, Part X, line	21?	,		Yes No
b	if "Yes," explain the arrangement in Part XIV	<u>.                                    </u>				
Rai	t V; Endowment Funds. Complete	if organization answe	red "Yes" to Form 9	990, Part IV, lin	ne 10.	
		(a) Current year	(b) Prior year	(c) Two years	back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	1,070,774.	A Partie		7.5	1 11 12 71 71
b	Contributions		Jan State State Co.		147	G. G.
C	Investment earnings or losses					13 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
đ	Grants or scholarships		1, 14	100		
е	Other expenditures for facilities	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	and programs		\$415	24 14 " 2" L	m. M. B.	
1	Administrative expenses	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	114, 197	MATE 1975	1	
9	End of year balance	1,070,774.	2 2 1			
2	Provide the estimated percentage of the year		s:			
8	Board designated or quasi-endowment	46.00	_%			
b	Permanent endowment ► 54.00	%				
C	Term endowment	<b>%</b>				
38	Are there endowment funds not in the poss	ession of the organiza	ation that are held a	ind administer	ed for the organization	<del></del>
	by:					Yes No
	(i) unrelated organizations		,		• 11 • • • • • • • • •	3a(i) X
	(ii) related organizations					3a(ii) X
_	If "Yes" to 3a(ii), are the related organization			1 100000 01 40	**** *********** **** **** ***	3b
4	Describe in Part XIV the intended uses of the					<del></del>
, F. CI	T.VI Investments - Land, Buildin					(45)
-	Description of investment	(a) Cost or of basis (investing		or other (other)	(c) Depreciation	(d) Book value
1a	Land	••		ş		
b	Buildings					
c	Leasehold improvements			3,879.	4,499.	9,380.
d	Equipment			7,807.	109,514.	128,293.
e	Other		5	7,620.	37,867.	19,753.
Tota	I. Add lines 1a-1e. (Column (d) should equal f	orm 990, Part X, colu	mn (B), line 10(c))	*******		157,426.

Schedule D (Form 990) 2008

73-1023474 Page 3

Part VII Investments - Other Securities. See	Form 990, Part X, line 1	2	73 2023272 (ago o
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: Cost or end of year market value
Financial derivatives and other financial products, Closely-held equity interests			
Other INVESTMENT IN AISES		<del></del>	
PUBLISHING	139,652	. COST	
INTEREST IN AISES FOUNDATION	19,708	. COST	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	159,360	•	THE RESIDENCE OF THE PROPERTY
Part VIII Investments - Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		E. Paris and Call	<b>小小公司的保护的企业的企业的企业的企业的企业的企业。</b>
Part; IX Other Assets. See Form 990, Part X, line	15. Description		(b) Book value
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col (B) lir			
(a) Description of liability	line 25	(b) Amount	
Federal income taxes			

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

Schedule D (Form 990) 2008

#### AMERICAN INDIAN SCIENCE AND ENGINEERING

	dule D (Form 990) 2008 SOCIETY		73-1	023474 Page 4
Par	t XI   Reconciliation of Change in Net Assets from Form 990 to Financial Sta	tements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,471,304.
2	Total expenses (Form 990, Part IX, column (A), line 25)	F		2,468,594.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	<del></del>		2,710.
4	Net unrealized gains (losses) on investments			- 277201
5	Donated services and use of facilities	5		3,178.
6	Investment expenses			3,170.
7	Investment expenses	6		
8	Prior period adjustments	7		<22,401.>
-	Other (Describe in Part XIV)			<19,223.>
9	Total adjustments (net) Add lines 4-8	9		
10   Dái	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		<16,513.>
	t XII Reconciliation of Revenue per Audited Financial Statements With Rev	enue per i	1 T	2 020 726
1	Total revenue, gains, and other support per audited financial statements		11	2,938,736.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		-1-1	
а	Net unrealized gains on investments 2a		15.31	
ь	Donated services and use of facilities	3,178		
С	Recoveries of pnor year grants 2c			
đ		18,558	7, 301	
6	Add lines 2a through 2d	******	2e	521,736.
3	Subtract line 2e from line 1	44 144 1444 444 44	3	2,417,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		158 ·	
а	Investment expenses not included on Form 990, Part VIII, line 7b		(3)	
b	Other (Describe in Part XIV)	54,304		
¢	Add lines 4a and 4b		4c	54,304.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		5	2,471,304.
ĮРа	rt XIII Reconciliation of Expenses per Audited Financial Statements With Ex		r Retu	
1	Total expenses and losses per audited financial statements		11	2,950,824.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		isus:	<del></del>
а	Donated services and use of facilities 2a	3,178		
b	Prior year adjustments 2b			
c	Losses reported on Form 990, Part IX, line 25			
d	Other (Describe in Part XIV)	79,052	数据	
	Add lines 2a through 2d		2e	482,230.
3	Subtract line 2e from line 1		3	2,468,594.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		(49)	2,200,3211
a	Investment expenses not included on Form 990, Part VIII, line 7b			
ь	Other ID and the December of the Community of the Communi	_	- [전공]	
•	Add liver to and the		2 P Q Q P	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		4c	2,468,594.
			1 5	2,400,334.
	rt'XIV  Supplemental Information			N. B. M. C. A. B. J.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines	1b and 2	2b; Part V, line 4; Part
	art XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	ma	ma ni	<b>a</b>
PA	RT V, LINE 4: THE INTENDED USE OF THE ENDOWMENT FUN	שוא וא	TO BI	<u> </u>
~ > 27	THAMED IN BEDDYMITHIN HITMIN MIND THEIR MANNESS OF THE			
TM	VESTED IN PERPITUITY WITH THE INVESTMENT EARNINGS I	SEING O	NKES.	TRICTED
	TD C TO 1 7 C TO			
FU	NDS TO AISES.			
PA	RT XI LINE 8: ADJUSTMENT TO REMOVE ACTIVITY FROM EN	<u> TITIES</u>	THA	T ARE
CO	NSOLIDATED FOR FINANCIAL STATEMENT PURPOSES BUT FIR	E THEI	R OW	XAT N
RE'	rurn.			
		<del>_</del>		
83205	4		Sched	tule D (Form 990) 2008

12-23-0

## AMERICAN INDIAN SCIENCE AND ENGINEERING Schedule D (Form 990) 2008 SOCIETY 73-1023474 Page 5 Part XIV Supplemental Information (continued) PART XII AND PART XIII LINE 2D: ADJUSTMENT TO REMOVE ACTIVITY FROM AISES PUBLISHING. THE ENTITY FILES ITS OWN TAX RETURN.

Schedule D (Form 990) 2008

SCHEDULE								OMB No 1545-0047
(Form 990)			Grants and Govern	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organization: luals in the U.S.	ต์		. 5008
Department of the Treasury Internal Revenue Service		<b>▼</b> Complet	lete if the organizatio	in answered "Yes," on F- ■ Attach to Form 990.	," on Form 990, P. m 990.	ie if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Aftach to Form 990.		The Open to Public
Name of the organization	AMERICAN SOCIETY	INDIAN SCIENCE	AND	ENGINEERING	U			Employer identification number 73-1023474
1 Does the organic	Ceneral information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ind Assistance to substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the select	ion X Yes No
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	scedures for monit	oring the use of grant	funds in the United	d States.	. [[area   ] ]   ]   ]	14 . 1	'
Part II Grants an	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments and	1 Organizations in the	United States. C	complete if the org	anization answered ")	res" on Form 990, Part	IV, line 21, for any
reciplent t	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	box if no one recipier	nt received more th	lan \$5,000. Use Pe	art IV and Schedule I	(Form 990) if addition	al space is needed
1 (a) Name and ac	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NONE				0	0.			
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations	nd government or	ganizations					<b>A</b>
	Enter total number of other organizations	,			1	*** *** *** *** *** *** *** *** ***		<b>A</b> :: :
٦	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008

73-1023474 Schedule I (Form 990) 2008 SOCIETY

| Part | Schedule | Form 990 | 2008 SOCIETY

| Part | Schedule | Form 990 | 1 additional space is needed.

Page 2

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Schedule I (Form 990) 2008

832102 12-18-08

#### · 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.

1	OMB No 1545-0047
	2000
1	Open to Public
	Open to Public of Inspection
	- 10 41 100479 41

Name of the organization

AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY

Employer identification number 73-1023474

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENGINEERING.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
INTERNSHIPS - THE AISES INTERNSHIP PROGRAM IS A SUMMER PROGRAM THAT
PROVIDES QUALIFIED COLLEGE STUDENTS WITH INTERNSHIP OPPORTUNITIES TO
EXPLORE POTENTIAL FEDERAL SERVICE CAREERS. AISES CURRENTLY ADMINISTERS
EIGHT INTERNSHIP PROGRAMS.
EXPENSES \$ 121872. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
THESE INCLUDE SPECIFIC PROGRAMS FUNDED BY PRIVATE FOUNDATIONS AND
INCLUDE REGIONAL COMMUNITY NETWORKS TO SUPPORT THE NATIONAL SCIENCE
FAIR AND THE COLLEGE CHAPTER PROGRAMS.
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION HAS ELECTIONS FOR
THE BOARD OF DIRECTORS. THE CALL FOR NOMINATIONS IS RELEASED TO AISES
MEMBERS AND POSTED ON THE WEBSITE. AFTER THE NOMINATION DEADLINE HAS
PASSED, A BALLOT ALONG WITH ALL COMPLETE NOMINATIONS ARE COPIED AND MAILED
OUT TO EACH GENERAL MEMBER OF AISES FOR VOTING. THE BALLOTS ARE MAILED BACK
TO AISES AND A FORMAL BALLOT COUNTING PROCESS TAKES PLACE. THE INDIVIDUALS
WITH THE MOST MEMBER VOTES
ARE ELECTED TO FILL THE VACANT BOARD OF DIRECTORS POSITIONS.
FORM 990, PART VI, SECTION A, LINE 10: THE COMPLETED FORM 990 WILL FIRST
BE PRESENTED TO THE FINANCE COMMITTEE OF THE BOARD OF
DIRECTORS FOR REVIEW. UPON THE RECOMMENDATION OF THE FINANCE COMMITTEE,
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

#### **SCHEDULE 0** (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 **0U8** Inspection

Name of the organization

AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY

**Employer** identification number 73-1023474

FORM 990 WILL BE SUBMITTED TO THE FULL BOARD FOR APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST TO THE EXECUTIVE DIRECTOR EACH YEAR UPON BECOMING AWARE OF THE CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15: OFFICER COMPENSATION IS DERIVED FROM SALARY SCALES. SALARY SCALES, AND NEW POSITIONS, IE. THE CEO, GET THEIR SCALES

BASED ON SURVEYS OF LOCAL NON-PROFIT SCALES, AS WELL AS NATIONAL SCALES.

THE SALARY SURVEYS/SCALES ARE BASED ON

DIRECT REQUESTS OF DATA, AS WELL AS INFORMATION PUBLICLY AVAILABLE ON

GUIDESTAR.ORG. ALL NEW POSITIONS AND SALARIES

ARE DISCUSSED/APPROVED AT THE BOD LEVEL. OFFICERS ARE FURTHER INTERVIEWED

BY BOTH PROFESSIONAL STAFF AND BOD

MEMBERS. MEDIAN FIGURES FOR BOTH LOCAL AND NATIONAL PAY ARE USUALLY

TARGETED, UNLESS CANDIDATE PROFILES AND

EDUCATIONAL BACKGROUNDS EXCEED THE MEDIAN FIGURES, THEN A SLIGHTLY ELEVATED

PAYSCALE MAY BE CONSIDERED AND

BUDGETED FOR.

FORM 990, PART VI, SECTION C, LINE 19: ANY REQUEST FOR THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS MUST BE MADE IN WRITING TO THE EXECUTIVE DIRECTOR AND FINANCE DIRECTOR.

FORM 990, PART XI, LINE 2C

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211

Schedule O (Form 990) 2008

#### · 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
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Open to Public Inspection
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Name of the organization	AMERICAN SOCIETY	INDIAN	SCIENCE	AND	ENG	INEERING	Employer identification number 73-1023474
THERE HAS BEEN	NO CHANGE	IN THE	PROCESS	FOR	THE	SELECTION	OF
INDEPENDENT AU	DITORS.		····		· · · · · · · · · · · · · · · · · · ·		
			***				
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
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12-18-08

Schedule O (Form 990) 2008

Open to Publica. Schedule R (Form 990) 2008 Employer identification number OMB No 1545-0047 Direct controlling Direct controlling 73-1023474 entity entity Œ E 170(B)(1)(A)(VIAISES End-of-year assets status (if section 501(c)(3)) Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Public chanty Œ Total income Exempt Code section 501(C)(3) 9 <u>@</u> Related Organizations and Unrelated Partnerships Legal domicile (state or Legal domicile (state or foreign country) foreign country) ► See separate instructions. <u>©</u> NEW MEXICO AMERICAN INDIAN SCIENCE AND ENGINEERING LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Primary activity Primary activity DISBURSEMENTS AND <u>@</u> <u>@</u> SNDOWMENTS Identification of Related Tax-Exempt Organizations Identification of Disregarded Entities SOCIETY Name, address, and EIN Name, address, and EIN of related organization of disregarded entity AISES FOUNDATION - 20-0784485 2305 RENARD SE SUITE 200 ALBUQUERQUE, NM 87106 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part 1 Part II

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Page 2

AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY

Schedule R (Form 990) 2008 SOCIETY

General or managing partner? Yes No Percentage ownership 1008 Schedule R (Form 990) 2008 Ê Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) 177,576. Share of end-of-year assets ate allocations? Yes No Drsproportion-Ē 26,495. Share of total income Share of end-of-year assets g Type of entity (C corp, S corp, or trust) Œ Share of total income CORP E Direct controlling entity Predominant income (related, investment, unrelated) 9 AISES Œ egal domicile (state or foreign country) ğ <u>©</u> Direct controlling entity PUBLISHING COMPANY Primary activity <u>@</u> Part IV Identification of Related Organizations Taxable as a Corporation or Trust egal domicite (state or foreign country) Part III Identification of Related Organizations Taxable as a Partnership Θ Primary activity AISES PUBLISHING, INC. - 84-1009435 2305 RENARD SE SUITE 200 ALBUQUERQUE, NM 87106 Name, address, and EIN of related organization Name, address, and EIN of related organization 832162 12-23-08

Page 3 73-1023474

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# AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY

Schedule R (Form 990) 2008

Schedule R (Form 990) 2008 Amount involved Yes Q <del>6</del> ₽ Ş þ ₽ ŧ ŧ, ¥ Ē 두 ٥ 5 ÷ ------a or a con extend the state of the contraction of the state If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (B) Transaction type (a-r) i I de dispute après une sent manurage de la constitució de la Exchange of assets

Lease of facilities, equipment, or other assets to other organization(s)

Lease of facilities, equipment, or other assets to other organization(s) During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts IHV? The second state of the se -----: d Loans or loan guarantees to or for other organization(s) - -- --- arise attheast remanantations often in alles & co. street a titletite to to to the titletite and a second Sharing of facilities, equipment, malling lists, or other assets Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Name of other organization(s) . . . . . . Receipt of (i) interest (ii) annuttles (iii) royalties (iv) rent from a controlled entity : : : Lease of facilities, equipment, or other assets from other organization(s) Gift, grant, or capital contribution from other organization(s) Other transfer of cash or property from other organization(s) ..... Purchase of assets from other organization(s) ..... ... Loans or loan guarantees by other organization(s) Gift, grant, or capital contribution to other organization(s) Reimbursement paid by other organization for expenses Note. Complete line 1 if any entity is listed in Parts II, III, or IV. Sharing of paid employees . ..... .. ..... Part V Transactions With Related Organizations Sale of assets to other organization(s) Exchange of assets 832163 12-23-08 æ Φ ح Ε o. σ 2 0 2 Ξ 2 ව € 9 9

73-1023474 Page 4

AMERICAN INDIAN SCIENCE AND ENGINEERING

Schedule R (Form 990) 2008 SOCIETY

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross reverue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	lusion for certain investment partners	ŀ					
( <b>A</b> )	( <u>8</u> )	ပ	<u>@</u>			<u>(</u>	
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
Samp 10			Yes No			of Schedule K-1 (Form 1065)	
			_				
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A CALLED TO THE PARTY OF THE PA							
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						Schedule R (Form 990) 2008	990) 2008

				<del></del>	<del></del> -				
Current Year Deduction	28,951.	251.	380.	14,645.	336.	47,314.			意味をされた
Current Sec 179		10 mm		,	; } ; } ;	0.			
Accumulated Depreciation	65,215. 5,592.	12,563. 15,801.	1,467.	14,645. 944.	336.	17,286.		2000年	
Basis For Depreciation	144,757.	12,814.	5,701.	73,223.	5,041.	280,202. 1			は のないので
Reduction in Basis	اور د د د د د د د د د د د د د د د د د د د			**		0			
Bus % Excl	***	-		- ,		•			
Unadjusted Cost Or Basis	144,757.	12,814. 15,801.	5,701.	73,223.	5,041.	280, 202.			
No.	16 16	16	9	16	به بې	- 75			
Life	5.00	5.00	15.0016	5.00 1	3.00				
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• ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone