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, 990 Eorm

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2008
Open to Public

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

Open to Public Inspection

| Δ | F | or the | 2008 ca | lendar yea | r, or tax year b | eginning | JUL 1, | 2008 | and | ending | JUN | 30, 2 | 2009 | 9 | | |
|-----------|--------------|--|---|--------------------------|-----------------------|---------------------|---------------------|------------------|-------------|--------------|-------------------|---|-------------------|----------------------------|--------------|--|
| В | CI | neck if | Please | C Name o | f organization | | | • | | | D E | mployer i | dentif | ication number | | |
| | ap | plicable | use IRS | THE A | MERICAN | SOCIET | Y FOR I | REPROD | UCTI | VE | | | | | | |
| [| | Addres change | label or print or | MEDIC | | | _ | | | | | | | | | |
| į | | Name change | type | | Business As | | - | | | | _ | (| 14-2 | 2284338 | | |
| Ī | | initial return | See | | r and street (or | P.O. hox if ma | il is not delivere | ed to street ac | idress) | Room/suit | e F Te | elephone | | | | |
| Ì | | Termin- | Specific Instruc- | . I | MONTGOME | | | | 20.000, | | ` - `` | | | 5)978 <u>-500</u> | 0 | |
| i | | lation Amend return | | | town, state or c | | | | | l | G Gr | oss receipts | | 10,229 | | |
| Ī | | Applica | - | | NGHAM, A | | | | | | | | | | 7 | |
| • | | pendin | F Nar | | | | | | | | | a) Is this a group return for affiliates? Yes X No | | | | |
| | | | | | C ABOVE | | | | , | | | | | cluded? Yes | | |
| 1 | Ta | ax-exe | | us: X 50 | | (insert no. |) 4947 | (a)(1) or | 527 | | | | | a list. (see instruc | | |
| J | | | | W.ASR | | | | | | | H(c) | Group ex | emption | on number 🕨 | | |
| | | | | on: X Co | | Trust | Association | Other | > | L Yea | | | | M State of legal do | micile: CA | |
| | | | Summ | | | | | | | | | | | | | |
| | 9 | 1 8 | Briefly de | scribe the o | organization's n | nission or mo | st significant | activities. | ASRM | IS A | MUL | TIDIS | CIE | PLINARY | | |
| | Governance | 9 | ORGAN | ITAZI | ON DEDIC | ATED I | O THE | ADVANC | <u>EMEN</u> | T OF | THE | ART, | SCI | ENCE, AN | D | |
| | Ĕ | 2 (| Check thi | ıs box 🕨 | If the orga | anızatıon dise | continued its | operations | or dispo | sed of mo | re than : | 25% of it | s asse | ts. | | |
| | 8 | 3 1 | Number o | of voting me | embers of the g | overning boo | dy (Part VI, lin | e 1a) | | | | | 3 | | 24 | |
| | <u>ග</u> | 4 1 | Number o | of independ | lent voting men | bers of the | governing boo | dy (Part VI, I | line 1b) | | | | 4 | | 23 | |
| | es | 5 | otal num | nber of emp | oloyees (Part V, | line 2a) | | | | | | | 5 | | <u>30</u> | |
| STATE OF | <u>¥</u> | 6 | otal num | nber of volu | ınteers (estimat | e if necessar | y) | | | | | | 6 | | <u>250</u> | |
| E-2 | Activities & | 7a ¯ | | | | | | | | | 7a | 105 | <u>,500.</u> | | | |
| アプ | | <u>b</u> ! | let unrel | ated busine | ess taxable inco | me from For | m 990-T, line | 34 | | 1 | | | 7b | 29 | <u>,105.</u> | |
| € | | | | | | | George | | | <u> </u> | | ior Year | | Current Y | | |
| | 9 | 8 (| Contribut | tions and gi | rants (Part VIII, | ine 1h) | | RIC | CEIV | | | <u>965,2</u> | | | <u>,610.</u> | |
| | Revenue | 9 F | rogram: | service rev | enue (Part VIII, I | ine 2g) | | | J L I V | | | 920, | | | <u>,816.</u> | |
| 7~ | <u>۾</u> | | | | Part VIII, colum | | | | | | | 639,2 | | | <u>,607.</u> | |
| ũ | _ | 11 (| Other rev | enue (Part | VIII, column (A) | lines 5, 6d, | 8c, 9c, 10c | ¦nd 1.¥⊌NY | 202 | 2010 | | 467,3 | | | <u>,053.</u> | |
| CANIMATI | | | | | ines 8 through | | | A | ne 12) | 0 | | 992,4 | | | | |
| | | | | | mounts paid (Pa | | ii ii | OGE |)ENI | 117 | ≡∮ | 163,8 | 372. | 198 | <u>,398.</u> | |
| <u>جا</u> | | 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,525, | | | | | | | | | | | | | | |
| CT. | မှု မ | | | | | | | umn (A), line | es 5-10) | - | 2, | 525,8 | 321. | 2,909 | <u>,789.</u> | |
| Q. | eus | | t6a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ | | | | | | | | | | | | | |
| | Expens | | | | | | ·- | | | —— <u> </u> | | 610 | | | 4.68 | |
| | _ | | | | t IX, column (A) | | | | | - | | 610,9 | | | <u>,467.</u> | |
| | | | | | I lines 13-17 (mi | | | (A), line 25) | | - | | 300,6 | | | <u>,654.</u> | |
| _ | - & | 19 I | Revenue | less expen | ses Subtract III | ne 18 from lii | ne 12 | | | | | 691, | | T - | <u>,432.</u> | |
| ٤ | Balances | | | | | | | | | | | ning of Y | | End of Y | | |
| 9 | 屬 | | | ets (Part X, | • | | | | | | <u> 40,</u> | | $\frac{139}{115}$ | | | |
| <u> </u> | 冟 | | | ilities (Part : | | | t 00 | | | | 26, | 161,0 115,4 | | 23,547 | <u>,544.</u> | |
| ŕ | 딘 Pa | <u>22 </u> rt | | ts or tuna b ture Blo | alances. Subtra | act line 21 tro | om line 20 | | | | <u> </u> | 113,4 | 124. | 43,341 | <u>,165.</u> | |
| L | | | | | | examined this r | eturn, including ac | companying se | chedules a | nd statement | s, and to th | e best of my | knowle | dge and belief, it is true | e, correct. | |
| | | l | and comple | ete Declaration | of preparer (other th | nan officer) is bas | sed on all informat | ion of which pre | eparer has | any knowledo | ge | , | | , | | |
| | Sign | | | Manci | 1 R. H | rulel | _ | | | | | 15/ | 14/) | 10 | | |
| | lere | | Sigi | nature of pffi | cer | | <u> </u> | | | | | Date | <i>,,,,</i> | | | |
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| | | | | e or print na | | <u> </u> | | | | | | | | | | |
| _ | | | Preparer' | s | | 7 | | | Date | | Check if | | | arer's identifying numb | ет | |
| _ | aid | | signature | | 1 Z. L | IT CP | A | | 5-14 | 1-10 | self- employed | ▶ □ | (368 | nstructions) | | |
| | • | | Firm's nam | ne (or S | ELLERS F | | SON HO | LMAN & | WES | | | EIN ▶ | | | | |
| U | se | Only | self-employ | yed), 2 | • | | EVARD, | | | • | | | | | | |
| | |] | address, ar ZIP + 4 | nd 💮 | IRMINGHA | | <u>35243</u> | | | | | Phone no | <u>o. ▶</u> 2 | 205-278-0 | 001 | |
| <u>N</u> | Лay | the IF | S discus | s this retur | n with the prep | | bove? (see ir | structions) | | | | | | X Yes | ☐ No | |
| _ | | 11 12-18 | | | vacy Act and F | | | | e the s | eparate ir | nstructio | ons. | | Form 9 | 90 (2008), | |

| | | <u> </u> | Page 2 |
|-----------|---|-------------|---------------|
| Pai | rt III Statement of Program Service Accomplishments (see instructions) | | |
| 1 | Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION | | |
| | ASRM IS A MULTIDISCIPLINARY ORGANIZATION DEDICATED TO TH | E ADVANCEME | ENT |
| | OF THE ART, SCIENCE, AND PRACTICE OF REPRODUCTIVE MEDICI | | |
| | SOCIETY ACCOMPLISHES ITS MISSION THROUGH THE PURSUIT OF | | TN |
| | | PATIENTS, | T14 |
| | | FRITENIS, | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | | (|
| | the prior Form 990 or 990-EZ? | L Yes | X 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? | L Yes | X 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 expe | enses. | |
| | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gr | | |
| | allocations to others, the total expenses, and revenue, if any, for each program service reported. | | |
| | allocations to others, the total expenses, and revenue, if any, for each program service reported. | | |
| 4- | (Code:) (Expenses \$ 716,457. including grants of \$) (Rev | | |
| 4a | | venue \$ | , |
| | PUBLISHING MONTHLY EDUCATIONAL PERIODICAL | | |
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| 4b | (Code:) (Expenses \$ 582,378. including grants of \$) (Rev | venue \$ |) |
| | COMMITTEES AND SPECIAL INTEREST GROUPS | | · |
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| 4c | | venue \$ |) |
| | ANNUAL MEETING-LECTURES | | - |
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| 4d | Other program services. (Describe in Schedule O) | | |
| 4u | | \ | |
| | (Expenses \$ 162,155. including grants of \$) (Revenue \$ | | |
| <u>4e</u> | Total program service expenses ►\$ 4,265,406. (Must equal Part IX, Line 25, column (B)) | | 000 |
| | | Form 9 | 90 (2008) |

| | 990 (2008) MEDICINE | <u> 338</u> | Р | age 3 |
|-----|---|-------------|-----|----------|
| Par | rt 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 | | X |
| 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 | i | | |
| | 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, | | | |
| | 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 | | | |
| | 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 | | Х |
| 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 | |
| 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? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12 | X | |
| 13 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the U.S.? | 14a | | X |
| 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 ? If "Yes," complete Schedule F, Part I | 14b | | 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 | | | |
| | located outside the United States? If "Yes," complete Schedule F, Part II | 15 | Х | |
| 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? 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 | | X |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | X |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | X |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | _X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J | 23 | X | |
| 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? If "Yes," answer questions 24b-24d and complete Schedule K | | | |
| | 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 | | |
| С | 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 | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | <u> </u> |
| 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? 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 | | | |
| | 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 | | | |
| | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial | J . | | 1 |

contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

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Form 990 (2008) MEDICINE

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: | | | |
| а | 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)? If "Yes," complete Schedule L, Part IV | 28a | | _X_ |
| b | Have a family member who had a direct or indirect business relationship with the organization? | | | |
| | If "Yes," complete Schedule L, Part IV | 28b | | _X_ |
| С | 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 | | <u>X</u> |
| 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 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | ł | |
| | Schedule N, Part II | 32 | | _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 | | _X_ |
| 34 | Was the organization related to any tax-exempt or taxable entity? | | 1 | |
| | If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | _X_ | |
| 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 | | <u> </u> |
| 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 | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |

Form **990** (2008)

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Form 990 (2008) MEDICINE

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 | | | |
| þ | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | | <u> X</u> |
| 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 30 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 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 instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a_ | X | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b_ | X | |
| 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)? | 4a | | X |
| 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? | 5a | | _X_ |
| þ | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | _X_ |
| С | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited | | | |
| | Tax Shelter Transaction? | 5c | | |
| 6a | Did the organization solicit any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? | 7a | | <u> </u> |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | |
| | to file Form 8282? | 7c | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| е | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal | | | |
| | benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f_ | | Х |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7 <u>g</u> | | X |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | 7h | | Х |
| 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? | 8 | | |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | | |
| 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 | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 11 | Section 501(c)(12) organizations. Enter: N/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) | | | |
| | 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 N/A 12b | | | L |

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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 | | | |
|----------|---|------------|----------|----------|
| | | | 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, | | | |
| | processes, or changes in Schedule O. See instructions. | | | |
| 1a | Enter the number of voting members of the governing body | | | |
| b | Enter the number of voting members that are independent 1b 23 |] | | |
| 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 | | <u> </u> |
| 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 | | <u> </u> |
| 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 | | <u> </u> |
| 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 | X | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b_ | Х | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | | | |
| | by the following: | | | |
| а | The governing body? | <u>8a</u> | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 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 | X | |
| 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 | Х | |
| Sec | tion B. Policies | | | |
| | | Г <u>.</u> | Yes | No |
| 12a | | 12a | Х | |
| b | | 406 | Х | |
| _ | to conflicts? | 12b | ^ | |
| С | | 100 | X | |
| 12 | In Schedule O how this is done | 12c | X | |
| 13 | Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? | 14 | X | |
| 14 15 | Did the process for determining compensation of the following persons include a review and approval by independent | 14 | | |
| 13 | persons, comparability data, and contemporaneous substantiation of the deliberation and decision. | | | |
| а | The organization's CEO, Executive Director, or top management official? | 15a | х | |
| | Other officers or key employees of the organization? | 15b | X | |
| J | Describe the process in Schedule O (see instructions) | | | |
| 162 | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | ļ | | |
| | taxable entity during the year? | 16a | | X |
| h | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation | 100 | | |
| _ | in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶CA | | | |
| 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. | | | |
| | 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, a | nd fina | ıncıal | |
| | 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 | tion 🕨 | - | |
| | NANCY FRANKEL - 205-978-5000 | | | |
| | 1209 MONTGOMERY HIGHWAY, BIRMINGHAM, AL 35216-2809 | | | |

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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 organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if the organization did not co | ompensate an | y of | ficer | , dir | ecto | or, tr | uste | e, or key employee | · · · · · · | |
|---|---|--------------------------------|--------------|---------|----------|------------------------------|----------|--------------------|---|---|
| (A) | (B) (C) | | | | | | | (D) | (E) | (F) |
| Name and Title | Average | | | Posi | | | | Reportable | Reportable | Estimated |
| | hours | <u> </u> | | all | that | app | ly) | compensation | compensation | amount of |
| | per week | ector | | ŀ | | | | from the | from related organizations | other compensation |
| | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | or dir | , es | , | | ated | | organization | (W-2/1099-MISC) | from the |
| | | ustee | trust | | 8 | bens | | (W-2/1099-MISC) | , | organization |
| | | Jual tr | tonal | _ | glo | st con | | | | and related |
| | | Individual trustee or director | Institu | Officer | Key er | Highest compensated employee | Forme | | | organizations |
| R. DALE MCCLURE, M.D. | | | | | | | | _ | _ | |
| PRESIDENT | 2.00 | X | <u> </u> | X | | <u> </u> | | 0. | 0. | 32,872. |
| WILLIAM E. GIBBONS, M.D. | | | | | | | | | _ | |
| PRESIDENT ELECT | 2.00 | X | <u> </u> | X | <u> </u> | ļ | <u> </u> | 0. | 0. | 14,581. |
| ROGERIO A. LOBO, M.D. | | | | | | | ŀ | | | F |
| VICE-PRESIDENT | 2.00 | X | <u> </u> | X | | | <u> </u> | 0. | 0. | 5,526. |
| G. DAVID ADAMSON, M.D. | 2 22 | ,, | | ٠,, | | | | | | 00 014 |
| IMMEDIATE PAST PRESIDENT | 2.00 | X | ├— | X | | - | | 0. | 0. | 28,814. |
| STEVEN J. ORY | 2 00 | v | | x | | | | 0. | 0. | 0 020 |
| PAST PRESIDENT | 2.00 | <u> </u> | | | - | ┼— | | 0. | 0. | 8,930. |
| CATHERINE RACOWSKY, PH.D SECRETARY | 2.00 | v | | x | | | | 0. | 0. | 3,335. |
| STUART S. HOWARDS, M.D. | 2.00 | ^ | | | - | | - | 0. | 0. | 3,333. |
| TREASURER | 2.00 | Y | | x | | | | 0. | 0. | 7,177. |
| ROBERT W. REBAR, M.D. | 2.00 | 1 | ╁ | | | | | | - · · · · · · · · · · · · · · · · · · · | ,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| EXECUTIVE DIRECTOR | 60.00 | $ _{\mathbf{x}}$ | | x | | x | | 316,300. | 0. | 59,221. |
| OWEN K. DAVIS, M.D. | | | | | | | | 0207000 | | |
| DIRECTOR | 2.00 | $ _{\mathbf{X}}$ | | | | | ŀ | 0. | 0. | 6,069. |
| ELIZABETH E. PUSCHECK, M | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 191. |
| RICHARD J. PAULSON, M.D. | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0, | 0. | 2,263. |
| WILLIAM D. SCHLAFF, M.D. | • | | | | 1 | | | | | |
| DIRECTOR | 2.00 | X | L | | | <u> </u> | <u> </u> | 0. | 0. | 3,098. |
| NANNETTE F. SANTORO, M.D. | | | | | | | | | | |
| DIRECTOR, SREI ALTERNATE | 2.00 | X | <u> </u> | | <u> </u> | | ļ. | 0. | 0. | 10,019. |
| REBECCA Z. SOKOL, M.D. | | | | | | | | | | |
| DIRECTOR | 2.00 | X | _ | L_ | | | | 0. | 0. | 5,703. |
| KEITH B. ISAACSON, M.D. | | | | | | | | | _ | |
| SRS REPRESENTATIVE | 2.00 | X | ⊢ | _ | L | ↓_ | _ | 0. | 0. | 7,418. |
| ANTHONY LUCIANO, M.D. | | | | | | | | | | 0.50 |
| SRS ALTERNATIVE REPRESEN | 2.00 | X | - | _ | | ╂_ | - | 0. | 0. | 968. |
| ELIZABETH S. GINSBURG, M | 2 22 | | | | | | | | _ | 2 256 |
| SART REPRESENTATIVE | 2.00 | X | <u> </u> | | L | 1 | | 0. | 0. | 2,856. Form 990 (2008) |

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| Part VII Section A. Officers, Directors, Tru | | | | | | | | | <u> </u> | <u> </u> | 550 | | <u>.90 -</u> |
|--|------------------------|--------------------------------|----------------------|-------------|--------------------|------------------------------|--------------|---------------------------------|------------------|----------|----------------|-------------------|----------------|
| | 1 | n <u>đ</u> l | High | <u>iest</u> | Compensated Employ | ees (continued) | | | | | | | |
| (A) | (B) | | | - | C) | | | (D) | (E) | | | (F) | |
| Name and title | Average | | | Pos | | | | Reportable | Reportable | - 1 | | timate | |
| | hours | (check all that a | | | app | ly) | compensation | compensation | - 1 | | nount | of | |
| | per | 真 | | | | | | from | from related | - 1 | | other | |
| | week | gie | | | | E . | | the | organization | | | pensa | |
| | | 92 | Ste | | | 128 | | organization (W-2/1099-MISC) | (W-2/1099-MIS | SC) | | om the anızati | - |
| | | Individual trustee or director | nstitutional trustee | Officer | oyee | [출 | | (44-2/1099-141130) | 1 | | • | d relati | |
| | | 물 | 윮 | 53 | E E | lo se lo | 늘 | | | | | anızati | |
| | | 夏 | IS | 를 | χ. | Highest compensated employee | Ē | | | | | | |
| MARK D. HORNSTEIN, M.D. | | | - | - | ┢ | - | \vdash | - | | | | | |
| · · · · · · · · · · · · · · · · · · · | 2 00 | ٠, | | | | | | | | _ | | 2 C | 40 |
| SART ALTERNATIVE REPRESE | 2.00 | Λ | - | | | ├ | ┢ | 0. | | 0. | | <u>3,6</u> | 40. |
| ROBERT E. BRANNIGAN, M.D | | l | | | | ļ | | | | ا ہ | | | |
| SMRU REPRESENTATIVE | 2.00 | ļΧ. | <u> </u> | | _ | ├ | - | 0. | | 0. | | 4,2 | <u>46.</u> |
| NANCY L. BRACKETT, PH.D. | | | | | | 1 | | | | l | | | |
| SMRU ALTERNATIVE REPRESE | 2.00 | X | | | | <u> </u> | | 0. | | 0. | | <u> </u> | <u>54.</u> |
| BRUCE R. CARR, M.D. | | | | | | | | | | | | | |
| SREI REPRESENTATIVE | 2.00 | X | | <u> </u> | | <u> </u> | | 0. | | 0. | | <u>5,3</u> | 68. |
| NANCY FRANKEL | | | | | | | | | | , | | | |
| CHIEF OPERATING OFFICER | 60.00 | X | | X | | X | | 194,450. | | 0. | 4 | 4,6 | 10. |
| ANDREW R. LABARBERA, PH. | | | | | | | | | , . | | | | |
| SCIENTFIC DIRECTOR | 60.00 | X | | X | | X | | 124,665. | | 0. | 3 | 1,2 | 00. |
| SEAN TIPTON | | | | | | | | • | | | | | |
| DIRECTOR OF PUBLIC AFFAI | 60.00 | | | X | | X | | 130,050. | | 0. | 3 | 3,7 | 29. |
| | | | | | | | | | | | | | |
| | i | | | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | ŀ | | | | | | | |
| 1b Total | L | | | | | | _ | 765,465. | | 0. | 32 | 2,3 | 88 |
| 2 Total number of individuals (including those | un 1a) who ro | | od n | 2010 | tha | n ¢1 | 00.1 | | | <u> </u> | <u> </u> | <u> </u> | 00. |
| compensation from the organization | eni iaj wilo le | CEIV | eu II | 1010 | uıa | пфі | 00, | ooo iii leportable | | | | | 4 |
| Compensation from the organization | | | | | | | | | | | | Yes | No. |
| O Del the consented by the conference of the con | -11 | | 1 | | | | | | | F | | - | |
| 3 Did the organization list any former officer, | | | , ке | y en | npio | yee, | or r | nignest compensated er | npioyee on | | _ | | 77 |
| line 1a? If "Yes," complete Schedule J for s | | | | | | | | | | - | 3 | | X |
| 4 For any individual listed on line 1a, is the su | • | | - | | | | | | the organization | : | | | |
| and related organizations greater than \$15 | 0,000? <i>If</i> "Yes, | " co | mpl | ete S | Sche | edule | e J f | for such individual | | ļ | 4 | X | |
| 5 Did any person listed on line 1a receive or a | accrue compe | nsat | ıon f | rom | any | unr/ | relat | ed organization for serv | ices rendered to | | | | |
| the organization? If "Yes," complete Sched | ule J for such | pers | on | | | | | . <u>-</u> | | | 5 | | _ X |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| Complete this table for your five highest co | mpensated in | depe | ende | ent c | onti | racto | ors t | that received more than | \$100,000 of con | npensa | ation f | rom | |
| the organization | | | | | | | | | | | | | |
| (A) (D) | | | | | | | | | | | " | •1 | |

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|-----------------------------|---------------------|
| SMG FOOD & BEVERAGE, LLC | | |
| 747 HOWARD STREET, SAN FRANCISCO, CA 94103 | FOOD & BEVERAGE | 498,942. |
| BLUE CROSS BLUE SHIELD | | |
| PO BOX 360037, BIRMINGHAM, AL 35236-0037 | INSURANCE | 173,005. |
| THE BERNDT GROUP | | |
| 3618 FALLS ROAD, BALTIMORE, MD 21211 | WEB DESIGN | 151,036. |
| PRINT USA, LLC, 112 WALTER DAVIS DRIVE, | | |
| BIRMINGHAM, AL 35209 | PRINTING | 136,155. |
| ALAN DECHERNEY | | |
| 11210 S. GLEN ROAD, POTOMAC, MD 20854 | EDITOR | 132,720. |
| 2 Total number of independent contractors (including those in 1) who received mo | | |
| from the organization 8 | | <u> </u> |

| | | (2008) MEDIC | | | <u> ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- </u> | | <u> </u> | <u> 338 Page 9</u> |
|--|-------|---|---------------------------------------|---------------|---|---|---|---|
| Pa | rt VI | II Statement of Rever | านอ | | | | | |
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| 참 | 1 8 | a Federated campaigns | | | | | | |
| 흔들 | ŀ | Membership dues | 1b | | | | | |
| g E | | Fundraising events | 1c | | | | | |
| 풀밁 | | d Related organizations | 1d | | | | | |
| S,E | | 0 | · · | ····· | | | | |
| S S | | | · — | | | | | |
| 돌힐 | 1 | similar amounts not included abo | · I I | 014610. | | | | |
| Contributions, gifts, grants and other similar amounts | | | | 014010. | | | | |
| 혽흶 | - | Noncash contributions included in lines | 1a-1f \$ | | 4,014,610. | | | |
| - | | n Total. Add lines 1a-1f | · · · · · · · · · · · · · · · · · · · | II. | | | | · · · · · · · · · · · · · · · · · · · |
| , | _ | CALE OF EDUCAME | ONTAT MA | Business Code | | 1 202 022 | | |
| Program Service Revenue | 2 6 | | | | 1,282,832. | | | |
| | | PUBLICATION OF | | | 1,049,705. | | | |
| 일 | (| | <u> </u> | 541800 | 1,008,334. | | | |
| Ba Ba | • | ANNUAL MEETING | | 541800 | 886,855. | 886,855. | | |
| ğΊ | • | POST GRADUATE C | | 541800 | 713,590. | 713,590. | 105 500 | |
| - | f | | enue | 541800 | 105,500. | | 105,500. | |
| \rightarrow | | Total. Add lines 2a-2f | ··· | . • | <u>5,046,816.</u> | | -·· ·· · | |
| | 3 | Investment income (including | dividends, inter- | est, and | | | | 0.4.4 |
| | | other similar amounts) | | > | 941,683. | | | 941,683. |
| | 4 | Income from investment of tax | x-exempt bond p | oroceeds > | | | | |
| | 5 | Royalties . | | <u>, ▶</u> . | 11,722. | 11,722. | | |
| | | | (i) Real | (II) Personal | | | | |
| | 6 a | a Gross Rents | | | | | | |
| ŀ | ŀ | Less. rental expenses | | | | | | |
| | • | Rental income or (loss) | | <u> </u> | | | | |
| | • | d Net rental income or (loss) | | | | | | |
| | 7 8 | Gross amount from sales of | (ı) Securities | (II) Other | | | | |
| | | assets other than inventory | 5,248. | | | | | |
| | ŀ | Less. cost or other basis | | | | | | |
| | | and sales expenses | 41,248. | 76. | | | | |
| | | Gain or (loss) | <36,000. | > <76. | > | | | |
| | | d Net gain or (loss) | | | | > <36,076. | > | |
| ا به | 8 8 | Gross income from fundraising | g events (not | | | | | |
| Ē. | | including \$ | of | | | | | |
| ě | | contributions reported on line | 1c) See | | | | | |
| Other Revenue | | Part IV, line 18 | а | | | | | |
| 흫 | ŀ | Less: direct expenses | b | | | | | |
| 0 | | Net income or (loss) from fund | draising events | • | | | | |
| | | Gross income from gaming ac | - | | | | | |
| | | Part IV, line 19 | а | | | | | |
| | ŀ | Less direct expenses | b | | 1 | | | |
| - 1 | | Net income or (loss) from gam | ning activities | | 1 | | | |
| ł | | a Gross sales of inventory, less | • | | | | | |
| | | and allowances | а | | | | | |
| | ŀ | Less: cost of goods sold | _ b | | 1 | | | |
| | | Net income or (loss) from sale | _ | | İ | | | |
| Ì | | Miscellaneous Revenu | | Business Code | | | | |
| ŀ | 11 8 | OMILED DELIGIBLE | · <u> </u> | 541800 | 191,846. | 191,846. | | |
| | | ENDOWMENTS | | 541800 | 9,500. | | | |
| | | MAILING LIST RO | PAT.TTEQ | 541800 | 7,985. | 7,985. | · · · · · · · · · · · · · · · · · · · | |
| | , | d All other revenue | <u> </u> | 3 = 1000 | ,,,,,,,,,, | ,,,,,,,,, | | |
| | , | Total. Add lines 11a-11d | ٠ | | 209,331. | | | ······································ |
| ŀ | 12 | | 4 5 8d 7d 0- 0- 4 | 00 and 115 | | 5,126,293. | 105 500 | 941 683 |
| 83200 02-02 | | Total Revenue. Add lines 1h, 2g, 3, | 4, 5, 80, 7d, 8c, 9c, 1 | uc, and the | 1 10100000 | <u>,, 140, 433</u> 0 | 100,000 | Form 990 (2008) |
| UZ-02 | -09 | | | | | | | (2000) |

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).

| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (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 | 185,398. | 185,398. | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the U.S. See Part IV, line 22 | 13,000. | 13,000. | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the U.S. | | | | |
| | See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 974,900. | 511,121. | 463,779. | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 1,420,025. | 695,078. | 724,947. | |
| 8 | Pension plan contributions (include section 401(k) | | | | |
| | and section 403(b) employer contributions) | 223,590. | 109,444. | 114,146. | |
| 9 | Other employee benefits | 158,543. | 77,604. | 80,939. | |
| 10 | Payroll taxes | 132,731. | 64,970. | 67,761. | |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal | 86,618. | 42,398. | 44,220. | |
| С | Accounting | 23,450. | 11,478. | 11,972. | |
| d | Lobbying | 47,732. | 23,365. | 24,367. | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | | _ | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 792,510. | 387,920. | 404,590. | |
| 17 | Travel | 551,578. | 269,988. | 281,590. | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 1,157,388. | 566,522. | 590,866. | |
| 20 | Interest | | - | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 121,149. | 59,300. | 61,849. | |
| 23 | Insurance | 120,626. | 59,044. | 61,582. | |
| 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.) | , | | | |
| а | PRINTING & PUBLICATIONS | 763,466. | 373,704. | 389,762. | |
| b | EQUIPMENT RENTAL | 564,299. | 276,215. | 288,084. | |
| C | OTHER ADMINISTRATIVE CO | 413,856. | 202,574. | 211,282. | |
| d | HONORARIA | 213,065. | 213,065. | 0. | |
| е | TELEPHONE | 77,130. | 37,754. | 39,376. | |
| f | All other expenses | 174,600. | 85,464. | 89,136. | |
| 25 | Total functional expenses. Add lines 1 through 24f | 8,215,654. | 4,265,406. | 3,950,248. | 0 |
| 26 | Joint Costs. Check here ▶ ☐ 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 | | | | |

Form 990 (2008) MEDICINE 04-2284338 Page 11
Part X Balance Sheet

| Fai | 17 | Dalarice Sileet | | | | | | | | | |
|---------------------------|---|--|-------------------------------|---------------------------------------|--------------------------|-------------|--|-----------------|--------------|----------|--|
| | - | | | | (A) Beginning of year | | Е | (B) nd of y | /ear | | |
| | 1 | Cash - non-interest-bearing | | | 828,612 | . 1 | | 466 | 5,4 | 04. | |
| | 2 | Savings and temporary cash investments | į | | 912,911 | | 2 | | | 18. | |
| | 3 | Pledges and grants receivable, net | | | | 3 | | | | | |
| | 4 | Accounts receivable, net | · | | 9,177 | . 4 | | 100 |),2 | 16. | |
| | 5 | Receivables from current and former officers, di | rectors | , trustees, key | | | | | | | |
| | | employees, or other related parties. Complete P | | · · · · · · · · · · · · · · · · · · · | | 5 | | | | | |
| | 6 | Receivables from other disqualified persons (as | | | | | | | | | |
| | | 4958(f)(1)) and persons described in section 495 | | | | | | | | | |
| | | Part II of Schedule L | | 6 | | | | | | | |
| ts | 7 | Notes and loans receivable, net | | | | 7 | | | | | |
| Assets | 8 | Inventories for sale or use | | | 19,518 | . 8 | | 19 | 9,2 | 60. | |
| Ä | 9 | Prepaid expenses and deferred charges | | | 200,847 | | | | | 61. | |
| | 10a | Land, buildings, and equipment: cost basis | 10a | 2,946,337. | | | | | | | |
| | b | Less accumulated depreciation. Complete | | - | | | | | | | |
| | | Part VI of Schedule D | 10b | 1,099,201. | 1,611,536 | 10c | 1 | ,847 | 7 , 1 | 36. | |
| | 11 | Investments - publicly traded securities | | 11 | | | | | | | |
| | 12 | Investments - other securities. See Part IV, line | 11 | | | 12 | | | | | |
| | 13 | Investments - program-related See Part IV, line | 11 | | 24,593,122 | . 13 | 21 | , 516 | 5,4 | 23. | |
| | 14 | Intangible assets . | | | | 14 | | | | | |
| | 15 | Other assets See Part IV, line 11 | | | 100,716 | | | 213 | 3,0 | 91. | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | al line 3 | 34) | 28,276,439 | . 16 | 26 | <u>,782</u> | 2,7 | 09. | |
| | 17 | Accounts payable and accrued expenses | 413,209 | . 17 | <u> </u> | 503 | 3,3 | 70. | | | |
| | 18 | Grants payable | | 18 | | | | | | | |
| | 19 | Deferred revenue | 1,747,731 | . 19 | 2 | <u>,615</u> | 5,5 | <u>65.</u> | | | |
| | 20 | Tax-exempt bond liabilities | <u> </u> | 20 | | | | | | | |
| es | 21 | Escrow account liability. Complete Part IV of Sc | D | · · · · · · · · · · · · · · · · · · · | 21 | | | | | | |
| Liabilities | 22 | Payables to current and former officers, director | s, trust | tees, key employees, | | | | | | | |
| iab. | | highest compensated employees, and disqualifi | ed per | sons. Complete Part II | | 1 . | | | | | |
| _ | | of Schedule L | ·-··· | 22 | | | | | | | |
| | 23 | Secured mortgages and notes payable to unrela | ated thi | rd parties | | 23 | <u> </u> | | | | |
| | 24 | Unsecured notes and loans payable | | | | 24 | | | | | |
| | 25 | Other liabilities. Complete Part X of Schedule D | | | 75 | | | 116 | 5,6 | 09. | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 2,161,015 | . 26 | 3 | , 235 | 5,5 | 44. | |
| | | Organizations that follow SFAS 117, check he | ere 🕨 | X and complete | | | | | | | |
| Ses | | lines 27 through 29, and lines 33 and 34. | | | 05 000 006 | | | | | | |
| an | 27 | Unrestricted net assets | | | 25,288,236 | | | | | 81. | |
| Ва | 28 | Temporarily restricted net assets | | | 827,188 | | <u> </u> | , 24 | <u>L , 8</u> | 84. | |
| pur | 29 | Permanently restricted net assets | | | | 29 | | | | | |
| Net Assets or Fund Balanc | | Organizations that do not follow SFAS 117, c | heck h | ere 🕨 📖 and | | | | | | | |
| S | 00 | complete lines 30 through 34. | | | | | | | | | |
| set | 30 | Capital stock or trust principal, or current funds | | | | 30 | | | | | |
| As | 31 | Paid-in or capital surplus, or land, building, or ed | | | | 31 | | | | | |
| Nei | 32 | Retained earnings, endowment, accumulated in | come, | or other funds | 26 115 424 | 32 | 22 | | 7 1 | <u> </u> | |
| | 33 | Total net assets or fund balances | | | 26,115,424 28,276,439 | | 25 | , 34 , , 782 |) 7 | 65. | |
| Par | <u>34</u> t XI | Total liabilities and net assets/fund balances Financial Statements and Reporting | | . <u>-</u> | 40,410,435 | . 34 | | , 102 | <u>, ,</u> | 03. | |
| <u> </u> | | Tillaholai Otatements and Neporting | | | | | | | Yes | No | |
| 4 | Δοσο | ounting method used to prepare the Form 990: | | ash X Accrual | Other | | Г | -+ | | | |
| 1 2a | | ounting method used to prepare the Form 990: the organization's financial statements compiled | | | | | | 2a | | х | |
| za b | | the organization's financial statements complete the organization's financial statements audited the complete the organization of the complete the complete the complete the complete the organization of the complete the | accountant: | | F | 2b | Х | ^ | | | |
| | | es" to lines 2a or 2b, does the organization have a | asibility for oversight of th | e audit | | | 42 | | | | |
| · | | w, or compilation of its financial statements and | | • | • | .s addit | · i | 2c | X | | |
| 3a | | | ale Au | T | | | <u> </u> | | | | |
| | 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? | | | | | | | | | X | |
| b | | Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? | | | | | | | | | |

Form **990** (2008)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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.

THE AMERICAN SOCIETY FOR REPRODUCTIVE

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

| | | MEDICIN | | | | | | | 0.4 | 1-22843 | 38 |
|--------|---|--|--|--|--|--|---|--|--|--|----------------------|
| Part I | Reason | for Public Char | ity Status (All organiz | zations mu | st complet | te this par | t.) (see ins | tructions) | | | |
| 1 | A church, co A school des A hospital or A medical res | nvention of churchescribed in section 17 a cooperative hospi search organization | because it is: (Please ches, or association of chur (O(b)(1)(A)(ii). (Attach So tal service organization operated in conjunction | ches desc chedule E.) described | ribed in se | ection 170 | (A)(iii). (At | tach Sche | | he hospital's r | name, |
| 5 | section 170 A federal, sta An organizat section 170(A community An organizat activities rela income and i | non operated for the (b)(1)(A)(iv). (Complete, or local government that normally received trust described in second that normally received to its exempt full unrelated business to | ent or governmental uniterves a substantial part ste Part II) section 170(b)(1)(A)(vi), serves (1) more than 33 anctions - subject to certa axable income (less sections) | t described of its supp (Complete 1/3% of its ain exception | d in section ort from a Part II.) support froms, and (2 | n 170(b)(governme rom contri 2) no more | butions, retained | or from the nembersh | e general p ip fees, an s support | oublic describe d gross receil from gross inv | pts from vestment |
| 10 | An organizate An organizate more publicly describes the a Type By checking foundation me of the organization of the organization of the organization of the government of the | ion organized and op y supported organiza e type of supporting this box, I certify that nanagers and other the exation received a writh granization, check that t 17, 2006, has the common of the sign ember of a person controlled entity of a | perated exclusively to te perated exclusively for the pera | ne benefit of on 509(a)(1) ete lines 1 controlled y supporte the IRS that my gift or colone or tog | of, to perform the perform to perform the performance of the performan | orm the fur on 509(a)(2 a 11h stionally inf r indirectly ations desi pe I, Type a from any persons c | nctions of, 2). See sec degrated by by one of cribed in s II, or Type of the folk | or to carr ction 509(r more dis section 500 e III | y out the (a)(3). Che d qualified p (9(a)(1) or s | purposes of o ck the box the Type III - Oth persons other section 509(a) | at er than |
| . , | e of supported anization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the o in col. (i) Is governing o Yes | sted in your | organizat | | (vi) Is organizati (i) organiz U.S Yes | on in col. red in the | (vii) Amou suppor | |
| | | | | | | | | | | | |
| otal | | } | 1 | 1 | l | I | l | | | | |

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

| Schedule A (Form 990 or 990-EZ) 2008 Part II Support Schedule for (Complete only if you checked | | | Sections 170 | (b)(1)(A)(iv) ar | nd 170(b)(1)(A)(\ | Page 2 |
|---|------------------|------------------------|------------------------|----------------------|--|-------------|
| Section A. Public Support | THE DOX OF INTES | 5, 7, 0r 8 01 Part 1.) | | | | |
| | (=) 2004 | (h) 2005 | (*) 2006 | (-D 2007 | (a) 2008 | (O Teacl |
| Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 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 | | | | | | |
| 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) | | | | | | |
| `` <u> </u> | | | | | | |
| 6 Public Support. Subtract line 5 from line 4 Section B. Total Support | | <u> </u> | | <u> </u> | | |
| | 4 3 0004 | # > 0005 | 4 3 0000 | (1) 0007 | 1 () 2000 | 40 T. I. I |
| Calendar year (or fiscal year beginning in) 7 Amounts from line 4 | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 8 Gross income from interest, | | | | | | |
| dividends, payments received on | | | | | | |
| securities loans, rents, royalties | | | | | | |
| and income from similar sources | . <u> </u> | | | | | |
| 9 Net income from unrelated business | | | | | | |
| activities, whether or not the | | | ! | | | |
| business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain | | | | | j | |
| or loss from the sale of capital | | | | | | |
| assets (Explain in Part IV.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | 1 | | <u></u> | | |
| 12 Gross receipts from related activities, | • | · · | | | 12 | |
| 13 First five years. If the Form 990 is for | J | s tirst, secona, tnir | a, tourin, or tirin ta | ax year as a section | on 501(c)(3) | . □ |
| organization, check this box and stop Section C. Computation of Publi | | rcentage | | | | |
| 14 Public support percentage for 2008 (li | | | nolumn (fl) | | 14 | |
| 15 Public support percentage from 2007 | . ,, | • | Column (1)) | - | 14 | <u>%</u> |
| 16a 33 1/3% support test - 2008. If the o | | | n line 13, and line | 14 is 33 1/3% or i | · · · · · · · · · · · · · · · · · · | · |
| stop here. The organization qualifies a | · | | | 15 55 17570 01 | | ▶ □ |
| b 33 1/3% support test - 2007. If the o | | - | | line 15 is 33 1/39 | % or more, check th | iis box |
| and stop here. The organization quali | - | | | | | ▶□ |
| 17a 10% -facts-and-circumstances test | · · | | | e 13, 16a, or 16b. | and line 14 is 10% | or more, |
| and if the organization meets the "fact | _ | | | | | |

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets 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

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 MEDICINE Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

04-2284338 Page 3

Section A. Public Support (e) 2008 Calendar year (or fiscal year beginning in) (d) 2007 (a) 2004 (b) 2005 (c) 2006 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 3637201. 4812428 4303005 4014610.21032101. include any "unusual grants.") 4264857. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3589045. 2386596. 3960386. 5046816.19255933. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 7226246 7199024 9061426.40288034. 8537947. 8263391 6 Total. Add lines 1 - 5 7a Amounts included on lines 1, 2, and 1448901 1439222 3 received from disqualified persons 2148762 1556348 1744124. 8337357. **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 1439222 2148762. 1556348 1448901 1744124 8337357. c Add lines 7a and 7b 31950677. 8 Public support (Subtract line 7c from line 6) Section B. Total Support (a) 2004 Calendar year (or fiscal year beginning in) (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 8537947 7226246 7199024 8263391 9061426.40288034. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 600,090. 792,992. 928,152 987,196. 905,607. 4214037. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 600,090. 792,992 928,152 987,196 905,607. 4214037. 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 55,091. 84,220. 110,246. 81,830. 209,331 540,718. assets (Explain in Part IV) 45042789. 13 Total support (Add lines 9, 10c, 11, and 12) 14 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 70.93 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f) 15 % 69.52 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage 9.36 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 9.09 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ightharpoons Xmore than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax), then

| • \$ | organiz | 01(c)(4), (5), or (6) organizat | ions: Complete Part III | , , , , , , , , , , , , , , , , , , , | | |
|------|-------------|---|------------------------------------|---------------------------------------|--|--|
| | of orga | | RICAN SOCIETY FO | OR REPRODUCT | TVE Emp | loyer identification number |
| | J | MEDICIN | | on all acoust | | 04-2284338 |
| Par | t I-A | | / all organizations exen | npt under section | 501(c) and section 5 | |
| | | See the instructions for S | • | • | `` | |
| 1 F | Provide a | description of the organiz | ation's direct and indirect politi | cal campaign activities | ın Part IV. | |
| | | expenditures | | | | 3 |
| | /oluntee | • | • | | • | |
| | | , | • • | | | |
| Par | t I-B | To be completed by | y all organizations exen | npt under section | 501(c)(3). | |
| | | See the instructions for S | | • | | |
| 1 E | nter the | amount of any excise tax | incurred by the organization un | der section 4955 | ▶\$ | S |
| 2 E | Enter the | amount of any excise tax | incurred by organization manag | gers under section 495 | 5 ▶\$ | <u> </u> |
| 3 l | f the org | anization incurred a sectio | n 4955 tax, did it file Form 4720 | O for this year? | | Yes No |
| 4a \ | Was a co | rrection made? | | | | Yes No |
| | | describe in Part IV | | | | |
| Par | t I-C | To be completed by | y all organizations exen | npt under section | 501(c), except section | on 501(c)(3). |
| | | See the instructions for S | chedule C for details | | | |
| | | • • | I by the filing organization for s | • | | § |
| 2 E | Enter the | amount of the filing organ | ization's funds contributed to c | other organizations for s | | |
| | • | unction activities | | | | S |
| | | • | unction expenditures Add line | s 1 and 2 and enter her | | |
| | | 20-POL, line 17b | | | ▶ \$ | S No. |
| | | ling organization file Form | • | | • | L res L 140 |
| | | | nployer identification number (E | • | - | · • |
| | | | if the amount was paid from the | | • | |
| • | | and directly delivered to a nal space is needed, provi | separate political organization, | , such as a separate se | gregated fund of a political | action committee (PAC). |
| | 1 additio | | <u> </u> | () = () | 400 | () A |
| | | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's | (e) Amount of political contributions received and |
| | | | | | funds If none, enter -0- | promptly and directly |
| | | | | | · | delivered to a separate |
| | | | | | | political organization. If none, enter -0- |
| | | | | | | · |
| | | | | | | |
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| Schedule C (Form 990 or 990-EZ) 2008 | | | AN SOCIETI. | FOR REPRODU | | 284338 Page 2 |
|--|-----------------|---------------------------|---|-----------------------|--|-----------------------------|
| Part II-A To be completed by | | | xempt under sec | tion 501(c)(3) tha | t filed Form 5768 | 3 |
| (election under sec | tion 501 | I (h)). See th | ne instructions for Sch | edule C for details. | | |
| A Check ► if the filing organiza | | | | | | |
| B Check if the filing organiza | tion check | ed box A an | d "limited control" pro | visions apply. | | |
| | | bying Exper leans amou | nditures nts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to infli | uence pub | lic opinion (g | grassroots lobbying) | | | |
| b Total lobbying expenditures to infli | uence a le | gislative bod | ly (direct lobbying) . | | 159,460. | |
| c Total lobbying expenditures (add I | ines 1a an | d 1b) | | | 159,460. | |
| d Other exempt purpose expenditure | es | | | | 8,698,920. | <u></u> |
| e Total exempt purpose expenditure | s (add line | es 1c and 1d |) | | 8,858,380. | |
| f Lobbying nontaxable amount. Ent- | er the amo | unt from the | following table in both | n columns. | 592,919. | |
| If the amount on line 1e, column (a) o | or (b) is: | The lobi | bying nontaxable amo | ount is: | | |
| Not over \$500,000 | | 20% of 1 | the amount on line 1e. | | | , |
| Over \$500,000 but not over \$1,00 | 0,000 | \$100,00 | O plus 15% of the exce | ess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,5 | 00,000 | \$175,00 | O plus 10% of the exce | ess over \$1,000,000. | | |
| Over \$1,500,000 but not over \$17 | ,000,000 | \$225,00 | O plus 5% of the exces | ss over \$1,500,000. | | |
| Over \$17,000,000 | | \$1,000,0 | 000. | | | |
| | | | | | | |
| g Grassroots nontaxable amount (er | nter 25% c | of line 1f) | | • | 148,230. | |
| h Subtract line 1g from line 1a. Ente | r -0- if line (| g is more tha | an line a | | 0. | |
| i Subtract line 1f from line 1c. Enter | -0- If line f | is more than | n line c | | 0. | |
| j If there is an amount other than ze | ro on eithe | er line 1h or l | line 1i, did the organiza | tion file Form 4720 | _ | |
| reporting section 4911 tax for this | year? | ē | <u> </u> | | L | Yes No |
| , , , | | at made a se | raging Period Under : ection 501(h) election tructions for lines 2a | do not have to comp | | |
| | Lobi | bying Expen | nditures During 4-Yea | r Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) | 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |
| 2a Lobbying non-taxable amount | 48 | 0,453. | 495,893. | 514,644. | 592,919. | 2,083,909. |
| b Lobbying ceiling amount | | | | | | 2 105 25: |
| (150% of line 2a, column(e)) | | | | • • | | 3,125,864. |
| c Total lobbying expenditures | 9 | 3,977. | 117,493. | 108,785. | 159,460. | 479,715. |
| d Crossrate age touchie amount | 1 2 | 0 112 | 122 072 | 129 661 | 1/9 220 | 520,977. |
| d Grassroots non-taxable amount | 14 | 0,113. | 123,973. | 128,661. | 148,230. | 540,311. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | | 781,466. |
| | | | -: | | | |

Schedule C (Form 990 or 990-EZ) 2008

f Grassroots lobbying expenditures

. .

Schedule C (Form 990 or 990-EZ) 2008 MEDICINE 04-2284338 Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

| | | (а |) | (t |) |
|---|---|------------|--|----------------|------|
| | | Yes | No | Amo | ount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or | | | | |
| | local legislation, including any attempt to influence public opinion on a legislative matter | | | | |
| | or referendum, through the use of: | | | | |
| а | Volunteers? | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| С | Media advertisements? | | | | |
| d | Mailings to members, legislators, or the public? | | | | |
| е | Publications, or published or broadcast statements? | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? | | | | |
| i | Other activities? If "Yes," describe in Part IV | | | | |
| j | Total lines 1c through 1i | | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| | If "Yes," enter the amount of any tax incurred under section 4912 | - |] | | |
| | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | 1 | 504()(5) | | • |
| Par | t III-A To be completed by all organizations exempt under section 501(c)(4), | section : | 501(C)(5) | , or sect | ion |
| | 501(c)(6). See the instructions for Schedule C for details. | | | ,, | |
| | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | 1 | | |
| | Did the organization make only in house lebbying expanditures of \$2,000 or loss? | | | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | 2 | | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | oo etion l | 3 | 0000 | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B To be completed by all organizations exempt under section 501(c)(4), | | 3 501(c)(5) | | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR in | | 3 501(c)(5) | | |
| 3 Par | Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. | | 3 501(c)(5) -A, ques | | |
| 3 Par | Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members | f Part III | 3 501(c)(5) | | |
| 3 Par | Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenditures) | f Part III | 3 501(c)(5) -A, ques | | |
| 3 Par 1 2 | Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). | f Part III | 3 501(c)(5) -A, ques | | |
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| Par 1 2 a b c | Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c | | |
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| Par 1 2 a b c | Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c | | |
| Par 1 2 a b c | To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures from the prior year? | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | | |
| 3 Par 1 2 a b c 3 4 | Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedase the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyperiodic expenditure next year? | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | | |
| 3 Par 1 2 a b c 3 4 | To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | | |
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| 3 Par 1 2 a b c 3 4 5 Par | till-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceededs the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Supplemental Information Determine the prior year? Taxable political expenditures (line 2c total minus 3 and 4) Supplemental Information | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | tion 3 is | |
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| Par 1 2 a b c 3 4 5 Par Comp | till-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceededs the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Supplemental Information Determine the prior year? Taxable political expenditures (line 2c total minus 3 and 4) Supplemental Information | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | tion 3 is | |
| Par 1 2 a b c 3 4 5 Par Comp | till-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceededs the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Supplemental Information Determine the prior year? Taxable political expenditures (line 2c total minus 3 and 4) Supplemental Information | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | tion 3 is | |
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| Par 1 2 a b c 3 4 5 Par Comp | till-B To be completed by all organizations exempt under section 501(c)(4), 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceededs the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Supplemental Information Determine the prior year? Taxable political expenditures (line 2c total minus 3 and 4) Supplemental Information | f Part III | 3 501(c)(5) -A, ques 1 2a 2b 2c 3 | tion 3 is | |
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Schedule D

(Form 990)

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

Name of the organization

THE AMERICAN SOCIETY FOR REPRODUCTIVE

Employer identification number

| | MEDICINE | | 04-2284338 |
|----|--|---|---|
| Pa | rt I Organizations Maintaining Donor Advised F | unds or Other Similar Funds | or Accounts. Complete if the |
| | organization answered "Yes" to Form 990, Part IV, line 6. | | |
| | | (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 | es that the assets hold in denor advise | d funda |
| 3 | - | <u> </u> | |
| _ | are the organization's property, subject to the organization's excl | - | . L Yes L No |
| 6 | Did the organization inform all grantees, donors, and donor advise | • • • | |
| D- | for charitable purposes and not for the benefit of the donor or do | | |
| Pa | | | rt IV, line 7 |
| 1 | Purpose(s) of conservation easements held by the organization (c | | |
| | Preservation of land for public use (e.g., recreation or pleas | ure) Preservation of an histo | orically important land area |
| | Protection of natural habitat | Preservation of certified | d historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a-2d if the organization held a qualified conserva | tion contribution in the form of a conse | ervation easement on the last day |
| | of the tax year | | |
| | | | Held at the End of the Year |
| а | Total number of conservation easements | | 2a |
| b | Total acreage restricted by conservation easements | • | 2b |
| c | Number of conservation easements on a certified historic structu | re included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after | • | 2d |
| 3 | Number of conservation easements modified, transferred, release | | |
| Ū | year > | or to mind by the | organization daring the taxable |
| 4 | Number of states where property subject to conservation easeme | ent is located | |
| 5 | Does the organization have a written policy regarding the periodic | | 4 |
| • | enforcement of the conservation easements it holds? | memening, moperation, measureme, and | Yes No |
| 6 | Staff or volunteer hours devoted to monitoring, inspecting, and el | nforcing easements during the year | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enfor | | |
| 8 | Does each conservation easement reported on line 2(d) above sa | |)(4)(B)(i) |
| Ū | and section 170(h)(4)(B)(ii)? | alory and rodemonional or coolien troda | Yes No |
| 9 | In Part XIV, describe how the organization reports conservation e | assements in its revenue and expense s | |
| • | include, if applicable, the text of the footnote to the organization's | • | |
| | conservation easements | s in ancial statements that describes t | ie organization s accounting for |
| Pa | rt III Organizations Maintaining Collections of Ar | t. Historical Treasures, or Otl | ner Similar Assets |
| | Complete if the organization answered "Yes" to Form 990, | - | |
| | Complete it the organization allowers to the form occ. | | |
| 10 | If the organization elected, as permitted under SFAS 116, not to i | roport in its revenue statement and hal | anno shoot works of art, bistoriaal |
| 10 | treasures, or other similar assets held for public exhibition, educa | | |
| | · | • | ic service, provide, in Part Arv, the text of |
| | the footnote to its financial statements that describes these items | | |
| b | If the organization elected, as permitted under SFAS 116, to repo | | • |
| | or other similar assets held for public exhibition, education, or res | earch in furtherance of public service, | provide the following amounts relating to |
| | these items. | | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | \$ |
| | (ii) Assets included in Form 990, Part X | | > \$ |
| 2 | If the organization received or held works of art, historical treasure | es, or other similar assets for financial (| |
| | the following amounts required to be reported under SFAS 116 re | elating to these items. | |
| а | Revenues included in Form 990, Part VIII, line 1 | | > \$ |
| þ | Assets included in Form 990, Part X | _ | > \$ |
| | | · | |

THE AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

| Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) | | dule D (Form 990) 2008 MEDICINE | | | | | | | -2284338 Page 2 |
|--|--------|--|-----------------------|------------|---------------|-----------------|-----------|-------------------|--------------------------|
| that apply a Public exhibition d Loan or exchange programs b Scholarly research c Preservation for future generations 4 Provide a description of the organization is collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be sed for argin than to be maintained as a part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1c Beginning balance Additions during the year 1d 1d 1d 1d 1d 1d 1d 1 | Pai | | | | | | | | |
| a Public exhibition d Loan or exchange programs b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collections of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XV and complete the following table: 1 Ending balance 2 Beginning balance 3 Duff the organization include an amount on Form 990, Part X, line 21? 2 If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete organization answered "Yes" to Form 990, Part IV, line 10. 1 Beginning of year balance 2 Provide the estimated percentage of the year end balance held as: 3 Board designated or quase-endowment | 3 | Using the organization's accession and other | records, check any | y of the f | ollowing tha | at are a signif | ficant us | e of its collecti | on items (check all |
| b Scholarly research e Other Preservation for future generations Proved a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to grase funds rather than to be maintained as part of the organization's collection? Yes No Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table: Complete Part IV | | that apply). | | | | | | | |
| c Preservation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 Durling the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV] Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If I'Yes, "explain the arrangement in Part XIV and complete the following table: C Baginning balance C Baginning balance C Baginning balance C Baginning balance D Bortifoliutions during the year D Settifoliutions during the year or better than 1 to 1 t | а | Public exhibition | (| | | | | | |
| 4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5. During the year, did the organization's collection? 4. Part IV] Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 5. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part XIV and complete the following table: 6. Beginning balance 6. Beginning balance 6. Beginning balance 6. Amount 7. Beginning balance 7. Beginning balance 8. Beginning balance 9. Beginning balance 9. Beginning balance 10. If "Yes," explain the arrangement in Part XIV and complete the following table: 11. Beginning balance 12. Beginning balance 13. If "Yes," explain the arrangement in Part XIV 14. Beginning of year balance 15. If "Yes," explain the arrangement in Part XIV 16. Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 17. Grants or scholarships 18. Beginning of year balance 19. Christotuchors 10. In westment earnings or losses 10. Current year (e) Two years back (d) Three years back (e) Four years back 10. Grants or scholarships 10. Christotuchors 11. Administrative expenses 12. End of year balance 13. Administrative expenses 14. Administrative expenses 15. End of year balance 16. Christotuchors 17. Fees "to 3a(i), are the related organizations listed as required on Schedule R? 18. Describe in Part XIV the intended uses of the organization's endowment tunds 19. Perror VI Intended organizations 19. If "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 19. Describe in Part XIV the intended uses of the organization's endowment tunds 19. Describe in Part XIV the intended uses of the organization's endowment tunds 19. Describe in Part XIV the intended uses of the organization's endowment tunds 19. Describe in Pa | b | Scholarly research | • | , 🗀 | Other | | | | |
| 5 During the year, dut the organization solicit or receive donations of art, historical treasures, or other similar assets to be seld to traise funds rather than to be maintained as part of the organization's collection? Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an segret, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table: Beginning balance 1d | С | Preservation for future generations | | | | | | | |
| Description Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table: Amount | 4 | Provide a description of the organization's co | llections and expla | in how th | ey further t | he organizat | ion's ex | empt purpose i | n Part XIV. |
| Part V Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 | 5 | During the year, did the organization solicit or | receive donations | of art, hi | storical trea | sures, or oth | er sımıla | ar assets | |
| reported an amount on Form 990, Part X, line 21: 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year e Ending balance 3. Did the organization include an amount on Form 990, Part X, line 21? If Ending balance b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete of organization answered "Yes" to Form 990, Part IV, line 10. [a] Current year (b) Phore year (c) Two years back (d) Three years back (e) Four years back or Investment earnings or losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment | | to be sold to raise funds rather than to be ma | intained as part of | the orgai | nization's co | ollection? | _ • | | Yes No |
| 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes | Pai | t IV Trust, Escrow and Custodial | Arrangements | . Compl | ete if organ | zation answ | ered "Ye | es" to Form 990 | 0, Part IV, line 9, or |
| on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Fart V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. Table Beginning of year balance b Contributions c investment earnings or losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | | reported an amount on Form 990, Part | t X, line 21. | | | | | | |
| b if "Yes," explain the arrangement in Part XIV and complete the following table: Amount It Amount It It It It It It It | 1a | Is the organization an agent, trustee, custodia | an or other interme | diary for | contribution | ns or other as | sets no | t included | |
| c Beginning balance d Additions during the year e Distributions during the year f Ending balance 32 Did the organization include an amount on Form 990, Part X, line 21? | | on Form 990, Part X? | | | | | | | Yes No |
| c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? bit "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment > | b | If "Yes," explain the arrangement in Part XIV a | and complete the fo | ollowing t | table: | | | | |
| d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 1yes No b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete of organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % c Term endowment ▶ % c Term endowment ▶ % 3a Are there endowment I ▶ % 3a Are there endowment I Investment | | | | | | | | | Amount |
| e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Degrip V Endowment Funds. Complete of organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (a) Four years back (a) Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasisendowment 96 b Permanent endowment 96 c Term endowment 96 c Term endowment thinds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations | С | Beginning balance | | | | | | 1c | |
| f Ending balance 2a Dut the organization include an amount on Form 990, Part X, line 21? 2b If Yes | d | Additions during the year | | | _ | | | 1d | |
| f Ending balance 2a Dut the organization include an amount on Form 990, Part X, line 21? 2b If Yes | е | Distributions during the year | _ | _ | | | • | 1e | |
| Both Pres.* explain the arrangement in Part XIV | f | | | | | | | 1f | |
| Both Pres.* explain the arrangement in Part XIV | 2a | Did the organization include an amount on Fo | rm 990, Part X, line | 217 | - | | • | | Yes No |
| (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back | | | • | | | | | | |
| 1a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | Pai | t V Endowment Funds. Complete if | organization answ | ered "Ye | s" to Form 9 | 990, Part IV, | line 10. | | |
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| d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | b | | | | | | | | |
| d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | c | Investment earnings or losses | | | | | | | |
| e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | d | | | | | | | 3.11. | |
| and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | e | · | | | | | | | |
| f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | _ | · | | | | | | | |
| g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | f | · · · F | | | | | | | |
| 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ | a | · F | | | | | | | 1 |
| a Board designated or quasi-endowment ▶ | | - | end balance held a | as. | | | | | |
| b Permanent endowment c Term endowment % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (other) 1a Land 421,280. b Buildings 1,411,884. c Leasehold improvements d Equipment e Other 1,099,201. <1,099,201. > | _ a | | | | | | | | |
| c Term endowment ▶ | b | | | | | | | | |
| Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) basis (investment) basis (other) 1 Land 421,280. 421,280. 421,280. 421,280. 520. 421,280. 630. 640. 640. 640. 650. 660 | | | 6 | | | | | | |
| by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) basis (investment) 1 Land 421,280. 421,280. 421,280. 5 Buildings 7 Leasehold improvements 6 Equipment 7 Land 8 Equipment 9 Land 1,113,173. 1,113,173. 1,099,201. | | • | ssion of the organiz | ation tha | t are held a | ind administe | ered for | the organizatio | n |
| (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) 1a Land 421,280. 421,280. 421,280. 5 Buildings 5 Leasehold improvements 6 Equipment 7 Land 1,113,173. 6 Other 7 Land 1,099,201. <1,099,201. > | - | | | | | | | gu | [34 - 34 |
| (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value 421, 280. 421, 280. 5 Buildings 5 Leasehold improvements 6 Equipment 7 Land 8 Land 9 Land 1 L | | - | | | | | | | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value 421, 280. 421, 280. 5 Buildings 5 Leasehold improvements 6 Equipment 7 Land 7 Land 8 Leasehold improvements 9 Leasehold improvements 1 Land 1 | | • | • | | | | | | |
| 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) basis (other) (c) Depreciation (d) Book value basis (investment) basis (other) 1a Land 421,280. 421,280. 421,280. 421,280. 1,411,884. | b | • • | listed as required of | on Sched | Jule R? | | | - | |
| Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 | | , ,, | • | | | | | | 00 |
| Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value | | | | | |). Part X. line | 10 | | |
| basis (investment) basis (other) 1a Land 421,280. 421,280. b Buildings 1,411,884. 1,411,884. c Leasehold improvements 1,113,173. 1,113,173. e Other 1,099,201. <1,099,201. > | | | | | | | r . | Depreciation | (d) Book value |
| 1a Land 421,280. 421,280. b Buildings 1,411,884. 1,411,884. c Leasehold improvements 1,113,173. 1,113,173. e Other 1,099,201. <1,099,201. > | | bosonpriori or invocationi | 1 ' ' | | | | (0) | | (4) 500% 1440 |
| b Buildings 1,411,884. 1,411,884. c Leasehold improvements 1,113,173. 1,113,173. e Other 1,099,201. <1,099,201. > | 12 | Land | | | | | | | 421.280. |
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| d Equipment 1,113,173. 1,113,173. e Other 1,099,201. <1,099,201. > | | • | | ~~- | | - | | | <u> </u> |
| e Other 1,099,201. <1,099,201.> | | • | 1 113 | 173 | | | | • | 1 113 173 |
| | | • • | | | | •• • • • • | 1 | 099,201 | |
| | | | rm 990. Part X. coli | umn (B) | line 10(c)) | | | <u> </u> | |

Schedule D (Form 990) 2008 04-2284338 Page 3 MEDICINE Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives and other financial products Closely-held equity interests Other Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation. (a) Description of investment type (b) Book value Cost or end-of-year market value TIAA-CREF INVESTMENTS 21,516,423 END-OF-YEAR MARKET VALUE 21,516,423. Total. (Coi (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (b) Book value (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount Federal income taxes 11,500 RETIREMENT CONTRIBUTIONS PAYABLE OTHER LIABILITIES 105,034 DEFERRED COMPENSATION 116,609. Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) ightharpoonup

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

| Sche | dule D (Form 990) 2008 MEDICINE | | | | | 04- | <u> 2284338</u> | Page 4 |
|-------------|---|-----------|-----------------|-------------|---|---------|------------------|------------------|
| Pai | t XI Reconciliation of Change in Net Assets from Form 990 to | Finar | ncial State | emen | | | | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | | | 1 | | | 10,188 | ,086. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | | 2 | | | 8,215 | ,654. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | • | 3_ | | | 1,972 | ,432. |
| 4 | Net unrealized gains (losses) on investments | | | 4 | | | <4,540 | ,691. |
| 5 | Donated services and use of facilities . | | | _5 | | | | |
| 6 | Investment expenses | | | 6 | | | | |
| 7 | Prior period adjustments | | | 7 | | | | |
| 8 | Other (Describe in Part XIV) | | | 8 | | | | |
| 9 | Total adjustments (net). Add lines 4-8 | | | 9 | | | < <u>4,540</u> | |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | | ' | 10 | | | <u><2,568</u> | <u>, 259 •</u> : |
| Pai | t XII Reconciliation of Revenue per Audited Financial Stateme | nts w | ith Rever | nue pe | er K | eturr | | 055 |
| 1 | Total revenue, gains, and other support per audited financial statements | | | | . | 1 | 5,594 | <u>, 255.</u> |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | 1 - | | 0 (| | | | |
| a | Net unrealized gains on investments | _2a | <4,54 | 0,63 | <u>, T • </u> | > | | |
| þ | Donated services and use of facilities | <u>2b</u> | | | - | | | |
| C | Recoveries of prior year grants | 2c | | | | | | |
| d | Other (Describe in Part XIV) | 2d | | | | | .4 540 | C01 . |
| e | Add lines 2a through 2d | | | | | 2e | <4,540 | |
| 3 | Subtract line 2e from line 1 | | | • | | 3 | 10,134 | <u>,946.</u> |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1. | 1. | 1 | | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | 3,14 | 10 | | | |
| b | Other (Describe in Part XIV) | _4b | <u> </u> | 3,14 | <u> </u> | | E 2 | ,140. |
| c | Add lines 4a and 4b Total revenue Add lines 2 and 4a. (This should equal Form 900, Part I, line 12.) | | | | | 4c 5 | 10,188 | |
| Pai | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Stateme | ents \ | With Expe | nses | per | | | ,000. |
| 1 | Total expenses and losses per audited financial statements | | , ро | | | 1 | 8,162 | 514. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | • | | | | · | 0,102 | , , , , , , , |
| a | Donated services and use of facilities | 2a | 1 | | | | | |
| b | Prior year adjustments | 2b | _ | | | | | |
| c | Losses reported on Form 990, Part IX, line 25 | 2c | | | | | | |
| d | Other (Describe in Part XIV) | 2d | | | | | | |
| е | Add lines 2a through 2d | | • | | | 2e | | 0. |
| 3 | Subtract line 2e from line 1 | • | | | | 3 | 8,162 | ,514. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | | | | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | | | | |
| b | Other (Describe in Part XIV) | 4b | 5 | 3,14 | 10. | | | |
| С | Add lines 4a and 4b | | | | | 4c | 53 | ,140. |
| _5 | Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | | | | | 5 | 8,215 | ,654. |
| Pa | t XIV Supplemental Information | | | | | | | |
| Com | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II | l, lines | 1a and 4, Pa | rt IV, Iır | nes 11 | and : | 2b, Part V, line | 4, Part |
| X, Pa | rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| PA | RT XII, LINE 4B - OTHER ADJUSTMENTS: | | | | | | | |
| ТЪП | MEGINENI EVDENCEG NEMBED ACATNOM TNOOME ON | ETN | | | | | | |
| <u>T1/1</u> | VESTMENT EXPENSES NETTED AGAINST INCOME ON | FIN | ANCIAL | | | | | |
| C TT Z | ATEMENTS: 53140. | | | | | | | |
| DIE | TIEMENIO. JOI40. | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| PAI | RT XIII, LINE 4B - OTHER ADJUSTMENTS: | | | | | | | |
| | | | | | | | | |
| <u>IN</u> | VESTMENT EXPENSES NETTED AGAINST INCOME ON | FIN | <u>IANCIA</u> L | <u> </u> | | | | |
| | | | | | | | | |
| ST | ATEMENTS: 53140. | | | | | | | |
| | | | | | | Sched | dule D (Form 9 | 990) 2008 |

Schedule F (Form 990)

Statement of Activities Outside the United States

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE AMERICAN SOCIETY FOR REPRODUCTIVE

Employer identification number

MEDICINE 04-2284338 General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the X Yes grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or (by type) (i.e., fundraising, is a program service, expenditures in the region agents in program services, grants to describe specific type in region region recipients located in the region) of service(s) in region SERVICE PROVIDED FOR DEVELOPMENT OF FERTIQOL **EUROPE** PROGRAM SERVICE WEBSITE & SURVEY 17,979, **Totals**

17,979.

MEDICINE

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed Schedule F (Form 990) 2008

Page.2

04-2284338

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--|--|---------------------------|---|-----------------------------|---------------------------------|-----------------------------------|--|---|
| | | | SERVICE PROVIDED FOR DEVELOPMENT OF | | | | | |
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| 2 Enter total number of organizations section 501(c)(3) equivalency letter | f organizations that ar | re recognized as charitie | Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter | which the grante | e or counsel has pro | ovided a | | |
| 3 Enter total number of other organizations or entities | f other organizations | or entities | | | | • | | i |

Schedule F (Form 990) 2008

Page 3

04-2284338

MEDICINE

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Schedule F (Form 990) 2008

Use Schedule F-1 (Form 990) if additional space is needed

| of ', | | | | | } | |
|---|---|------|------|------|---|--|
| (h) Method of valuation (book, FMV, appraisal, other) | | | | | | |
| (h) | | | | | | |
| ion of istance | | : | | | | |
| (g) Description of non-cash assistance | | | | | | |
| | | | | | | |
| (f) Amount of non-cash assistance | | | | - | | |
| (f) Ar | - | | | | | |
| ant | | | | | | |
| (e) Manner of cash disbursement | | | | | | |
| (e) M cash dis | | | | | | |
| | | | | | | |
| (d) Amount of cash grant | | | | | | |
| of (d) A | | | | | | |
| (c) Number of recipients | | | | | | |
| | | | | | | |
| (b) Region | | | | | | |
| (b) R | | | | | | |
| Φ. | | | | | | |
| (a) Type of grant or assistance (b) Region | | | | | | |
| rant or a | | | | | | |
| ype of g | | | | | | |
| (a) T | | | | | | |

Schedule F (Form 990) 2008

| SCHEDULE I | | | | | : | | | OMB No 1545-0047 |
|--|------------------------------------|-----------------------------|----------------------------------|---|-----------------------------------|--|---|---|
| (Form 990) | | | Grants and Govern | rants and Other Assistance to Organizations, Governments, and Individuals in the U.S. | to Organizations to Us. | . | | 2008 |
| Department of the Treasury | | ▼ Compl | ▶ Complete if the organizatio | in answered "Yes, | " on Form 990, Pa | ganization answered "Yes," on Form 990, Part IV, lines 21 or 22. | | Open to Public |
| 4 | - 1 | - 1 | | ► Attach to Form 990 | n 990. | | | Inspection |
| Name of the organization T | THE AMERICAN MEDICINE | CAN SOCIETY | FOR | REPRODUCTIVE | | | | Employer identification number 04-2284338 |
| Part I General Information on Grants and Assistance | tion on Grants a | nd Assistance | | | | : | | |
| 1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection | naintain records t | o substantiate the | amount of the grants | or assistance, the | grantees' eligibility | for the grants or ass | stance, and the select | |
| criteria used to award the grants or assistance? | ne grants or assis | tance? | | | | | | X Yes |
| 힗 | organization's pro | cedures for monit | oring the use of grant | funds in the United | States | ļ | | |
| Part II Grants and Other | r Assistance to (| Sovernments and | Organizations in the | e United States. C | omplete if the orga | inization answered "Y | 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 | IV, line 21, for any |
| recipient that rece | eived more than § | 5,000 Check this | box if no one recipien | it received more th | an \$5,000. Use Pa | rt IV and Schedule I-1 | 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 | al space is needed |
| 1 (a) Name and address of organization or government | of organization nt | (b) 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 |
| | | | | | | | | ADVANCEMENT OF THE ART, |
| BOARD OF REGENTS/ UNIVERSITY OF | ERSITY OF | | | | | | | SCIENCE, & PRACTICE OF |
| WISCONSIS SYSTEM - 1 S | S PARK ST. | | | | | | | REPRODUCTIVE MEDICINE |
| 5TH FLOOR - MADISON, W. | WI 53715 | 39-1805963 | | 25,000. | 0. | | | ADVANCEMENT OF THE ART, |
| BRIGHAM & WOMEN'S HOSPITAL | ITAL | | | | | | | ADVANCEMENT OF THE ART, |
| P.O. BOX 3149 | | | | | | | | SCIENCE, & PRACTICE OF |
| BOSTON MA 02241 | | | | 25,000, | 0. | | | REPRODUCTIVE MEDICINE |
| | | - | | | | | | |
| CRC, | | | | | | | | ADVANCEMENT OF THE ART, |
| CENTER DRIVE, MSC 1109 | - BETHESDA, | | | טטט טצ | c | | | SCIENCE, & PRACTICE OF REPRODUCTIVE |
| | | | | | | | | |
| WASHINGTON UNIVERSITY | | | | | | | | ADVANCEMENT OF THE ART, |
| 700 ROSEDALE AVE | | | | | | | | SCIENCE, & PRACTICE OF |
| ST LOUIS MO 63112 | | 43-0653611 | | 25,000. | 0 | | | REPRODUCTIVE MEDICINE |
| REGENTS OF THE UNIVERSITY OF | ITY OF | | | | | | | ADVANCEMENT OF THE ART, |
| CALIFORNIA - BOX 0897 | - SAN | | | | | | | SCIENCE, & PRACTICE OF |
| FRANCISCO CA 94143 | | 94-6036493 | 501(C)(3) | 30,000 | 0 | | | REPRODUCTIVE MEDICINE |
| | | | | | | | | |
| MARINE BIOLOGY LAB | • | | | | | | | ADVANCEMENT OF THE ART, |
| | | | | | | | | SCIENCE, & PRACTICE OF |
| ă | | 04-2104690 | 501(C)(3) | 10,000 | 0 | | | REPRODUCTIVE MEDICINE |
| 2 Enter total number of section 501(c)(3) and government organizations | ection 501(c)(3) ar | nd government orç | ganizations | | | | | m A |
| ۳1 | her organizations | | | | | | | 4. |
| LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 SEE PART IV FOR COLUMN (H) DESCRIPTI | Paperwork Reduction SEE PART IV | tion Act Notice, IV FOR CO. | colonial (H) DE | ons for Form 990. DESCRIPTIONS | ത | | | Schedule I (Form 990) 2008 |
| 832101 12-18-08 | | | | | | | | |

Page 2

04-2284338

MEDICINE

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Schedule I (Form 990) 2008

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|--------------------------|--------------------------|---------------------------------------|--|--|
| HANT | 133 | 13,000 | o | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part IV Supplemental Information. Complete this part to provide the | | n required in Part I, | line 2, and any other | information required in Part I, line 2, and any other additional information | |
| PART II, LINE 1, COLUMN (H): | | | | | |
| NAME OF ORGANIZATION OR GOVERNMENT: | | | | | |
| OF REGENTS/ UNIVERSITY | OF WISCONSIS | SYSTEM | | | |
| (H) PURPOSE OF GRANT OR ASSISTANCE: | : ADVANCEMENT | 0 된 | THE ART, SC | SCIENCE, & | |
| CTICE OF REPRODUCTIVE | | | | | |
| SNT OF THE ART, SCIENCE, & | PRACTICE | OF | REPRODUCTIVE MEDICINE | ICINE | |
| | | | | | |

Schedule I-1 (Form 990) 2008 Open to Public ADVANCEMENT OF THE ART, OMB No 1545-0047 2008 SCIENCE, & PRACTICE OF REPRODUCTIVE MEDICINE (h) Purpose of grant **Employer identification number** or assistance 04 - 2284338(g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II) ▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990) (e) Amount of non-cash assistance 832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 6,000, (d) Amount of cash grant THE AMERICAN SOCIETY FOR REPRODUCTIVE (c) IRC Code section if applicable 05-0300482 501(C)(3) Enter total number of Section 501(c)(3) and government organizations (p) EIN Enter total number of other organizations MEDICINE (a) Name and address of organization or government GORDON RESEARCH CONFERENCE WEST KINGSTON, RI 02892 Name of the organization 512 LIBERTY LANE Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that

2008

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

answered "Yes" to Form 990, Part IV, line 23.

THE AMERICAN SOCIETY FOR REPRODUCTIVE

THE AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

Employer identification number 04-2284338

| | | | Yes | No |
|----|--|----|----------|----|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, | | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| b | If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision | | | |
| | of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, | | | |
| | trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's | | | |
| | CEO/Executive Director. Check all that apply | | | |
| | Compensation committee Written employment contract | | | |
| | Independent compensation consultant | | | |
| | Form 990 of other organizations Approval by the board or compensation committee | | | |
| | | | | |
| | | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a | | | |
| а | Receive a severance payment or change of control payment? | 4a | | X |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | Х |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | <u> </u> | X |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | ŀ | |
| а | The organization? | 5a | | X |
| b | Any related organization? | 5b | | X |
| | If "Yes," to line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of | | | |
| а | The organization? | 6a | | X |
| b | Any related organization? | 6b | ļ | X |
| | If "Yes" to line 6a or 6b, describe in Part III. | 1 | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments | | | |
| | not described in lines 5 and 6? If "Yes," describe in Part III | 7 | ļ | X |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | 1 |
| | initial contract exception described in Page, section 53 4958.4(a)(3)2 If "Ves." describe in Part III | lα | Į. | X |

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

Schedule J (Form 990) 2008

04 - 2284338

THE AMERICAN SOCIETY FOR REPRODUCTIVE

MEDICINE

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

| | (B) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | SC compensation | 0 | (Q) | (E) | (F) |
|--------------------------|--------------------------|--|-----------------------------|--------------------------|------------------------|---------------------------------|--|
| (A) Name | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | Deferred compensation | Nontaxable benefits | l otal of columns (B)(i)-(D) | Compensation reported in prior Form 990 or Form 990-EZ |
| 9 | (1) 316,300. | 0 | 0 | 50,000. | 9,221. | 375,521. | 0. |
| ROBERT W. REBAR, M.D. | | | 0. | | 0 | 1 1 | 0 |
| | 194,45 | | 0 | 39,168. | 5,442. | 239,060. | 0 |
| NANCY FRANKEL | | | 0 | - 1 | | - 1 | 0 |
| | (1) 124,665. | 0 | 0 | 28,700. | 2,500. | 155,865. | 0 |
| ANDREW R. LABARBERA, PH. | | 0 | | 0 | 0 | 0. | 0 |
| | (1) 130,050. | .0 | 0 | 24,508. | 9,221. | 163,779. | 0 |
| SEAN TIPTON | 0 | .0 | 0 | 0 | 0 | 0. | 0 |
| | (i) | | | | | | |
|) | | | | | | | |
|) | (0) | | | | | | |
| 0 | (ii) | | | | | | |
| 1) | (E) | | | | | | |
| 1) | (ii) | | | | | | |
| 3 | 8 | | | | | | |
| i) | (ii) | | | | | | |
| <u> </u> | (1) | | | | | | |
| | (ii) | | | | | | |
| | (9) | | | | | | |
| 0 | (ii) | | | | | | |
| | 3 | | | | | | |
| ij, | (ii) | | | | | | |
| <u>)</u> | (i) | | | | | | |
| | (ii) | | | | | | |
| <u>.</u> | (3) | | | | | | |
| 1) | (ii) | | | | | | |
| | (1) | | | | | | |
| 0 | (ii) | | | | | | |
| | (9) | | | | | | |
|) | (ii) | | | | | | |
| <u></u> | (1) | | | | | | |
| ij | (ii) | | | | | | |

Schedule J (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 Open to Public Inspection

Name of the organization

THE AMERICAN SOCIETY FOR REPRODUCTIVE **MEDICINE**

Employer identification number 04-2284338

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 Open to Public Inspection

Name of the organization

THE AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

Employer identification number 04-2284338

| MEDICINE 04-2204330 |
|---|
| FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS ARE APPROVED BY THE BOARD |
| OF DIRECTORS. IN THE ABSENCE OF THE BOARD (MEETS TWO TIMES A YEAR), THE |
| EXECUTIVE COMMITTEE WILL MAKE DECISIONS ON BEHALF OF THE BOARD. |
| |
| FORM 990, PART VI, SECTION A, LINE 10: A COPY OF THE FORM 990 WILL BE |
| REVIEWED BY THE 5 MEMBERS OF THE PRESIDENTIAL CHAIN AS WELL AS THE |
| TREASURER OF THE ORGANIZATION. |
| |
| FORM 990, PART VI, SECTION B, LINE 12C: BY DECEMBER 31ST OF EACH YEAR ALL |
| MEMBERS OF THE BOARD OF DIRECTORS WILL BE SENT A FORM ON WHICH THEY MUST |
| DISCLOSE ANY RELATIONSHIPS THAT MIGHT BE PERCEIVED AS POTENTIAL CONFLICTS |
| OF INTEREST. THESE DISCLOSURE STATEMENTS WILL BE FILED IN THE HOME OFFICE |
| AND MADE AVAILABLE FOR REVIEW UPON REQUEST. ANNUALLY THE EXECUTIVE |
| COMMITTEE WILL REVIEW THESE STATEMENTS. |
| |
| FORM 990, PART VI, SECTION B, LINE 15: THE PERFORMANCE REVIEW COMMITTEE |
| EVALUATES AND APPROVES THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTHER |
| TOP MANAGEMENT EMPLOYEES. THEY REVIEW COMPARABLE COMPENSATION OF SIMILAR |
| POSITIONS IN OTHER ORGANIZATIONS AND MAINTAIN RECORDS OR THESE MEETINGS AND |
| DECISIONS. |
| |
| FORM 990, PART VI, SECTION C, LINE 19: THE DOCUMENTS ARE AVAILABLE ON |
| WEBSITES AND BY REQUEST. |
| |
| FORM 990, PART XI, LINE 2C |
| |

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 Open to Public Inspection

THE AMERICAN SOCIETY FOR REPRODUCTIVE Name of the organization Employer identification number 04-2284338 MEDICINE AUDIT HAS NOT CHANGED FROM THE PREVIOUS YEAR.

Schedule R (Form 990) 2008 **Employer identification number** Open to Public Inspection OMB No 1545-0047 Direct controlling Direct controlling 04-2284338 entity Ē End-of-year assets status (if section 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 charity 501(c)(3)) Θ Total income Exempt Code section 9 501(C)(3) 501(C)(3) 501(C)(3) Related Organizations and Unrelated Partnerships Legal domicile (state or Legal domicile (state or COMMUNICATION AMONG HEALTH DISTRICT OF COLUMBIA foreign country) foreign country) <u>ග</u> ▶ See separate instructions. LABAMA ALABAMA LABAMA THE AMERICAN SOCIETY FOR REPRODUCTIVE LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. REPRODUCTIVE ENDOCRINOLOGY IN ALL ASPECTS OF ASSISTED EXTEND KNOWLEDGE & SUPPORT SOCIETY FOR ASSISTED REPRODUCTIVE TECHNOLOGY EXTEND KNOWLEDGE & SUPPORT EXTEND KNOWLEDGE OF HUMAN EDUCATION, RESEARCH AND REPRODUCTIVE TECHNOLOG Primary activity Primary activity REPRODUCTIVE SURGERY PROVIDE A FORUM FOR RESEARCH IN HUMAN <u>@</u> Identification of Related Tax-Exempt Organizations ADOLESCENT GYNECOLOGY, 409 12TH STREET, SW MONTGOMERY HIGHWAY, BIRMINGHAM, AL 35216 ENDOCRINOLOGISTS, INC. - 63-0941692, 1209 NORTH AMERICAN SOCIETY FOR PEDIATRIC AND Identification of Disregarded Entities - 63-0941694, 1209 MONTGOMERY HIGHWAY SOCIETY OF REPRODUCTIVE SURGEONS, INC. MEDICINE 63-0941873, 1209 MONTGOMERY HIGHWAY Name, address, and EIN Name, address, and EIN of related organization of disregarded entity SOCIETY FOR REPRODUCTIVE BIRMINGHAM, AL 35216 WASHINGTON DC 20024 BIRMINGHAM AL 35216 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part II Part

THE AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

Page 2

04-2284338

Schedule R (Form 990) 2008

Part III Identification of Related Organizations Taxable as a Partnership

| 3 | General or managing partner? | | | | | | + | | | | £ | Percentage ownership | ı | | | | | | | | 901 2008 | 200 |
|-------------|---|---|--|--|--|------|---|--|---|---|----------|--|----------|--|------|---|----------|--|---|---|----------------------------|-----------------|
| ε | Cod amou 20 of t K-1 (Fc | | | | | | | | | | (5) | Share of Pe end-of-year or assets | <u> </u> | | | | | | _ | | Schedule R (Form 990) 2008 | · |
| £ | Disproportion- ate allocations? | _ | | | | | | | | | | | | | | | <u> </u> | | | _ | Sch | ; |
| <u>(</u> 9 | Share of end-of-year assets | | | | | | | | | | (E) | Share of total income | | | | | | | | | | |
| | | | | | | | | | _ | | (E) | Type of entity (C corp. S corp, or trust) | | | | | | | | | | |
| Œ | Share of total income | | | | | | | | | | | | | | | | | | | | _ | |
| | | | | | | | | | | | <u>@</u> | Direct controlling entity | | | | • | | | | | | |
| (E) | Predominant income (related, investment, unrelated) | | | | | | | | | | (0) | Legal domicile (state or foreign country) | | | | | | | | | | |
| <u>(</u> 0 | Direct | | | | | | | | | Trust | (B) | Primary activity | | | | | | | | | | |
| <u>ပ</u> | Legal domicile (state or foreign country) | | | | | | | | | poration or | | Prır | | | | | | | | | | |
| (B) | ctivity | | | | | | | | | Identification of Related Organizations Taxable as a Corporation or Trust | | Z c | | | | | | | | | | |
| (X) | Name, address, and EIN of related organization | | | | | | | | | Part IV Identification of Related Org | (A) | Name, address, and EIN of related organization | | | | | | | | | 000180 10.00 08 | 832162 12-23-08 |

Page 3 04-2284338

Part V Transactions With Related Organizations

| | | - | | ١. |
|---|--------------------|----------------------------|---------------|-----|
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV. | | | Yes | ام |
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | 1 | ; | Ι. |
| a Receipt of (i) interest (ii) annurties (iii) royalties (iv) rent from a controlled entity | • | e - | 4 | ٦ |
| b Gift, grant, or capital contribution to other organization(s) | | ₽ | × | ا |
| c Gift, grant, or capital contribution from other organization(s) | | 2 | × | |
| | | 7 | × | ١. |
| | | , | | ١. |
| e Loans or Ioan guarantees by other organization(s) | | <u></u> | ∢ | |
| | | | + | - |
| f Sale of assets to other organization(s) | | 11 | × | |
| g Purchase of assets from other organization(s) | | 19 | × | ١ |
| | • | ÷ | × | ١. |
| | • | ï | * | Ι. |
| I Lease of facilities, equipment, of other assets to other organization(s) | • | = | 4 | |
| | | | | 1. |
| j Lease of facilities, equipment, or other assets from other organization(s) | | ; - | × | ا |
| k Performance of services or membership or fundraising solicitations for other organization(s) | | + | × | |
| Performance of services or membership or fundraising solicitations by other organization(s) | | = | × | ١ |
| m Sharing of facilities, equipment, mailing lists, or other assets | | Ę | × | ١., |
| | | ţ | > | ١. |
| n Snaring of paid employees | | 5 | <u>د</u> ا | .1 |
| | | | + | -1 |
| o Reimbursement paid to other organization for expenses | | 9 | × | |
| p Reimbursement paid by other organization for expenses | | đ | × | |
| | · : | | _ | 1 |
| o Other transfer of cash or property to other organization(s) | | Ę | × | 1. |
| | : . | | : > | Ι. |
| | : | = | 4 | |
| 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 | saction thresholds | | | |
| (A) | (B) | () | 7 | |
| Name of other organization(s) | type (a-r) | Amount involved | Dived | |
| | | | | 1 |
| (1) | | | | |
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| (9) | | | | - 1 |
| 832163 12-23-08 | Schedul | Schedule R (Form 990) 2008 | 390) 2008 | 8 |

4-2284338

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THE AMERICAN SOCIETY FOR REPRODUCTIVE

Schedule R (Form 990) 2008 MEDICINE

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 revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| | (B) | Squite Squite | 6 | (2) | (a) | 9 | 5 | |
|-------------------------------------|------------------|----------------------------------|---|---------------------------------|-----------------------|--------------------------------|------------------------|---------------|
| | ĵ) | | <u> </u> | | <u> </u> | <u>(</u>) | | _ |
| Name, address, and EIN of entity | Primary activity | Legal domicile (state or foreign | Are all partners section 501(c)(3) organizations? | Share of end-of- year assets | Dispropor- tionate | Code V-UBI amount in box 20 | General or managing | al or ging |
| | | | Yes No | | Yes No | (Form 1065) | Yes | 2 |
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Schedule R (Form 990) 2008

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Cod |
|---------|----------------|-------------------|---|----------------|---------------|--------------------------|----------------------|--------------|-----------------------------|--------------------------|---|----------------------------|------------|
| ocation | ı = 1209 | | | | | | | | | | | | |
| | SHELVING | | | | | | | | | | | | |
| 00010 | 01/01/84 | 3.560 00 | ٥ | CIHV | 05 00 | 0 00 | 3.560.00 | 05/31/09 | 3,560.00 | 0 00 | 0 00 | 3,560 00 | |
| 00017 | BOOKCASE | 3,300 00 | г | SLITT | 03 00 | 0 00 | 3,300 00 | 03/3//03 | 3,300.00 | 000 | 0 00 | 0,000 00 | |
| 00017 | 01/01/84 | 122,00 | D | CI LIV | 05 00 | 0 00 | 122.00 | 04/30/09 | 122 00 | 0 00 | 0 00 | 122 00 | М |
| 00010 | 2 CHAIRS | 122,00 | ٢ | SLITT | 05 00 | 0 00 | 122 00 | 04/30/09 | 122 00 | 0 00 | 0 00 | 122 00 | u |
| 1000010 | | 400.00 | D | CLHA | 05.00 | 0.00 | 400.00 | 0.4/20/00 | 400 00 | 000 | 0.00 | 400 00 | d |
| 00040 | 01/01/84 | 400 00 | ۲ | SLHT | 05 00 | 0 00 | 400 00 | 04/30/09 | 400 00 | 000 | 000 | 400 00 | u |
| 100019 | COMPUTER C | | ь | CLUV | 05.00 | 0.00 | E40.00 | 04/20/00 | 542 00 | 0.00 | 0 00 | 542 00 | ч |
| 00000 | 01/01/84 | 542.00 | г | SENT | 05 00 | 0.00 | 542,00 | 04/30/09 | 342 00 | 0.00 | 000 | 342 00 | u |
| 00020 | CHAIR & DES | | _ | 01.111/ | 05.00 | 0.00 | 4 000 00 | 05/04/00 | 4.000.00 | 0.00 | 0.00 | 1 020 00 | |
| | 01/01/84 | 1,030.00 | ٢ | SLHY | 05 00 | 0 00 | 1,030 00 | 05/31/09 | 1,030 00 | 0 00 | 0 00 | 1,030 00 | |
| 00021 | 2 TABLES, 2 C | | _ | ~ | | | | 05/04/00 | 4.070.00 | 2.22 | 0.00 | 4 070 00 | |
| | 01/01/84 | 1,276 00 | Ρ | SLHY | 05 00 | 0 00 | 1,276.00 | 05/31/09 | 1,276 00 | 0.00 | 0 00 | 1,276 00 | |
| 00022 | 2 LAMPS, 1 PI | | | | | | | | | | | | |
| | 01/01/84 | 610 00 | Ρ | SLHY | 05 00 | 0 00 | 610.00 | 05/31/09 | 610 00 | 0.00 | 0 00 | 610 00 | |
| 00023 | 2 PICTURES, | | | | | | | | | | | | |
| | 01/01/84 | 386 00 | Ρ | SLHY | 05 00 | 0 00 | 386 00 | 05/31/09 | 386 00 | 0 00 | 0 00 | 386 00 | |
| 000024 | TABLE DESK | | | | | | | | | | | | |
| | 01/01/84 | 677 00 | Ρ | SLHY | 0 5 00 | 0 00 | 677.00 | 05/31/09 | 677 00 | 0 00 | 0 00 | 677 00 | |
| 00025 | SHELVING | | | | | | | | | | | | |
| | 01/01/84 | 325 00 | Р | SLHY | 05 00 | 0 00 | 325 00 | 05/31/09 | 325 00 | 0 00 | 0 00 | 325 00 | |
| 00026 | LAMP | | | | | | | | | | | | |
| | 01/01/84 | 221 00 | Р | SLHY | 05 00 | 0.00 | 221.00 | 05/31/09 | 221 00 | 0.00 | 0 00 | 221 00 | |
| 00027 | CONSOLE | | | | | | | | | | | | |
| | 01/01/84 | 534 00 | Ρ | SLHY | 05 00 | 0 00 | 534 00 | 04/30/09 | 534 00 | 0 00 | 0 00 | 534 00 | ď |
| 00028 | CHEST | | | | | | | | | | | | |
| | 01/01/84 | 579 00 | Ρ | SLHY | 05 00 | 0 00 | 579 00 | 05/31/09 | 579 00 | 0 00 | 0 00 | 579 00 | |
| 00030 | 2 ARM CHAIR | S | | | | | | | | | | | |
| | 01/01/84 | 442 00 | Ρ | SLHY | 05 00 | 0.00 | 442 00 | 05/31/09 | 442 00 | 0 00 | 0 00 | 442 00 | |
| 00031 | CONF TABLE, | | | | | | | | | | | | |
| | 01/01/84 | 7,105 00 | Р | SLHY | 05 00 | 0 00 | 7.105 00 | 05/31/09 | 7,105 00 | 0 00 | 0 00 | 7,105 00 | |
| 00032 | 2 PICTURES | ., | | | | | ., | | • | | | | |
| | 01/01/84 | 241 00 | Р | SLHY | 05 00 | 0 00 | 241.00 | 05/31/09 | 241.00 | 0 00 | 0 00 | 24100 | |
| 00033 | FIXTURES | | | | ••• | | | | | | | | |
| | 01/01/84 | 1.614 00 | ρ | SLHY | 05 00 | 0 00 | 1,614.00 | 05/31/09 | 1,614 00 | 0 00 | 0 00 | 1,614 00 | |
| 00041 | 2 EXEC CHAIF | ., | • | 02.77 | 30 00 | 0.00 | 1,0 . 1,00 | 00.000 | 1,01.00 | | | 1,000 | |
| 100011 | 01/01/84 | 592.00 | р | SLHY | 05 00 | 0.00 | 592 00 | 04/30/09 | 592 00 | 0.00 | 0 00 | 592 00 | d |
| በበበፈፍ | WRITING TAB | | ٠ | 00.77 | 03 00 | 0.00 | 002.00 | 0 1100000 | 002 00 | 0.00 | • | 35233 | • |
| 00045 | 01/01/85 | 300.00 | р | SHY | 05 00 | 0.00 | 300.00 | 05/31/09 | 300 00 | 0 00 | 0 00 | 300 00 | |
| กกกหล | BOARD ROOF | | | | 00 00 | 0.00 | 000 00 | 000 1700 | 000 00 | 0 00 | • | 000 00 | |
| 00040 | 01/01/85 | 859 00 | | | 05 00 | 0.00 | 950 00 | 05/31/09 | 859 00 | 0.00 | 0.00 | 859 00 | |
| በበበላል | WOODEN BO | | ٠ | OLITT | 05 00 | 0.00 | 055 00 | 0301103 | 000 00 | 0.00 | 0.00 | 000 00 | |
| 00040 | 01/01/85 | 144.00 | P | SI HV | 05 00 | 0 00 | 144 00 | 05/31/09 | 144.00 | 0 00 | 0 00 | 144 00 | |
| กกกรว | FILE CABINE | | • | SLITT | 03 00 | 000 | 144 00 | 03/3//03 | 144.00 | 000 | 0 00 | 144 00 | |
| 00032 | | 103 00 | 0 | el UV | 05 00 | 0 00 | 102.00 | 05/31/09 | 103.00 | 0.00 | 0 00 | 103 00 | , |
| مممدم | 01/01/85 | 103 00 | г | SLITT | 05 00 | 000 | 103 00 | 03/3/1/09 | 103.00 | 0,00 | 0 00 | 103 00 | |
| vvu53 | SCREEN | 400.00 | C | CLUV | 05.00 | 0.00 | 400.00 | 04/20/00 | 400.00 | 0.00 | 0.00 | 108 00 | لد |
| 00050 | 01/01/85 | 108 00 | ۲ | SLTY | 05 00 | 0.00 | 108 00 | 04/30/09 | 108.00 | 0 00 | 0 00 | 108 00 | a |
| いいいちぢ | 2 FILE CABIN | | _ | CLLDY | 05.00 | | 070.00 | 05/04/05 | 070.00 | 0.00 | 0.00 | 070 00 | |
| | 01/01/85 | 276.00 | ۲ | SLHY | 05 00 | 0.00 | 2/6 00 | 05/31/09 | 276 00 | 0 00 | 0 00 | 276 00 | , |
| UUU57 | GLASS FOR C | | _ | - 11.5. | 45 | | | | | | * - | | |
| | 01/01/86 | 186 00 | Ρ | SLHY | 05 00 | 0.00 | 186.00 | 04/30/09 | 186 00 | 0 00 | 0 00 | 186 00 | ď |
| 00059 | BOOKCASE | | | | | | | | | | | | |
| | 01/01/86 | 177.00 | D | 입니 | 05 00 | 0 00 | 177 00 | 05/31/09 | 177 00 | 0.00 | 0 00 | 177 00 | ١ |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Location | | Value | T | Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|----------------------|--------------|---|---------|-------------|--------------------------|----------------------|--------------|-----------------------------|--------------------------|-----------------------------|----------------------------|-------------|
| | = 1209 | | | | | | | | | | _ | | |
| | | FILE CABINET | | | | | | | | | | | |
| 000001 | 01/01/86 | 989 00 | Р | SLHY | 05 00 | 0 00 | 989 00 | 05/31/09 | 989 00 | 0 00 | 0 00 | 989 00 | |
| 000064 | FILE CABINE | | • | OLITI | 00 00 | 000 | 303.00 | 03/01/00 | 303 00 | 0 00 | 0 00 | 000 00 | |
| 000001 | 01/01/86 | 182.00 | p | SLHA | 05 00 | 0 00 | 182.00 | 05/31/09 | 182 00 | 0 00 | 0 00 | 182 00 | |
| 000065 | 2 BOOKCAS | | ٠ | OLITI | 05 00 | 000 | 102 00 | 03/01/03 | 102 00 | 000 | 0 00 | 102 00 | |
| 000000 | 01/01/86 | 353 00 | Р | SLHY | 05 00 | 0.00 | 353.00 | 05/31/09 | 353 00 | 0 00 | 0 00 | 353 00 | |
| 000069 | WORK TABL | | • | OLITI | 00 00 | 0.00 | 050 00 | 0000000 | 000 00 | 0 00 | 0 00 | 000 00 | |
| | 01/01/86 | 303 00 | Ρ | SLHY | 05 00 | 0 00 | 303.00 | 05/31/09 | 303 00 | 0 00 | 0 00 | 303 00 | |
| 000071 | ACRYLIC CH | | • | OLI II | 00 00 | 0.00 | 000 00 | 0001100 | 000 00 | 0.00 | 0 00 | 000 00 | |
| | 01/01/86 | 205 40 | Р | SLHY | 05 00 | 0 00 | 205 40 | 04/30/09 | 205,40 | 0 00 | 0 00 | 205 40 | ď |
| 000072 | WORK STAT | | | 02 | 02 00 | 0.00 | 200 10 | 0 1,00.00 | 200.10 | 7 00 | | 200 10 | • |
| | 01/01/86 | 275 00 | Р | SLHY | 05 00 | 0 00 | 275 00 | 04/30/09 | 275 00 | 0 00 | 0 00 | 275 00 | d |
| 000073 | TYPEWRITE | | | | | | | | 2.7 | | | | |
| | 01/01/86 | 805.00 | Р | SLHY | 05 00 | 0 00 | 805.00 | 04/30/09 | 805 00 | 0 00 | 0 00 | 805 00 | d |
| 000074 | WORK STAT | ION | | | | | | | | | | | |
| | 01/01/86 | 539 00 | Ρ | SLHY | 05 00 | 0 00 | 539.00 | 04/30/09 | 539 00 | 0 00 | 0 00 | 539 00 | ď |
| 000075 | MICROFILE | VIEWER | | | | | | | | | | | |
| | 01/01/86 | 444.00 | Ρ | SLHY | 05 00 | 0 00 | 444.00 | 04/30/09 | 444 00 | 0 00 | 0 00 | 444 00 | q |
| | 4 CHAIRS | | | | | | | | | | | | |
| | 01/01/86 | 647 00 | Ρ | SLHY | 05 00 | 0.00 | 647 00 | 05/31/09 | 647 00 | 0 00 | 0 00 | 647.00 | |
| 000083 | 2 WORK TAE | BLES | | | | | | | | | | | |
| | 05/28/87 | 255 00 | | SLHY | 05 00 | 0 00 | 255 00 | 05/31/09 | 255 00 | 0 00 | 0 00 | 255 00 | |
| 000084 | - | ER/RECORDER | | | | | | | | | | | |
| | 11/17/87 | 266 00 | Ρ | SLHY | 05 00 | 0.00 | 266 00 | 04/30/09 | 266 00 | 0 00 | 0 00 | 266 00 | ď |
| 000087 | EXECUTIVE | | _ | | | | | | | | | | |
| | 01/05/88 | 902 00 | Р | SLHY | 05 00 | 0 00 | 902 00 | 05/31/09 | 902 00 | 0.00 | 0 00 | 902 00 | |
| 880000 | CREDENZA | | _ | | | | | | | | | | |
| 000000 | 01/05/88 | 696 00 | ۲ | SLHY | 05 00 | 0 00 | 696 00 | 05/31/09 | 696 00 | 0 00 | 0 00 | 696 00 | |
| | GUEST CHA | | _ | 01.111/ | | | | 0.1/00/00 | *** | | | | |
| | 01/05/88 | 284 00 | ۲ | SLHY | 05 00 | 0.00 | 284.00 | 04/30/09 | 284 00 | 0 00 | 0 00 | 284 CO | a |
| 000091 | GUEST CHA | | В | CLUV | 05.00 | 0.00 | 004.00 | 0450000 | 00400 | 0.00 | 0.00 | 004.00 | _ |
| വസസ | 01/05/88 CONFEREN | 284 00 | г | OLT 1 | 05 00 | 0 00 | 204 00 | 04/30/09 | 284,00 | 0 00 | 0 00 | 284 00 | u |
| 000032 | 01/05/88 | 1,232.75 | 0 | CI UV | 05 00 | 0 00 | 1 222 75 | 05/31/09 | 1,232.75 | 0 00 | 0 00 | 1,232 75 | |
| บบบบอง | 2 GUEST CH | | r | SLITI | 03 00 | 000 | 1,23273 | 03/3/1/09 | 1,232,73 | 0 00 | 0 00 | 1,232 / 3 | |
| 000000 | 01/05/88 | 568 00 | Þ | SI HV | 05 00 | 0 00 | 568 00 | 04/30/09 | 568 00 | 0 00 | 0 00 | 568 00 | d |
| 000094 | OFFICE FUP | | • | OLITI | 05 00 | 0 00 | 300 00 | 04/30/03 | 300 00 | 0,00 | 0 00 | 300 00 | u |
| | 02/22/88 | 1,114.94 | ρ | SLHY | 05 00 | 0.00 | 1 114 94 | 05/31/09 | 1,114 94 | 0 00 | 0 00 | 1,114 94 | |
| 000095 | | CCESSORIES | • | OLITI | 00 00 | 0.00 | 1,117.04 | 03/01/05 | 1,114.04 | 000 | 0 00 | 1,114.54 | |
| | 07/01/88 | 691.26 | Р | SLHY | 05 00 | 0 00 | 691.26 | 05/31/09 | 691 26 | 0.00 | 0 00 | 691 26 | |
| | SHELFING,B | | | | ••• | | 35,20 | | 44.20 | | | 55.25 | |
| | 02/09/88 | 1,980 72 | Р | SLHY | 05 00 | 0.00 | 1,980,72 | 05/31/09 | 1,980 72 | 0 00 | 0 00 | 1,980.72 | |
| 000097 | CHAIR | | | | | | • | | , | | | ., | |
| | 07/01/88 | 195.00 | Р | SLHY | 05 00 | 0 00 | 195 00 | 04/30/09 | 195 00 | 0 00 | 0 00 | 195 00 | ď |
| 000099 | SECRETARIA | AL DESK | | | | | | | | | - | | |
| | 03/07/88 | 746.86 | Р | SLHY | 05 00 | 0.00 | 746.86 | 05/31/09 | 746 86 | 0 00 | 0.00 | 746.86 | |
| 000106 | WALNUT BO | | | | | | | | | | | | |
| | 03/16/88 | 118 00 | Ρ | SLHY | 05 00 | 0.00 | 118.00 | 05/31/09 | 118,00 | 0 00 | 0 00 | 118.00 | |
| 000112 | WALNUT BO | OKCASE | | | | | | | | | | | |
| | 03/23/88 | 109.00 | Ρ | SLHY | 05 00 | 0.00 | 109 00 | 05/31/09 | 109 00 | 0 00 | 0 00 | 109 00 | |
| 000113 | GLOBAL CHA | AIR GRAY | | | | | | | | | | | |
| | 03/23/88 | 116.00 | Ρ | SLHY | 05 00 | 0 00 | 116 00 | 04/30/09 | 116 00 | 0 00 | 0 00 | 116.00 | d |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Acquired Date Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|-------------------------------------|----------|--------------|--------------|---|----------------------|--------------|-----------------------------|--------------------------|-----------------------------|----------------------------|-------------|
| | | | | | | | | | | | | |
| Location | | | | | | | | | | | | |
| 000114 | BILEVEL STATION | . nc . n | OLUN. | 05.00 | 0.00 | 145.00 | 04/00/00 | 145.00 | 0.00 | 0.00 | 145.00 | |
| 000115 | 03/30/88 145 ADJUSTABLE TABLE | 120 P | SLHY | 05 00 | 0 00 | 145 26 | 04/30/09 | 145.26 | 0.00 | 0 00 | 145 26 | a |
| 000113 | | nn P | SLHY | 05 00 | 0 00 | 88 00 | 05/31/09 | 88 00 | 0.00 | 0 00 | 88 00 | |
| 000116 | FILE DRAWERS | ,,00 1 | JUIT | 03 00 | 0 00 | 00 00 | 03/3/103 | 00 00 | 000 | 000 | 00 00 | |
| 000110 | | .07 P | SLHY | 05 00 | 0 00 | 2,462 07 | 05/31/09 | 2,462.07 | 0 00 | 0 00 | 2,452 07 | |
| 000119 | VIRCRO TABLE | | 02 | 00 00 | • | 2, | | 4, 32, 31 | 000 | | _, .02 0. | |
| | 08/01/88 155 | | SLHY | 05 00 | 0 00 | 155 36 | 04/30/09 | 155 36 | 0 00 | 0 00 | 155 36 | d |
| 000120 | BOOKCASE, DESK, CHA | 4IR | | | | | | | | | | |
| | 08/01/88 789 | 66 P | SLHY | 05 00 | 0 00 | 789 66 | 05/31/09 | 789 66 | 0 00 | 0 00 | 789 66 | |
| 000121 | WALNUT BOOKCASE | | | | | | | | | | | |
| | | | SLHY | 05 00 | 0 00 | 147 66 | 05/31/09 | 147.66 | 0.00 | 0 00 | 147 66 | |
| 000124 | DESK, CRT TABLE, DRA | | | | | | | | | | | |
| | | .79 P | SLHY | 05 00 | 0 00 | 959 79 | 05/31/09 | 959.79 | 0 00 | 0 00 | 959 79 | |
| 000125 | 1 CHAIR | | | | | | | **** | | | | |
| 000400 | | 84 P | SLHY | 05 00 | 0 00 | 226 84 | 05/31/09 | 226.84 | 0 00 | 0 00 | 226 84 | |
| 000126 | BOOKCASE | n | OLLIV | 05.00 | 0.00 | 007.54 | 05/04/00 | 005.54 | 0.00 | 0.00 | 805.54 | |
| 000100 | | 51 P | SLHY | 05 00 | 0 00 | 365 51 | 05/31/09 | 365 51 | 0 00 | 0 00 | 365.51 | |
| 000139 | BOOKCASE 07/01/88 85 | 00 0 | SLHY | 05 00 | 0.00 | 05.00 | 05/31/09 | 85 00 | 0 00 | 0 00 | 95.00 | |
| 000140 | PICTURES 03 | ייטט די | SLITT | 05 00 | 0.00 | 85 00 | 05/31/08 | 65 00 | 000 | 0 00 | 85 00 | |
| 000140 | | 51 P | SLHY | 05 00 | 0 00 | 300.51 | 05/31/09 | 300.51 | 0 00 | 0 00 | 300 51 | |
| 000142 | | J. 1 | OLITI | 05 00 | 0 00 | 300 31 | 03/0/1/03 | 000,51 | 000 | 0 00 | 300 31 | |
| 000172 | | 00 P | SLHY | 05 00 | 0 00 | 130.00 | 05/31/09 | 130.00 | 0 00 | 0 00 | 130 00 | |
| 000143 | | | OL. | 00 00 | 0.00 | 100 00 | 00000 | .00.00 | 000 | 0.00 | 100 00 | |
| | | 57 P | SLHY | 05 00 | 0 00 | 140.57 | 05/31/09 | 140 57 | 0.00 | 0 00 | 140 57 | |
| 000144 | TWO DRAWER FILE CA | | | | | | | | | | | |
| | | | SLHY | 05 00 | 0 00 | 108 07 | 05/31/09 | 108 07 | 0.00 | 0 00 | 108 07 | |
| 000149 | LASER POINTER | | | | | | | | | | | |
| | 04/07/89 340 | 00 P | SLHY | 05 00 | 0.00 | 340 00 | 04/30/09 | 340.00 | 0 00 | 0 00 | 340 00 | ď |
| 000150 | COMPUTER CHAIR | | | | | | | | | | | |
| | 03/07/89 175 | .00 P | SLHY | 05 00 | 0.00 | 175 00 | 04/30/09 | 175 00 | 0 00 | 0 00 | 175 00 | ď |
| 000151 | WALNUT BOOKCASE | | | | | | | | | | | |
| | | 00 P | SLHY | 05 00 | 0.00 | 620 00 | 05/31/09 | 620 00 | 0 00 | 0 00 | 620 00 | |
| 000152 | COMPUTER CHAIR | | | | | | | | | | | |
| | . — | 00 P | SLHY | 05 00 | 0 00 | 249.00 | 04/30/09 | 249.00 | 0.00 | 0 00 | 249.00 | ď |
| 000153 | WALNUT BOOKCASE | | -1.1.07 | | | | . = /= . /== | 4.4.4. | | | | |
| 000454 | | א 00. | SLHY | 05 00 | 0 00 | 11200 | 05/31/09 | 112.00 | 0 00 | 0.00 | 112 00 | |
| 000154 | 6 FOLDING TABLES | 00 0 | OLLIV | 05.00 | 0.00 | 007.00 | 00/04/00 | 007.00 | 0.00 | 0.00 | 007.00 | |
| 000155 | | ין טט | SLHY | 05 00 | 0.00 | 337 00 | 05/31/09 | 337.00 | 0.00 | 0.00 | 337 00 | |
| 000155 | WALNUT CONF TABLE | ΛΛ Π | CLUV | 05.00 | 0.00 | 240.00 | 05/31/09 | 240.00 | 0.00 | 0.00 | 240.00 | |
| 000156 | 06/21/89 340 4 GRAY GUEST CHAIRS | | SLHY | 05 00 | 0 00 | 340 00 | 03/3/1/09 | 340.00 | 0 00 | 0 00 | 340 00 | |
| 000130 | | | SLHY | 05 00 | 0 00 | E16.00 | 05/31/09 | 516 00 | 0 00 | 0 00 | 516 00 | |
| 000158 | DESK ATTACHMENT | 00 F | SLIII | 05 00 | 000 | 51000 | 03/3/1/03 | 310 00 | 000 | 0 00 | 210.00 | |
| 000130 | | nn p | SLHY | 05 00 | 0 00 | 145.00 | 05/31/09 | 145 00 | 0.00 | 0 00 | 145 00 | |
| 000159 | | 00 1 | OLITI | 05 00 | 0 00 | 143 00 | 03/3/1/03 | 140 00 | 0,00 | 0 00 | 145 00 | |
| VOV 133 | | OO P | SLHY | 05 00 | 0.00 | 135.00 | 05/31/09 | 135 00 | 0.00 | 0 00 | 135 00 | |
| 000160 | DRAWERS/DRAWER FI | | OLITI | 00 00 | 0.00 | 100 00 | 0301103 | 133 00 | 0.00 | 0.00 | 133 00 | |
| JJV 1JV | | | SLHY | 05 00 | 0.00 | 348.00 | 05/31/09 | 348.00 | 0 00 | 0 00 | 348.00 | |
| 000161 | 3 CHAIRS | JU 1 | OC. II | 00 00 | 0.00 | 340 00 | JUIN IN J | 040.00 | 0.00 | 0.00 | 340,00 | |
| | | 00 P | SLHY | 05 00 | 0 00 | 380.00 | 04/30/09 | 380 00 | 0 00 | 0 00 | 380 00 | М |
| | | | UL. 11 | 55 00 | 0.00 | 000 00 | 34100100 | 300 00 | 0 00 | 0.00 | 000 00 | u |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Prior Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|-----------------------|-------------------|----|--------------|-------------|--------------------------|----------------------|---------------|---------------------------|--------------------------|-----------------------------|----------------------------|-------------|
| Location | n = 1209 | | | | | | | | | | | | |
| | TYPEWRITE | 8 | | | | | | | | | | | |
| | 12/01/89 | 883.66 | Р | SLHY | 05 00 | 0.00 | 883.66 | 04/30/09 | 883.66 | 0.00 | 0.00 | 883 66 | Ч |
| 000165 | MO 4202 DE | | • | Carr | 00 00 | 0.00 | 000.00 | 04/50/05 | 000.00 | 0.00 | 0,00 | 000 00 | ŭ |
| | 01/15/90 | 887 14 | Р | SLHY | 05 00 | 0 00 | 887 14 | 05/31/09 | 887 14 | 0 00 | 0 00 | 887 14 | |
| 000166 | PANELS & S | | • | OLITI | 05 00 | 0.00 | 007 14 | 03/3 1/03 | 007 14 | 0 00 | 000 | 007 14 | |
| 000100 | 01/15/90 | 667 00 | D | SLHV | 05 00 | 0 00 | 667.00 | 04/30/09 | 667 00 | 0 00 | 0 00 | 667 00 | |
| 000167 | WHEELWRI | | • | OLITI | 00 00 | 0 00 | 007 00 | 04/30/03 | 007 00 | 0 00 | 0.00 | 007 00 | u |
| 000107 | 02/06/90 | 883 66 | ь | CI UV | 05 00 | 0 00 | 000.00 | 04/30/09 | 883 66 | 0 00 | 0 00 | 883 66 | |
| 000169 | | IT & CABINET | 1 | SEIII | 03 00 | 0 00 | 003 00 | 04/30/08 | 003 00 | 000 | 0 00 | 003 00 | u |
| 000100 | 03/07/90 | 2,853 59 | Б | CLUV | 05.00 | 0.00 | 0.050.50 | 05/04/00 | 0.000.00 | 0.00 | 0.00 | 0.050.50 | |
| 000170 | | • | | SLITT | 05 00 | 0 00 | 2,853 59 | 05/31/09 | 2,853 59 | 0 00 | 0 00 | 2,853.59 | |
| 000172 | | CAB ANDRE | | CLUV | 05.00 | 0.00 | 4 000 40 | 05/04/00 | 4.000.40 | 0.00 | | 4 000 40 | |
| 000170 | 05/11/90 | 1,902 46 | ۲ | SLMY | 05 00 | 0 00 | 1,902 46 | 05/31/09 | 1,902 46 | 0 00 | 0 00 | 1,902 46 | |
| 000173 | FURNITURE | | _ | 01104 | 05.00 | | | 05104100 | 242.42 | | | 242.42 | |
| 000170 | 05/23/90 | 61846 | Ρ | SLHY | 05 00 | 0 00 | 618 45 | 05/31/09 | 618 46 | 0 00 | 0 00 | 618 46 | |
| 000178 | ALUM CASE | | _ | 01111 | 05.00 | | | | | | | | |
| 000104 | 08/15/90 | 1,239.15 | ۲ | SLHY | 05 00 | 0 00 | 1,239 15 | 05/31/09 | 1,239 15 | 0 00 | 0 00 | 1,239.15 | |
| 000180 | FURN FOR | | _ | | | | | | | | | | |
| | 11/26/90 | 778 96 | Ρ | SLHY | 05 00 | 0 00 | 778.96 | 05/31/09 | 778 96 | 0.00 | 0 00 | 778 96 | |
| 000181 | | | | | | | | | | | | | |
| | 01/25/91 | 790 73 | Ρ | SLHY | 05 00 | 0 00 | 790.73 | 04/30/09 | 790.73 | 0 00 | 0 00 | 790 73 | ď |
| 000182 | TV | | | | | | | | | | | | |
| | 02/13/91 | 495 06 | Ρ | SLHY | 05 00 | 0 00 | 495 06 | 04/30/09 | 495 06 | 0 00 | 0 00 | 495 06 | d |
| 000183 | VCR | | | | | | | | | | | | |
| | 02/13/91 | 299 97 | Ρ | SLHY | 05 00 | 0.00 | 299 97 | 04/30/09 | 299 97 | 0 00 | 0 00 | 299 97 | d |
| 000187 | CHAIRS/VIS | SSCHER | | | | | | | | | | | |
| | 02/22/91 | 3,709 69 | Ρ | SLHY | 05 00 | 0 00 | 3,709 69 | 05/31/09 | 3,709 69 | 0 00 | 0 00 | 3,709 69 | |
| 881000 | DESK & CRE | DENZA | | | | | , | | • | | | , | |
| | 03/01/91 | 6,827.67 | Ρ | SLHY | 05 00 | 0.00 | 6,827 67 | 05/31/09 | 6,827 67 | 0.00 | 0 00 | 6,827 67 | |
| 000189 | TABLE - COI | • | | | | | 0,02, 0. | •••• | 5,54. 0. | **** | | 0,02 7 0. | |
| • | 03/01/91 | 373 43 | Р | SHY | 05 00 | 0 00 | 373 43 | 04/30/09 | 373 43 | 0 00 | 0 00 | 373 43 | d |
| 000191 | | 3,310 | | 02,77 | 70 00 | 0 00 | 0,0.0 | 01100/00 | 070 40 | 0 00 | 000 | 070 10 | u |
| | 05/01/91 | 352.03 | P | SLHV | 05 00 | 0 00 | 352 03 | 04/30/09 | 352 03 | 0 00 | 0 00 | 352.03 | d |
| 000197 | | RANSCRIBER | • | OLITI | 00 00 | 000 | 302 W | 0-8/00/03 | 332 00 | 0 00 | 0 00 | 332,03 | u |
| 000137 | 01/10/92 | 538 92 | ь | CI LIV | 05 00 | 0 00 | 500.00 | 04/30/09 | 538 92 | 0.00 | 0.00 | E20.00 | _ |
| 000100 | | 330 92 | г | JLITT | 05 00 | 0 00 | 330 82 | 04/30/09 | 336 92 | 0 00 | 0 00 | 538 92 | ū |
| 000130 | LASER-E | 1 150 05 | ь. | CLIN | 05.00 | 0.00 | 4.450.05 | 0.4100/00 | 1 150 05 | 0.00 | 0.00 | 4.450.05 | |
| 000004 | 02/01/92 CCCDETABL | 1,150 25 | Р | SLHT | 05 00 | 0 00 | 1,150 25 | 04/30/09 | 1,150 25 | 0 00 | 0.00 | 1,150 25 | a |
| 000204 | SECRETARI | | _ | CLUV | 07.00 | 0.00 | 451045 | 05/04/00 | 4 5 40 45 | | | 4 5 4 0 4 5 | |
| 00000 | 01/01/93 | 1,546 15 | - | SLHY | 07 00 | 0 00 | 1,546.15 | 05/31/09 | 1,546.15 | 0.00 | 0.00 | 1,546.15 | |
| 000205 | SECRETARI | | _ | 01107 | | | . = . 4 . 4 . | | 45.0.15 | | | | |
| | 01/01/93 | 1,546 15 | Р | SLHY | 07 00 | 0 00 | 1,546 15 | 05/31/09 | 1,546.15 | 0 00 | 0 00 | 1,546 15 | |
| 000206 | SECRETARI | | _ | | | | | | | | | | |
| | 01/01/93 | 1,546.15 | Р | SLHY | 07 00 | 0 00 | 1,546 15 | 05/31/09 | 1,546 15 | 0.00 | 0 00 | 1,546 15 | |
| 000207 | SECRETARI | | | | | | | | | | | | |
| | 01/01/93 | 1,546 15 | Ρ | SLHY | 07 00 | 0 00 | 1,546 15 | 05/31/09 | 1,546 15 | 0 00 | 0 00 | 1,546 15 | |
| 000208 | SECRETARI | | | | | | | | | | | | |
| | 01/01/93 | 1,615.70 | Ρ | SLHY | 07 00 | 0 00 | 1,615 70 | 05/31/09 | 1,615 70 | 0 00 | 0 00 | 1,615 70 | |
| 000209 | EXECUTIVE | DESK | | | | | • | | | | | - | |
| | 01/01/93 | 2,077.94 | Ρ | SLHY | 07 00 | 0,00 | 2,077 94 | 05/31/09 | 2,077 94 | 0 00 | 0.00 | 2,077 94 | |
| 000210 | EXECUTIVE | | | | | | -1 | | | | | 2,2 | |
| - | 01/01/93 | 2,077 94 | Ρ | SLHY | 07 00 | 0.00 | 2,077,94 | 05/31/09 | 2,077 94 | 0 00 | 0.00 | 2,077 94 | |
| 000211 | LATERAL FIL | | • | | •• | 5.55 | -4011 U 1 | 3001100 | _1077.07 | 0.00 | 0.00 | E ₁ 017 07 | |
| | 01/01/93 | 1,110.66 | Р | SLHV | 07 00 | 0.00 | 1 110 66 | 05/31/09 | 1,110 66 | 0 00 | 0 00 | 1,110 66 | |
| | - 110 1130 | 1,110.00 | • | JEH | 0, 00 | 0.00 | 1,110 00 | JUI U I/UI | 1,11000 | 0.00 | 000 | 1,11000 | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | | cquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Prior Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|--------------------------|------------------|---|--------------|--------------|---|----------------------|---------------|-----------------------------|---|-----------------------------|-------------------------------|-------------|
| Location | - 1200 | | | | | | | | | | | | |
| | RETURN IN LOE | RV | | | | | | | | | | | |
| 000212 | 01/01/93 | 372 36 | D | SI HA | 07 00 | 0 00 | 272.26 | 05/31/09 | 372 36 | 0 00 | 0 00 | 372 36 | |
| 000215 | GUEST CHAIRS | | Г | JLITI | 07 00 | 000 | 31230 | 03/3/1/03 | 31230 | 0 00 | 000 | 372 30 | |
| 000210 | 01/01/93 | 295 32 | o | SLHY | 07 00 | 0 00 | 205 32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000216 | GUEST CHAIRS | | ' | OLITI | 0, 00 | 0 00 | 253 32 | 03/3//03 | 293 32 | 000 | 0.00 | 293 02 | |
| 0002.10 | 01/01/93 | 295 32 | Р | SLHY | 07 00 | 0.00 | 205.32 | 05/31/09 | 295.32 | 0.00 | 0.00 | 295 32 | |
| 000217 | GUEST CHAIRS | | • | OL | 0, 00 | 0.00 | 230.02 | 00/0//00 | 200.02 | 0.00 | 0.00 | 250 02 | |
| | 01/01/93 | 295.32 | Р | SLHY | 07 00 | 0 00 | 295.32 | 05/31/09 | 295 32 | 0 00 | 0.00 | 295 32 | |
| 000218 | GUEST CHAIRS | | | | | • • • | 20002 | | | • | | | |
| | 01/01/93 | 295 32 | Р | SLHY | 07 00 | 0.00 | 295.32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000219 | GUEST CHAIRS | | | | | | | | 2000 | *** | | | |
| | 01/01/93 | 295 32 | Ρ | SLHY | 07 00 | 0 00 | 295.32 | 05/31/09 | 295,32 | 0.00 | 0 00 | 295 32 | |
| 000220 | GUEST CHAIRS | | | | | | | | | | | | |
| | 01/01/93 | 295 32 | Ρ | SLHY | 07 00 | 0 00 | 295.32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000221 | GUEST CHAIRS | | | | | | | | | | | | |
| | 01/01/93 | 295.32 | Ρ | SLHY | 07 00 | 0.00 | 295 32 | 05/31/09 | 295.32 | 0 00 | 0 00 | 295 32 | |
| 000222 | GUEST CHAIRS | | | | | | | | | | | | |
| | 01/01/93 | 295 32 | Р | SLHY | 07 00 | 0 00 | 295 32 | 05/31/09 | 295,32 | 0 00 | 0 00 | 295 32 | |
| 000223 | GUEST CHAIRS | 205.00 | _ | 01.1114 | | • • • | | | | | | | |
| 000004 | 01/01/93 | 295 32 | ٢ | SLHY | 07 00 | 0 00 | 295 32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000224 | GUEST CHAIRS | 000.00 | _ | CLUV | 07.00 | 0.00 | 207.00 | 05/04/00 | 005.00 | | 0.00 | 207.00 | |
| 000005 | 01/01/93 GUEST CHAIRS | 295 32 | ۲ | SLHT | 07 00 | 0 00 | 295 32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000223 | 01/01/93 | 295.32 | D | CI LIV | 07 00 | 0 00 | 205.32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295.32 | |
| กกกววล | GUEST CHAIRS | 293.32 | г | SLITT | 07 00 | 000 | 290 32 | 02/3 1/09 | 290 32 | 0 00 | 0 00 | 293.32 | |
| 000220 | 01/01/93 | 295 32 | 0 | CI LIV | 07 00 | 0.00 | 205 20 | 05/31/09 | 295 32 | 0.00 | 0 00 | 295 32 | |
| 000227 | GUEST CHAIRS | 233 32 | ' | OLITI | 07 00 | 0.00 | 233.02 | 03/3//03 | 293 32 | 0.00 | 0 00 | 233 32 | |
| 000221 | 01/01/93 | 295 32 | Р | SLHY | 07 00 | 0 00 | 295.32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000228 | VIDEO CABNET | 200 02 | • | 02111 | 0, 00 | 000 | 20002 | 03/0/1/03 | 20002 | 0 00 | 0 00 | 20002 | |
| | 01/01/93 | 1,379 23 | Р | SLHY | 07 00 | 0 00 | 1.379 23 | 04/30/09 | 1,379 23 | 0 00 | 0 00 | 1,379 23 | d |
| 000229 | | ., | | | | | 1,0.00 | | ., | | | ., | - |
| | 01/01/93 | 1,412 40 | Р | SLHY | 07 00 | 0 00 | 1,41240 | 05/31/09 | 1,41240 | 0 00 | 0 00 | 1,412 40 | |
| 000230 | SECRETARIAL (| CHAIR | | | | | • | | | | | | |
| | 01/01/93 | 192 60 | Ρ | SLHY | 07 00 | 0 00 | 192 60 | 04/30/09 | 192.60 | 0 00 | 0 00 | 192 60 | d |
| 000231 | CONFERENCE (| CHAIRS | | | | | | | | | | | |
| | 01/01/93 | 288.90 | Ρ | SLHY | 07 00 | 0 00 | 288.90 | 05/31/09 | 288 90 | 0 00 | 0 00 | 288 90 | |
| 000232 | CONFERENCE (| | | | | | | | | | | | |
| | 01/01/93 | 288.90 | Ρ | SLHY | 07 00 | 0 00 | 288.90 | 05/31/09 | 288.90 | 0 00 | 0 00 | 288 90 | |
| | CONFERENCE (| | _ | | | | | | | | | | |
| | 01/01/93 | 288 90 | Р | SLHY | 07 00 | 0 00 | 288 90 | 05/31/09 | 288 90 | 0 00 | 0 00 | 288 90 | |
| 000234 | CONFERENCE (| | _ | 01104 | | | | | | | | | |
| 000005 | 01/01/93 | 288.90 | ۲ | SLHY | 07 00 | 0 00 | 288 90 | 05/31/09 | 288 90 | 0 00 | 0 00 | 288 90 | |
| | RECEPTION DE | | _ | CLUV | 07.00 | 0.00 | 004044 | 00(04/00 | 0.040.41 | 0.00 | 0.00 | 204044 | |
| | 01/01/93 | 2,849.41 | ٢ | SLITT | 07 00 | 0 00 | 2,849.41 | 05/31/09 | 2,849 41 | 0 00 | 0 00 | 2,849 41 | |
| | OPEN BOOK CA 01/01/93 | 5E 754.35 | P | 입니 | 07 00 | 0 00 | 754.05 | 05/31/09 | 754.35 | 0 00 | 0 00 | 754 35 | |
| | OPEN BOOK CA | | ' | JEIST | 07 00 | 000 | 704,00 | GOI GEO | 134,33 | 0.00 | 000 | 104 35 | |
| VVVLU1 | 01/01/93 | 754 35 | Р | SLHV | 07 00 | 0 00 | 75.1 25 | 05/31/09 | 754,35 | 0 00 | 0 00 | 754 35 | |
| 000238 | OPEN BOOK CA | | • | JEIII | J/ UU | 3 00 | 104.00 | 0.00 I/03 | 1 34,30 | 0 00 | 0.00 | 10 4 05 | |
| | 01/01/93 | 754.35 | Р | SLHY | 07 00 | 0 00 | 754.35 | 05/31/09 | 754.35 | 0 00 | 0 00 | 754 35 | |
| 000239 | BOOK CASE WIT | | • | 30.71 | 0, 00 | 0 00 | 7.07.00 | 340 1100 | 757,05 | 0 00 | 0 00 | 104 00 | |
| | 01/01/93 | 762.91 | Р | SLHY | 07 00 | 0 00 | 762.91 | 05/31/09 | 762 91 | 0.00 | 0 00 | 762 91 | |
| | + • • | | • | J= | J. 00 | • | ,0201 | 2001100 | 70201 | 0.00 | 0 00 | 10231 | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|-------------------|-------------------|---|--------------|-------------|--------------------------|---|---------------|-----------------------------|--------------------------|-----------------------------|----------------------------|-------------|
| Location | ı = 1209 | | | | | | | | | | | | |
| | | WITH DOORS | | | | | | | | | | | |
| 000210 | 01/01/93 | 762 91 | | SLHY | 07 00 | 0 00 | 762 91 | 05/31/09 | 762 91 | 0 00 | 0 00 | 762 91 | |
| 000241 | END TABLE | 70201 | • | OLITI | 07 00 | 0 00 | 102,31 | 03/0/1/00 | 702 31 | 000 | 0 00 | 702 31 | |
| 000211 | 01/01/93 | 390 55 | Р | SI HV | 07 00 | 0 00 | 200 55 | 05/31/09 | 390 55 | 0.00 | 0 00 | 390 55 | |
| 000242 | END TABLE | 330 33 | ' | SLIII | 07 00 | 000 | 390 33 | 00/3//09 | 390 33 | 000 | 0 00 | 390 33 | |
| 000242 | 01/01/93 | 390 55 | D | CI LIV | 07 00 | 0.00 | 200 55 | 05/31/09 | 390 55 | 0 00 | 0 00 | 390 55 | |
| 000343 | END TABLE | 390 33 | · | SLITE | 0/ 00 | 000 | 390,33 | 03/3/1/09 | 390 33 | 000 | 0 00 | 390 33 | |
| 000243 | 01/01/93 | 338 12 | ۵ | CI LIV | 07 00 | 0 00 | 220 10 | 05/04/00 | 220 10 | 0 00 | 0 00 | 338 12 | |
| 000244 | END TABLE | 330 12 | | OLITI | 07 00 | 000 | 330 12 | 05/31/09 | 338.12 | 0 00 | 0 00 | 330 12 | |
| 000244 | 01/01/93 | 286 78 | р | SI UV | 07 00 | 0 00 | 206 70 | 00/21/00 | 006.70 | 0 00 | 0 00 | 286 78 | |
| 000345 | CONFERENC | | Г | SLNT | 07 00 | 000 | 280 78 | 05/31/09 | 286 78 | 000 | 0.00 | 280 / 8 | |
| 000245 | | | _ | OLLIN | 07.00 | 0.00 | 4007.05 | 00/04/00 | 4007.05 | 2.00 | 0.00 | 4.007.05 | |
| 000046 | 01/01/93 | 1,927 05 | ۲ | SLMT | 07 00 | 0 00 | 1,927.05 | 05/31/09 | 1,927 05 | 0 00 | 0 00 | 1,927 05 | |
| 000245 | CONFERENC | | _ | CLLIV | 07.00 | 0.00 | 075.04 | 05/04/00 | 075.04 | 0.00 | 0.00 | 075.04 | |
| 000047 | 01/01/93 | 375 84 | ۲ | SLMY | 07 00 | 0 00 | 3/5.84 | 05/31/09 | 375 84 | 0 00 | 0 00 | 375 84 | |
| 000247 | CONFERENC | | _ | 01.111/ | .~ | | | 0.0 (0.1 (0.0 | | | | | |
| | 01/01/93 | 375.84 | ۲ | SLHY | 07 00 | 0 00 | 375 84 | 05/31/09 | 375 84 | 0 00 | 0 00 | 375 84 | |
| 000248 | CONFERENC | | _ | | | | | | | | | | |
| | 01/01/93 | 375 84 | Р | SLHY | 07 00 | 0.00 | 375 84 | 05/31/09 | 375 84 | 0 00 | 0 00 | 375 84 | |
| 000249 | CONFERENC | | _ | | | | | | | | | | |
| | 01/01/93 | 375 84 | Р | SLHY | 07 00 | 0.00 | 375 84 | 05/31/09 | 375 84 | 0 00 | 0 00 | 375 84 | |
| 000250 | CONFERENC | | | | | | | | | | | | |
| | 01/01/93 | 571,38 | Ρ | SLHY | 07 00 | 0 00 | 571.38 | 05/31/09 | 571 38 | 0.00 | 0 00 | 571 38 | |
| 000251 | BOOKCASE | | | | | | | | | | | | |
| | 01/01/93 | 571.38 | Ρ | SLHY | 07 00 | 0 00 | 571.38 | 05/31/09 | 571 38 | 0 00 | 0 00 | 571 38 | |
| 000252 | BOOKCASE | | | | | | | | | | | | |
| | 01/01/93 | 571 38 | Ρ | SLHY | 07 00 | 0 00 | 571 38 | 05/31/09 | 571 38 | 0 00 | 0 00 | 571 38 | |
| 000253 | BOOKCASE | | | | | | | | | | | | |
| | 01/01/93 | 294.25 | Р | SLHY | 07 00 | 0 00 | 294.25 | 05/31/09 | 294 25 | 0 00 | 0 00 | 294 25 | |
| 000254 | BOOKCASE | | | | | | | | | | | | |
| | 01/01/93 | 294 25 | Ρ | SLHY | 07 00 | 0 00 | 294 25 | 05/31/09 | 294 25 | 0 00 | 0 00 | 294 25 | |
| 000255 | CREDENZA | | | | •. •• | | 20.20 | | | | | 20.20 | |
| | 01/01/93 | 909 50 | Ρ | SLHY | 07 00 | 0.00 | 909.50 | 05/31/09 | 909 50 | 0.00 | 0 00 | 909 50 | |
| 000257 | GUEST CHAI | | | | •. •• | | *************************************** | | | | | | |
| | 02/01/93 | 295.32 | Р | SHY | 07 00 | 0.00 | 295.32 | 05/31/09 | 295 32 | 0 00 | 0 00 | 295 32 | |
| 000258 | SITE PREPAR | | • | 0- | V. V. | 3,23 | 20002 | 00.0 | 20002 | *** | | 4000 | |
| | 02/01/93 | 6,686 00 | Р | SLHY | 05 00 | 0.00 | 6 686 00 | 05/31/09 | 6,686 00 | 0.00 | 0 00 | 6,686 00 | |
| 000261 | WORK TABLE | • | • | 5 | 00 00 | 0.00 | 5,000 00 | 000000 | 0,000 00 | 0.00 | 0.00 | 0,000 00 | |
| | 03/01/93 | - 546 77 | Р | SLHV | 07 00 | 0 00 | 546 77 | 05/31/09 | 546 77 | 0 00 | 0 00 | 546 77 | |
| 000262 | TYPEWRITE | | • | 0011 | 07 00 | 0 00 | 54077 | 03/01/03 | 34011 | 0.00 | 0 00 | 34377 | |
| 000202 | 03/01/93 | 883.66 | P | GI HA | 05 00 | 0.00 | 993 66 | 04/30/09 | 883 66 | 0 00 | 0.00 | 883 66 | ч |
| ากกวรว | TYPEWRITE | | • | JEIII | 03 00 | 0.00 | 000.00 | 04100103 | 000 00 | 0 00 | 0.00 | 003 00 | u |
| 000200 | 03/01/93 | 883.66 | D | CI UV | 05 00 | 0 00 | 22 000 | 04/30/09 | 883 66 | 0 00 | 0 00 | 883,66 | a |
| 000265 | | 000,00 | 1 | JUII | 05 00 | 000 | 865 00 | 04/30/03 | 003 00 | 0.00 | 0 00 | 003,00 | U |
| 000200 | 04/01/93 | 421,20 | В | CI UV | 07 00 | 0 00 | 404.00 | 05/04/00 | 421 20 | 0.00 | 0 00 | 421 20 | |
| ากการอ | | | Г | JLNI | 07 00 | 000 | 42120 | 05/31/09 | 42120 | 0,00 | 000 | 42120 | |
| JUU200 | BRONZE PLA | | _ | CLUV | 07.00 | 0.00 | 1.000.00 | 05/04/00 | 1,000,00 | 0.00 | 0.00 | 1,000,00 | |
| იიგიიი | 05/01/93 | 1,966 82 | ۲ | SLMY | 07 00 | 0 00 | 1,966 82 | 05/31/09 | 1,966 82 | 0 00 | 0 00 | 1,966 82 | |
| JUUZ09 | LATERAL FIL | | _ | 01107 | | | , | AF (0.4 to 0 | | | | | |
| 00000 | 05/01/93 | 1,594 08 | ۲ | SLHY | 07 00 | 0 00 | 1,594 08 | 05/31/09 | 1,594 08 | 0 00 | 0.00 | 1,594.08 | |
| JUU281 | APPLE LASE | | | | | | | | | | | | |
| | 04/01/94 | 1,842 10 | Н | SLHY | 05 00 | 0 00 | 1,842 10 | 04/30/09 | 1,842 10 | 0 00 | 0 00 | 1,842 10 | d |
| | Conference F | | _ | | | | | | | | | | |
| | 09/01/94 | 2,800 00 | Ρ | SLHY | 05 00 | 0 00 | 2,800.00 | 05/31/09 | 2,800 00 | 0 00 | 0.00 | 2,800.00 | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | | cquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|-----------------------------|------------------|-----|--------------|-------------|--------------------------|----------------------|--------------|-----------------------------|--------------------------|-----------------------------|----------------------------|-------------|
| Location | n = 1209 | | | | | | | | | | | | |
| | 6408 CTA PRIN | TED | | | | | | | | | | | |
| 000231 | 11/01/95 | 9,372 24 | p | CI HV | 05 00 | 0 00 | 0 272 24 | 04/30/09 | 9,372 24 | 0.00 | 0.00 | 9,372.24 | d |
| 000303 | LATERAL FILES | | | OLITI | 05 00 | 0 00 | 0,01227 | 04/00/00 | 3,012 24 | 0.00 | 0.00 | 0,0,0,1 | • |
| 000002 | 07/01/96 | 3,901 95 | | CI HV | 07 00 | 0 00 | 3 001 05 | 05/31/09 | 3,901 95 | 0 00 | 0 00 | 3,901 95 | |
| 000303 | BOOKCASES | 0,30133 | Г | OLITI | 07 00 | 000 | 3,50153 | Q3/3/1/03 | 0,30133 | 000 | 0.00 | 0,00100 | |
| 000000 | 07/01/96 | 1,279 57 | D | ei UV | 07 00 | 0 00 | 1 270 57 | 05/31/09 | 1,279 57 | 0 00 | 0.00 | 1,279 57 | |
| 000304 | SECRETARIAL | | Г | SLITT | 07 00 | 000 | 1,27937 | 03/3//03 | 1,219 31 | 000 | 0 00 | 1,27337 | |
| 000304 | 07/01/96 | 1,710 17 | 0 | CI LIV | 07 00 | 0 00 | 171017 | 05/31/09 | 1,710 17 | 0 00 | 0 00 | 1,710 17 | |
| 000302 | DESKWARDRO | | Г | OLITI | 07 00 | 0 00 | 1,7 10 17 | 03/3/1/03 | 1,710 17 | 000 | 0 00 | 1,7 10 17 | |
| 000300 | 08/01/96 | | D | CI UV | 07 00 | 0 00 | 6 644 70 | 05/31/09 | 6,644 70 | 0.00 | 0 00 | 6,644 70 | |
| 000207 | | 6,644 70 | ۲ | SLTT | 07 00 | 0.00 | 0,044 /0 | 03/3/1/09 | 0,044 / 0 | 0,00 | 000 | 0,044 70 | |
| 000307 | ORIENTAL RUG | | 0 | CI LIV | 07.00 | 0 00 | 7 700 00 | 05/31/09 | 7,796 02 | 0 00 | 0 00 | 7,796 02 | |
| 000300 | 08/01/96 Executive Chair | 7,796.02 | r | SLITT | 07 00 | 0.00 | 7,790 02 | 03/3/1/09 | 7,730 02 | 000 | 0 00 | 1,130 02 | |
| 000300 | 11/01/96 | 1,334 29 | D | ci nv | 07 00 | 0 00 | 1 224 20 | 05/31/09 | 1,334.29 | 0.00 | 0 00 | 1,334 29 | |
| 000200 | Chairs with welt | | Г | SLITT | 07 00 | 0 00 | 1,334 29 | 03/3/1/03 | 1,004.29 | 0.00 | 000 | 1,004 23 | |
| 000009 | 01/01/97 | | D | CI LIV | በን በስ | 0.00 | 1 416 06 | 05/31/09 | 1,416 96 | 0 00 | 0,00 | 1,416.96 | |
| 000000 | | 1,416 96 | ٢ | SLN I | 07 00 | 000 | 1,41090 | פטוו פעכט | 1,41090 | 000 | 0.00 | 1,4 10.50 | |
| 000320 | COMPUTER - S | | _ | CLUV | 05.00 | 0.00 | 0.400.54 | 04/00/00 | 0.100.51 | 0.00 | 0 00 | 2,188 51 | ч |
| 000004 | 12/01/97 | 2,188 51 | ۲ | SLHY | 05 00 | 0 00 | 2,18851 | 04/30/09 | 2,188 51 | 0 00 | 0 00 | 2,100 31 | u |
| 000321 | Dell 333 | 0.000.70 | _ | 01.137 | 05.00 | 0.00 | 2 000 70 | 0.4100100 | 3,028 73 | 0.00 | 0 00 | 3,028.73 | d |
| 000000 | 04/01/98 | 3,028 73 | ٢ | SLHY | 05 00 | 0 00 | 3,028 / 3 | 04/30/09 | 3,020 / 3 | 0 00 | 0 00 | 3,026.73 | u |
| 000322 | DELL 17 INCH I | | Б | 01.111/ | 05.00 | 0.00 | 700.40 | 0.400/00 | 700.10 | 0.00 | 0.00 | 732.16 | d |
| 000005 | 04/01/98 | 732 16 | ٢ | SLHY | 05 00 | 0 00 | 732 16 | 04/30/09 | 732 16 | 0 00 | 0.00 | 732.10 | u |
| 000325 | Lexmark 1620 p | | _ | 01.137 | 05.00 | 0.00 | 445450 | 0.1/00/00 | 1 15 1 50 | 0.00 | 0.00 | 1 154 50 | a |
| | 06/01/98 | 1,154 52 | ٢ | SLHY | 05 00 | 0 00 | 1,154 52 | 04/30/09 | 1,154 52 | 0 00 | 0 00 | 1,154 52 | u |
| 000326 | Lexmark s1620 | | _ | | | | | | 445455 | | 0.00 | 4 45 4 50 | |
| | 07/01/98 | 1,154.52 | | SLHY | 05 00 | 0.00 | 1,154 52 | 04/30/09 | 1,154 52 | 00,00 | 0.00 | 1,154 52 | a |
| 000327 | LEXMARK S162 | | | | | | | | | | 0.00 | 4 45 4 5 0 | |
| | 07/01/98 | 1,154 52 | | SLHY | 05 00 | 0 00 | 1,154 52 | 04/30/09 | 1,154 52 | 0 00 | 0 00 | 1,154 52 | ď |
| 000328 | LEXMARK S162 | | | | | | | | | | | | |
| | 07/01/98 | 1,154 52 | Ρ | SLHY | 05 00 | 0.00 | 1,154 52 | 04/30/09 | 1,154.52 | 0.00 | 0.00 | 1,154.52 | d |
| 000329 | 400 MZ COMPL | | | | | | | | | | | | |
| | 11/01/98 | 1,716 14 | Ρ | SLHY | 05 00 | 0.00 | 1,716 14 | 04/30/09 | 1,716 14 | 0 00 | 0.00 | 1,716 14 | d |
| 000330 | 300 MZ COMPU | ITER | | | | | | | | | | | |
| | 11/01/98 | 1,154 34 | Ρ | SLHY | 05 00 | 0 00 | 1,154 34 | 04/30/09 | 1,154 34 | 0 00 | 0 00 | 1,154 34 | q |
| 000331 | LEXMARK PRIM | | | | | | | | | | | | |
| | 11/01/98 | 945 00 | P | SLHY | 05 00 | 0 00 | 945 00 | 04/30/09 | 945 00 | 0 00 | 0 00 | 945 00 | d |
| 000332 | EPSON STYLU | S COLOR PR | INT | | | | | | | | | | |
| | 12/01/98 | 1,51092 | Ρ | SLHY | 05 00 | 0 00 | 1,510 92 | 04/30/09 | 1,51092 | 0 00 | 0 00 | 1,510 92 | ď |
| 000334 | LIBRARY BOOK | CASES | | | | | | | | | | | |
| | 03/01/99 | 2,724 03 | Ρ | SLHY | 07 00 | 0 00 | 2,724 03 | 05/31/09 | 2,724 03 | 0 00 | 0 00 | 2,724 03 | |
| 000335 | EXECUTIVE DE | SK | | | | | | | | | | | |
| | 03/01/99 | 4,319.79 | Ρ | SLHY | 07 00 | 0 00 | 4,319 79 | 05/31/09 | 4,319 79 | 0 00 | 0 00 | 4,319 79 | |
| 000336 | LEXMARK PRIM | iter | | | | | | | | | | | |
| | 08/01/99 | 1,874 88 | Ρ | SLHY | 05 00 | 0 00 | 1,874 88 | 05/31/09 | 1,874 88 | 0.00 | 0.00 | 1,874.88 | 1 |
| 000337 | Computer | | | | | | | | | | | | |
| | 10/01/99 | 1,167 48 | Р | SLHY | 05 00 | 0 00 | 1,167,48 | 04/30/09 | 1,167.48 | 0 00 | 0 00 | 1,167 48 | d |
| 000338 | Computer | ., | - | • | | | | | , | | | , - | |
| | 10/01/99 | 1,167 48 | Р | SLHY | 05 00 | 0 00 | 1.167.48 | 04/30/09 | 1,167 48 | 0 00 | 0.00 | 1,167.48 | d |
| 000339 | LEXMARK OPR | | • | | 55 00 | 0.00 | 1,101.40 | 2 | ., | 0.30 | | ., | - |
| 30000 | 10/01/99 | 1,067 04 | р | SLHY | 05 00 | 0 00 | 1 067 04 | 05/31/09 | 1,067.04 | 0.00 | 0 00 | 1,067.04 | |
| 000341 | COMPUTER | 1,007.04 | • | CLITI | 03 00 | 0.00 | 1,007.04 | JUIU 1103 | 1,001.04 | 0,00 | 0.00 | 1,007,04 | |
| 00004 I | 11/01/99 | 991 44 | p | SI HV | 05 00 | 0 00 | 001.44 | 04/30/09 | 991 44 | 0 00 | 0 00 | 991 44 | d |
| | 11101199 | JJ 1 44 | L, | JLIII | 03 00 | 0 00 | 331 44 | CONDUIFU | JJ 1 44 | 0 00 | 0.00 | JJ 1 44 | u |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Pnor Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Cod |
|---------|------------------|---|---|--------------|-----------------------|---|--|--------------|--------------------------|---|---|---|------------|
| ocation | n = 1209 | | | | | | | | | | | | |
| | Computer | | | | | | | | | | | | |
| 00412 | 12/01/99 | 1,195 56 | р | SLHY | 05 00 | 0 00 | 1 195 56 | 04/30/09 | 1,195 56 | 0,00 | 0 00 | 1,195 56 | А |
| 00343 | Chairs | 1,100 00 | • | OLITI | 00 00 | 0 00 | 1,130.30 | 04/00/03 | 1,193.30 | 0,00 | 0 00 | 1,155 50 | u |
| 00010 | 02/01/00 | 728 35 | P | SLHV | 07 00 | 0 00 | 728 35 | 05/31/09 | 728 35 | 0 00 | 0 00 | 728 35 | |
| 00344 | Lateral File | 12003 | • | JUIT | 07 00 | 000 | 120 00 | 03/3/1/03 | 720 33 | 0 00 | 0 00 | 120 03 | |
| 00411 | 02/01/00 | 915,62 | Р | SLHV | 07 00 | 0.00 | 915.62 | 05/31/09 | 915.62 | 0 00 | 0 00 | 915 62 | |
| 00345 | Server PC | 010,02 | ٠ | OLITI | 0, 00 | 0 00 | 310,02 | 03/01/03 | 313,02 | 0 00 | 0 00 | 31302 | |
| | 02/01/00 | 8,283 60 | Р | SLHY | 05 00 | 0.00 | 8,283.60 | 04/30/09 | 8,283 60 | 0 00 | 0 00 | 8,283 60 | А |
| 00348 | Network wining | | • | OLITI | 03 00 | 0.00 | 0,200.00 | 04/00/03 | 0,203 00 | 0 00 | 0 00 | 0,203 00 | u |
| | 02/01/00 | 6,004.00 | Р | SLHY | 05 00 | 0 00 | 6,004 00 | 05/31/09 | 6,004 00 | 0 00 | 0 00 | 6,004 00 | |
| 00347 | | 0,001.00 | • | 0011 | 00 00 | 0.00 | 0,004 00 | 0.070 1700 | 0,004 00 | 000 | 0 00 | 0,004 00 | |
| | 03/01/00 | 4,387 77 | P | SLHV | 07 00 | 0 00 | 4,387 77 | 05/31/09 | 4,387.77 | 0 00 | 0 00 | 4,387 77 | |
| 00348 | | 4,007 77 | • | CLITT | 07 00 | 0 00 | 4,001 11 | 03/01/05 | ۱۱,۱۵۵۱ | 000 | 0 00 | 4,007 77 | |
| | 03/01/00 | 2,983 28 | Р | SLHY | 07 00 | 0 00 | 2,983 28 | 05/31/09 | 2,983 28 | 0 00 | 0 00 | 2,983 28 | |
| 00349 | File Cabinet | 4,000 20 | • | | 0, 00 | 0 00 | 2,000 20 | 000,00 | 2,000 20 | 000 | 0.00 | 2,000 20 | |
| | 03/01/00 | 1,291.27 | Р | SLHY | 07 00 | 0 00 | 1 291 27 | 05/31/09 | 1,291 27 | 0.00 | 0 00 | 1,291 27 | |
| 00350 | Reception Furr | | | | 2. 55 | | 1,20 . 2. | 04000 | 1,20121 | 0.00 | 0.00 | 1,20121 | |
| | 03/01/00 | 433.75 | Р | SLHY | 07 00 | 0 00 | 433.75 | 05/31/09 | 433.75 | 0 00 | 0 00 | 433 75 | |
| 00351 | Downstairs Cu | | • | 02.,, | 0, 00 | 000 | 40010 | 00.01.00 | 400.70 | 000 | 0 00 | 10073 | |
| | 03/01/00 | 6,738 30 | Р | SLHY | 07 00 | 0 00 | 6.738 30 | 05/31/09 | 6,738.30 | 0 00 | 0.00 | 6,738 30 | |
| 00352 | Rebar's Furnitu | | • | 02 | 07 00 | 000 | 0,700 00 | 000 000 | 0,7 00.00 | 000 | 0.00 | 0,700 00 | |
| | 04/01/00 | 10,148.27 | p | SLHY | 07 00 | 0 00 | 10,148 27 | 05/31/09 | 10,148 27 | 0 00 | 0 00 | 10,148.27 | |
| 00353 | Upstairs Cubic | • | • | 02 | 0, 00 | 0 00 | 10,11027 | 00/01/00 | 10,110 27 | 0 00 | 000 | 10,110.21 | |
| | 04/01/00 | 1,784 70 | Р | SLHY | 07 00 | 0 00 | 1 784 70 | 05/31/09 | 1,784 70 | 0 00 | 0.00 | 1,784 70 | |
| 00354 | Upstairs Cubic | | | | •. •• | | 1,,,,,,, | | 1,101.10 | • | | ., | |
| | 04/01/00 | 5,198.08 | Р | SLHY | 07 00 | 0 00 | 5 198 08 | 05/31/09 | 5,198.08 | 0.00 | 0.00 | 5,198 08 | |
| 00355 | Upstairs Cubic | | • | | 0, 00 | • | 0,.0000 | 00.01.00 | 0,100,00 | 0.00 | | 0,100 00 | |
| | 04/01/00 | 10,906 46 | Р | SLHY | 07 00 | 0 00 | 10,906 46 | 05/31/09 | 10,906 46 | 0 00 | 0 00 | 10,906 46 | |
| 00356 | Upstairs Cubic | • | | | • • • • • | | , | •••• | | | | | |
| | 04/01/00 | 1,357 39 | Р | SLHY | 07 00 | 0 00 | 1.357.39 | 05/31/09 | 1,357.39 | 0 00 | 0 00 | 1,357 39 | |
| 00358 | Furniture | 1,001 00 | • | 02 | 0, 00 | 0 00 | 1,007.00 | 03000 | 1,007.00 | 000 | • | 1,007 00 | |
| | 09/01/00 | 3,56189 | Р | SLHY | 07 00 | 0 00 | 3 561 89 | 05/31/09 | 3,561 89 | 0 00 | 0.00 | 3,561 89 | |
| 00360 | Computer | 4,007,00 | • | | 0, 00 | 000 | 0,001.00 | 50.5 50 | 0,00100 | 0 00 | -144 | 0,00100 | |
| | 10/01/00 | 2,035 99 | ₽ | SLHY | 05 00 | 0 00 | 2,035 99 | 04/30/09 | 2,035 99 | 0 00 | 0 00 | 2,035 99 | Н |
| 00361 | Lemark Printer | 2,50000 | • | 02 | 00 00 | 000 | 2,000 00 | 0 1100100 | 2,000 00 | 000 | 0.00 | 2,000 00 | ٠ |
| | 11/01/00 | 1,132 92 | Р | SLHY | 05 00 | 0.00 | 1 132 92 | 05/31/09 | 1,132.92 | 0 00 | 0 00 | 1,132 92 | |
| 00362 | Fax Machine | 7,102.02 | • | 0 | 00 00 | 0.00 | 1,102 02 | 000000 | 1,102.02 | 000 | 000 | 1,102 32 | |
| | 12/01/00 | 2,808 00 | Ρ | SLHY | 05 00 | 0 00 | 2.808.00 | 05/31/09 | 2,808.00 | 0 00 | 0 00 | 2,808 00 | |
| 00364 | Computer | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | • | | ••• | V 55 | 2,000 00 | 00.000 | 2,000.00 | 0.00 | | 2,000 00 | |
| | 02/01/01 | 1,360 80 | Р | SLHY | 05 00 | 0 00 | 1.360.80 | 04/30/09 | 1,360 80 | 0 00 | 0 00 | 1,360 80 | d |
| 00365 | Desk for execu | | | | ••• | • | 1,000.00 | • | 1,000 00 | *** | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - |
| | 04/01/01 | 6,796 87 | Р | SLHY | 07 00 | 0 00 | 6,796.87 | 05/31/09 | 6,796.87 | 0 00 | 0 00 | 6,796 87 | |
| 00366 | Desk | | | | ** | | 41 4.4. | • | 5,, 5 5, 5 | • • • • | | 4, 444 | |
| | 04/01/01 | 6,328 24 | Р | SLHY | 07 00 | 0 00 | 6,328 24 | 05/31/09 | 6,328 24 | 0.00 | 0.00 | 6,328.24 | |
| 00367 | Office Furniture | | | | 0, 00 | • | 0,020 2 1 | 0 | 0,020 21 | 0.00 | 0.00 | 0,020.21 | |
| | 07/01/01 | 5,426 41 | Р | SLHY | 07 00 | 0 00 | 5,426 41 | 05/31/09 | 5,426 41 | 0.00 | 0.00 | 5,426 41 | |
| 00369 | Power Mac | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | • | <i>3</i> , | -, - | 0.00 | 5,125 11 | J== 1,00 | 0,120 11 | 0.00 | 3.50 | 5,12541 | |
| . ••• | 08/01/01 | 5,981.02 | Р | SLHY | 05 00 | 0 00 | 5,981.02 | 04/30/09 | 5,981.02 | 0 00 | 0.00 | 5,981.02 | Ч |
| 00370 | Laptop Toshiba | | • | Jul 11 | 03 00 | 0 00 | 0,301,02 | J-1100100 | J ₁ 30 1.02 | 0.00 | 0.00 | 3,301.02 | u |
| 1 0 | 06/01/02 | 2,521.33 | Р | SLHY | 05 00 | 0 00 | 2,521.33 | 04/30/09 | 2,521.33 | 0 00 | 0 00 | 2,521 33 | ч |
| 00371 | Laptop Gatewa | | ' | JU 11 | V J V V | 0 00 | در ۱ ، ۱ ، ۱ ، ۱ ، ۱ ، ۱ ، ۱ ، ۱ ، ۱ ، ۱ | CONDUCTOR | 4751.00 | 0.00 | 0.00 | 2,32133 | u |
| 1 | 07/01/02 | 2,208.14 | p | SLHV | 05 00 | 0 00 | 2,208.14 | 04/30/00 | 2 200 14 | 0.00 | 0.00 | 2 200 44 | , |
| | OTTO BOZ | ۵,200,14 | • | JULI | 03 00 | 0 00 | 2,200.14 | CONCHIO | 2,208.14 | 0 00 | 0.00 | 2,208.14 | u |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Acquir Date Valu | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|---------------------------------------|-----------------|--------------|-------------|---|---|--------------|-----------------------------|--------------------------|-----------------------------|-------------------------------|-------------|
| Location | n = 1209 | | | | | | | | | | | |
| | Laptop Gateway | | | | | | | | | | | |
| 000072 | | 56 64 P | SLHY | 05 00 | 0 00 | 2 756 64 | 04/30/09 | 2,756 64 | 0 00 | 0 00 | 2,756 64 | d |
| 000373 | AS400 COMPUTER | 00 07 1 | OCH | 00 00 | 0 00 | 2,7 00.0 1 | 01100100 | £,700 04 | 0.00 | 000 | 2,70001 | ٠ |
| 00000 | | 91.87 P | SLHY | 05 00 | 0 00 | 48,09187 | 05/31/09 | 48,091.87 | 0 00 | 0 00 | 48,091 87 | |
| 000374 | Executive Director Fur | | OCITI | 00 00 | 0 00 | 10,00101 | 0001100 | 10,001,01 | 0.00 | 000 | 10,00.01 | |
| , | | 92 18 P | ME200 | 07 00 | 0 00 | 6.592.18 | 05/31/09 | 5,415 50 | 49 03 | 588 34 | 6.003 84 | s |
| 000375 | AS 400 COMPUTER | | 200 | 0, 00 | • | 0,002. | | 0,770 | .000 | 555 5 , | 0,000 | - |
| | | 3941 P | SLHY | 05 00 | 0 00 | 101.239.41 | 05/31/09 | 99,552 08 | 0 00 | 0.00 | 99,552 08 | |
| 000376 | 4 DRAWER LATERAL | | | | | , | | | | | , | |
| | | 98 63 P | | 07 00 | 0.00 | 698 63 | 05/31/09 | 490.73 | 8.32 | 99 81 | 590 54 | |
| 000377 | 4 DRAWER WOOD LA | | | | | | | | | | | |
| | 07/01/03 2,4 | 6881 P | SLHY | 07 00 | 0 00 | 2,468 81 | 05/31/09 | 1,734 05 | 29.40 | 352 69 | 2,086 74 | |
| 000378 | DATUM LIBRARY SH | ELVING | | | | • | | · | | | • | |
| | 09/01/03 7,5 | 48 24 P | SLHY | 07 00 | 0 00 | 7,548 24 | 05/31/09 | 5,256 81 | 89.86 | 1,078 32 | 6,335 13 | |
| 000379 | TOSH S 129 LAPTOP | | | | | | | | | | | |
| | 11/01/03 1,5 | 19 94 P | SLHY | 05 00 | 0 00 | 1,519 94 | 04/30/09 | 1,443 95 | 0 00 | 0 00 | 1,443 95 | ď |
| 000380 | 4 DRAWER LATERAL | | | | | | | | | | | |
| | ,- | 2138 P | SLHY | 07 00 | 0 00 | 1,521 38 | 05/31/09 | 1,068.59 | 18.12 | 217 34 | 1,285 93 | |
| 000381 | bellsouth phone syster | | | | | | | | | | | |
| | | 65 13 P | SLHY | 07 00 | 0 00 | 24,865 13 | 05/31/09 | 15,096 68 | 296 02 | 3,552 16 | 18,648 84 | |
| 000382 | laser color printer upst | | | | | | | | | | | |
| | | 63.00 P | SLMM | 05 00 | 0 00 | 2,763 00 | 05/31/09 | 2,164 35 | 46 05 | 552 60 | 2,716 95 | |
| 000383 | bellsouth phone | | | | | | | | | | | |
| 000000 | | 21.49 P | | 07 00 | 0 00 | 521.49 | 05/31/09 | 266.96 | 6 2 1 | 74 50 | 341.46 | |
| 000386 | air conditioning unit for | | | | 2.22 | | 05/04/00 | | ~~ | *** | | |
| 00000= | | 14 00 P | SLHY | 07 00 | 0 00 | 6,514.00 | 05/31/09 | 3 257.00 | 77.55 | 930 57 | 4,187 57 | |
| 000387 | 14 THERMOSTATES | D | 01.111 | | | | 05/04/00 | 4040.00 | 40.00 | -50.57 | 0.504.57 | |
| 000000 | | 96 00 P | | 07 00 | 0 00 | 3,896.00 | 05/31/09 | 1,948 00 | 46 39 | 556 57 | 2,504 57 | |
| 000389 | 4 Athlon64 3200 comp | | | 05.00 | 0.00 | 0.040.00 | 00/04/00 | 1 000 00 | 00.00 | 700.00 | 0.504.60 | |
| 000000 | | 16,62 P | | 05 00 | 0 00 | 3,510.62 | 05/31/09 | 1,808 30 | 60 28 | 723 32 | 2,531 62 | |
| 000390 | 2 Athlon64 3200 Comp | | | 05.00 | 0.00 | 1 770 16 | 05/21/00 | 005.00 | 20 51 | 354 03 | 1 000 11 | |
| 000204 | 10/01/05 1,7 Toshiba Protege Lapto | 70 16 P | SLITT | 05 00 | 0.00 | 1,770 10 | 05/31/09 | 885 08 | 29 51 | 334 03 | 1,239 11 | |
| 000091 | | р 05.67 Р | CI LIV | 05 00 | 0 00 | 2 505 67 | 05/31/09 | 1,252 83 | 41.77 | 501 13 | 1,753 96 | |
| 000303 | Mac Computer System | | OLITT | 03 00 | 0 00 | 2,505.07 | 03/3/1/03 | 1,232 00 | 41.77 | 301 13 | 1,733 90 | |
| 0000002 | | 44 <i>7</i> 7 P | SLHY | 05 00 | 0 00 | 2 444 77 | 05/31/09 | 1,222 38 | 40 75 | 488 95 | 1,711 33 | |
| 000393 | 4100 black laser fax | | OLI II | 00 00 | 0.00 | 2,117. | 000000 | 1,222 00 | 10 70 | 100 00 | 1,7 1 1 00 | |
| 00000 | | 87.99 P | SLHY | 05 00 | 0 00 | 287 99 | 05/31/09 | 144.00 | 4.80 | 57 60 | 201 60 | |
| 000394 | quark software | | 02,11 | 55 55 | 0.00 | 20, 00 | 33.3 33 | | | 0. 00 | 20.00 | |
| ***** | 11/16/05 3 | 86.93 P | SHY | 05 00 | 0 00 | 386 93 | 05/31/09 | 193 47 | 6 45 | 77.39 | 270 86 | |
| 000395 | quark software | - | | | *** | 000 41 | | | | | 2,000 | |
| | | 0476 P | SLHY | 05 00 | 0 00 | 704.76 | 05/31/09 | 352.38 | 11 75 | 140.95 | 493.33 | |
| 000396 | Mac creative suite soft | | | | | | | | | • | | |
| | | 62 63 P | SLHY | 05 00 | 0 00 | 1,062.63 | 05/31/09 | 531 32 | 17 72 | 212 53 | 743 85 | |
| 000397 | office prro 2003 softwa | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| | | 00.84 P | SLHY | 05 00 | 0 00 | 1,700 84 | 05/31/09 | 850.42 | 28,35 | 340.17 | 1,190.59 | |
| 000398 | annual meeting trunks | | | | | • | | | | | • | |
| | • | 20 00 P | SLHY | 07 00 | 0.00 | 2,320.00 | 05/31/09 | 828 58 | 27 62 | 331 43 | 1,160 01 | |
| 000399 | Epson Perfection 3590 | Photo sc | anner | | | | | | | | • | |
| | | 9774 P | | 05 00 | 0 00 | 197 74 | 05/31/09 | 98.87 | 3 30 | 39 55 | 138 42 | |
| 000400 | Network Svr Software | | | | | | | | | | | |
| 000100 | | | | | 0 00 | | 05/31/09 | 301 73 | 10.06 | 120 69 | | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No_ | | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|---------------|-------------------|-------------------|------|--------------|-------------|--------------------------|----------------------|--------------|-----------------------------|--------------------------|-----------------------------|-------------------------------|-------------|
| ocation | ı = 1209 | | | | | | | | | | | | |
| | Adobe Acrobat | 7 O Professio | nalf | or Macont | osh | | | | | | | | |
| ,00 10 1 | 03/01/06 | 434 91 | | | 05 00 | 0 00 | 434 91 | 05/31/09 | 217 45 | 7 25 | 86 98 | 304 43 | |
| 00402 | | | • | OL, T, | 00 00 | 0 00 | 10101 | 00001100 | 217 10 | 120 | | 55.10 | |
| | 03/29/06 | 961 89 | Р | SLHY | 07 00 | 0 00 | 961 89 | 05/31/09 | 343 53 | 11 46 | 137 41 | 480 94 | |
| 00403 | Bndge Desk | | | | | | | | | | | | |
| | 03/29/06 | 172 21 | Ρ | SLHY | 07 00 | 0 00 | 172.21 | 05/31/09 | 61 50 | 2.05 | 24 60 | 86 10 | |
| 000404 | Credenza | | | | | | | | | | | | |
| | 03/29/06 | 629 48 | Ρ | SLHY | 07 00 | 0 00 | 629.48 | 05/31/09 | 224 82 | 7 50 | 89 93 | 314 75 | |
| 00405 | 4 Drawer Latera | l File | | | | | | | | | | | |
| | 03/29/06 | 1,049 40 | Ρ | SLHY | 07 00 | 0 00 | 1,049 40 | 05/31/09 | 374 80 | 12 50 | 149 92 | 524 72 | |
| 00406 | 4 Seagate Webi | | | | | | | | | | | | |
| | 04/01/06 | 327 00 | Ρ | SLHY | 05 00 | 0 00 | 327 00 | 05/31/09 | 163 50 | 5 4 5 | 65 40 | 228 90 | |
| 00407 | 4 Athlone64 320 | - | | | | | | | | | | | |
| | 04/01/06 | 2,759.88 | | SLHY | 05 00 | 0 00 | 2,759 88 | 05/31/09 | 1,379 95 | 46.00 | 551 98 | 1,931.93 | |
| 00408 | 2003 Server Atl | | | DI 1 11/ | 05.00 | 0.00 | 474457 | 05/04/00 | 257.22 | 00.50 | 21221 | 1 000 10 | |
| 00400 | 05/01/06 | 1,714 57 | | | 05 00 | 0 00 | 1,/14.5/ | 05/31/09 | 857 28 | 28 58 | 34291 | 1,200 19 | |
| 00409 | 2003 Exchange | | | | 05.00 | 0.00 | 1.040.05 | 05/04/00 | 000.00 | 80.00 | 000.70 | 1 100 00 | |
| 00440 | 05/01/06 | 1,618.65 | ۲ | SLHY | 05 00 | 0.00 | 1,618 65 | 05/31/09 | 809 33 | 26 98 | 323 73 | 1,133.06 | |
| UU4 IU | LCD Projector | 000.04 | _ | CLUV | 05.00 | 0.00 | 000.04 | 00/04/00 | 100.45 | 10.00 | 400 40 | 626.60 | |
| 00411 | 04/01/06 Deals | 980.91 | ۲ | SLHY | 05 00 | 0.00 | 980.91 | 05/31/09 | 490 45 | 16 35 | 196 18 | 686 63 | |
| 00411 | 04/18/06 | 1,655 17 | ۵ | SI NA | 07 00 | 0 00 | 1 655 17 | 05/21/00 | 591 13 | 1971 | 236 45 | 827 58 | |
| 00/12 | Credenza | 1,000 17 | Г | SETT | 07 00 | 000 | 11 6601 | 05/31/09 | 29113 | 1971 | 230 43 | 027 30 | |
| 00412 | 04/18/06 | 894 89 | Р | SI HA | 07 00 | 0 00 | 99 109 | 05/31/09 | 319.60 | 10 66 | 127 84 | 447 44 | |
| 00413 | Exchange Serve | | | | 07 00 | 0 00 | 034 03 | 03/3/1/03 | 513.00 | 10 00 | 127 04 | नता रर | |
| 00-10 | 04/01/06 | 1,977 85 | | | 05 00 | 0 00 | 1 977 85 | 05/31/09 | 988 93 | 32 97 | 395 57 | 1,384 50 | |
| 00416 | Sonic Wall TZ so | | • | OLITT | 00 00 | 000 | 1,077.00 | 0001,00 | 000 00 | 0201 | 0000 | 1,00.00 | |
| | 11/01/06 | 1,224 88 | Р | SLMM | 05 00 | 0.00 | 1,224 88 | 05/31/09 | 387 89 | 20 42 | 244 98 | 632 87 | |
| 00417 | 4 desktop comp | | | | | **** | ., | | | | | | |
| | 11/01/06 | 2,563 68 | Ρ | SLMM | 05 00 | 0 00 | 2,563,68 | 05/31/09 | 81184 | 42.73 | 512 74 | 1,324.58 | |
| 00419 | | • | | | | | , | | | | - | , | |
| | 05/01/07 | 1,305 83 | Ρ | SLMM | 05 00 | 0 00 | 1,305 83 | 05/31/09 | 304 70 | 2177 | 261,17 | 565 87 | |
| 00421 | Upstairs Kitchen | | | | | | , | | | | | | |
| | 06/01/07 | 4,390 47 | Ρ | SLMM | 07 00 | 0 00 | 4,390 47 | 05/31/09 | 679 48 | 52 27 | 627 21 | 1,306 69 | |
| 00423 | Office Desk and | Lateral File | | | | | | | | | | | |
| | 07/01/07 | 1,960.53 | Ρ | SLHY | 07 00 | 0 00 | 1,960 53 | 05/31/09 | 140 04 | 23 34 | 280 08 | 420 12 | |
| 00424 | Office Desk and | Credenza | | | | | | | | | | | |
| | 07/01/07 | 2,635 20 | Ρ | SLHY | 07 00 | 0 00 | 2,635 20 | 05/31/09 | 188 23 | 31 38 | 376 46 | 564 69 | |
| 00425 | 36' Table Top ar | | | | | | | | | | | | |
| | 07/01/07 | 916 63 | Ρ | SLHY | 07 00 | 0 00 | 916.63 | 05/31/09 | 65 47 | 10 92 | 130 95 | 196 42 | |
| 00426 | 4 Chairs | | _ | | | | | | | | | | |
| | 07/01/07 | 1,458 60 | | SLHY | 07 00 | 0 00 | 1,458.60 | 05/31/09 | 104 19 | 17 37 | 208 37 | 312.56 | |
| 00427 | Lunch Rooms ta | | | | | | | | | | | | |
| | 07/01/07 | 6,674 66 | | | 07 00 | 0 00 | 6,674 66 | 05/31/09 | 476 76 | 79 46 | 953 52 | 1,430 28 | |
| 00428 | 4 Zody Task Ch | | | | | | | | | | | | |
| | 07/01/07 | 2,858.91 | Р | SLHY | 07 00 | 0 00 | 2,858.91 | 05/31/09 | 204 21 | 34 04 | 408 42 | 612.63 | |
| UU429 | 5 Sit On It Mid B | | _ | 01157 | 07.05 | | | 0510 : 107 | | *** | | | |
| 00400 | 07/01/07 | 2,357.12 | ۲ | SLHY | 07 00 | 0 00 | 2,357.12 | 05/31/09 | 168.37 | 28.07 | 336 73 | 505.10 | |
| UU430 | 1 HB Task Chair | | _ | 01107 | A7 A4 | | | 05/01/05 | A . A= | | 20.50 | | |
| 00/01 | 07/01/07 | 446 11 | | | 07 00 | 0.00 | 446 11 | 05/31/09 | 31 87 | 5 32 | 63.73 | 95 60 | |
| <i>J</i> 0431 | Upstairs Confere | | | | | | 40.000 | 0510 - 100 | | | | 4 447 | |
| | 09/01/07 | 12,092 91 | Р | SLHY | 05 00 | 0.00 | 12,092.91 | 05/31/09 | 1,209 29 | 201.55 | 2,41858 | 3,627 87 | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | | quired 'alue | | Depr Meth | Est Lile | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Pnor Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|---------------------------------|---------------------|-----|--------------|-------------|--------------------------|----------------------|--------------|----------------------------|--------------------------|-----------------------------|-----------------------------|-------------|
| 0,0110 | Oute V | <u>uuo</u> | _ | Moun | | | Basio | ,,,,, | Doproduction | 111011011 | | | |
| Location | n = 1209 | | | | | | | | | | | | |
| 000432 | Lateral File | | | | | | | | | | | | |
| | 09/01/07 | 758 35 | Ρ | SLHY | 07 00 | 0 00 | 758 35 | 05/31/09 | 54.17 | 9 03 | 108 34 | 162 51 | |
| 000433 | F & S Office Scree | | | | | | | | | | | | |
| | 10/01/07 | 51208 | | | 07 00 | 0 00 | 512 08 | 05/31/09 | 36 58 | 6.10 | 73 16 | 109 74 | |
| 000434 | Athlon 64 X 2 Com | | | | | | | | *** | 10.51 | 400.00 | 207.57 | |
| | 10/15/07 | 99190 | Р | SLHY | 05 00 | 0 00 | 991 90 | 05/31/09 | 99.19 | 16 54 | 198 38 | 297 57 | |
| 000435 | Dell Laptop Comp | | _ | CLUV | 05.00 | 0.00 | 2 240 27 | 05/21/00 | 221.24 | EE 01 | 662 47 | 993 71 | |
| 000436 | 11/01/07 Dell Laptop Comp | 3,312.37 | ٢ | SLITT | 05 00 | 0 00 | 3,3123 <i>1</i> | 05/31/09 | 331 24 | 55.21 | 00241 | 33071 | |
| 000430 | 11/01/07 | 3,312.37 | D | SI HV | 05 00 | 0 00 | 3 312 37 | 05/31/09 | 331.24 | 55.21 | 662.47 | 993 71 | |
| 000437 | 1 Zody Task Chair | | | | 05 00 | 000 | 3,312 37 | 03/01/03 | 001.24 | 33.E1 | 002.17 | 00011 | |
| 000107 | 11/15/07 | 590 19 | | | 07 00 | 0 00 | 590 19 | 05/31/09 | 42 16 | 7 03 | 84 31 | 126 47 | |
| 000438 | Office Desk | **** | • | • | | | | •••• | | | | | |
| | 11/15/07 | 1,121 52 | Ρ | SLHY | 07 00 | 0 00 | 1,121 52 | 05/31/09 | 80 11 | 13 36 | 160 22 | 240 33 | |
| 000439 | 10 Rectangle Tabl | es and 24 i | ИΒ | Task Chain | S | | | | | | | | |
| | | 17,138.90 | Ρ | SLHY | 07 00 | 0 00 | 17,138 90 | 05/31/09 | 1,224 21 | 204.04 | 2,448 42 | 3,672 63 | |
| 000443 | Framed Lithograph | | | | | | | | | | | | |
| | 01/15/08 | 1,203 96 | Р | SLMM | 07 00 | 0 00 | 1,203 96 | 05/31/09 | 86 00 | 14 34 | 172 00 | 258 00 | |
| 000446 | Laser Printer | 000.40 | _ | OI MIM | 05.00 | 0.00 | 000.40 | 05/04/00 | CO 71 | 10.05 | 167 30 | 237 01 | |
| 000440 | 02/10/08 | 836 49 | | | 05 00 | 0 00 | 836 49 | 05/31/09 | 69 71 | 13 95 | 167 30 | 237 01 | |
| 000449 | HP DV2620US La 05/01/08 | 920 00 920 00 | | | 05 00 | 0 00 | 020.00 | 05/31/09 | 30.67 | 15 34 | 184.00 | 214.67 | |
| 000450 | Spare Server | 920 00 | r | SCIMIM | 05 00 | 000 | 920 00 | 03/3/1/03 | 30.07 | 13.54 | 104.00 | 214.07 | |
| 000430 | 05/01/08 | 619.12 | Р | SLMM | 05 00 | 0 00 | 619 12 | 05/31/09 | 20 64 | 10 32 | 123 82 | 144 46 | |
| 000451 | Athlon 4200 Comp | | • | OL. | 00 00 | 0.00 | 0.0 /2 | | 200. | | | | |
| | 05/01/08 | 657 27 | Р | SLMM | 05 00 | 0 00 | 657 27 | 05/31/09 | 21 91 | 10 96 | 131 45 | 153 36 | |
| 000452 | SAGE MIP Accoun | nting Softwa | are | | | | | | | | | | |
| | | 11,977.00 | | | 05 00 | 0 00 | 11,977 00 | 05/31/09 | 0 00 | 199 62 | 2,395.40 | 2,395.40 | |
| 000453 | Additional Voice M | | | | | | | | | | | | |
| | 06/01/08 | 599 50 | | | 05 00 | 0 00 | 599.50 | 05/31/09 | 9 99 | 10 00 | 119 90 | 129 89 | |
| 000454 | 2 Athlon 4400 Con | | | | | 2.22 | 404454 | 05/04/00 | 04.04 | 04.04 | 000.04 | 001.00 | |
| 000155 | 06/01/08 | 1,314 54 | | SLMM | 05 00 | 0 00 | 1,314 54 | 05/31/09 | 21 91 | 21 91 | 262 91 | 284 82 | |
| 000455 | Athlon 4400 Comp 06/01/08 | er Systei 727 03 | | MM 19 | 05 00 | 0 00 | 727.02 | 05/31/09 | 12.12 | 12 12 | 145.41 | 157.53 | |
| 000456 | Computer Compor | | ٢ | SCIMIN | 05 00 | 0 00 | 121.03 | 03/3/1/03 | 12.12 | 12 12 | 145.41 | 137.33 | |
| 000430 | 06/01/08 | 961 38 | ρ | SLMM | 05 00 | 0 00 | 961.38 | 05/31/09 | 16 02 | 16 03 | 192 28 | 208 30 | |
| 000457 | 7 copies of Office 2 | | • | OCI IIII | 05 00 | 0 00 | 55.55 | 000.00 | 10 02 | 1000 | | 20000 | |
| 000.07 | 06/15/08 | 72181 | ρ | SLMM | 05 00 | 0 00 | 721.81 | 05/31/09 | 12 03 | 12 03 | 144 36 | 156 39 | |
| 000458 | Pedestal Desk wit | h Left Retu | rn | | | | | | | | | | |
| | 06/19/08 | 1,263 78 | | SLMM | 07 00 | 0 00 | 1,263 78 | 05/31/09 | 0 00 | 15 05 | 180 54 | 180 54 | |
| 000459 | Laser Printer | | | | | | | | | | | | |
| | 06/15/08 | 346 48 | | | 05 00 | 0 00 | 346 48 | 05/31/09 | 5 78 | 5 78 | 69 30 | 75 08 | |
| 000460 | Hitachi 4000 Proje | | | | | | | 0.5/0.4/0.0 | | | 4.050.00 | 4 050 00 | |
| | 06/27/08 | 6,754.48 | | | 05 00 | 0 00 | 6,754.48 | 05/31/09 | 0 00 | 112 58 | 1,350 90 | 1,350 90 | |
| 000461 | Acrobat 9 0 Softwa | | | | 00.00 | 0.00 | 1 000 54 | 05/04/00 | 0.00 | 20.24 | 220 51 | 220 64 | |
| 000460 | 06/28/08 | 1,692 54 | ۲ | SLIVIN | 05 00 | 0 00 | 1,092 34 | 05/31/09 | 0 00 | 28 21 | 338 51 | 338 51 | |
| 000402 | 4 Drawer Later File 06/25/08 | e 1,331 98 | P | SLMM | 07 00 | 0.00 | 1 221 00 | 05/31/09 | 0.00 | 15.86 | 190.28 | 190 28 | |
| UUUVES | Ektron CMS Softw | | r | OCIVINI | 07 00 | 0.00 | 1,001 30 | 0401103 | 0.00 | 15.00 | 130,20 | 130 20 | |
| 550700 | | 17,250 00 | Р | SLMM | 05 00 | 0 00 | 17,250 00 | | 0 00 | 287 50 | 287 50 | 287 50 | |
| 000465 | Euclid Clearvantag | | | | | 2 33 | ,200 00 | | 3 30 | 20. 30 | 25. 32 | 22. 00 | |
| | | 10,675 00 | | | 05 00 | 0.00 | 110,675.00 | 05/31/09 | 0 00 | 1,844.58 | 9,222 92 | 9,222 92 | |
| _ | | | | | | | | | | , | | | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| Sys No | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Prior Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|----------|--------------------------|-------------------|---|--------------|-------------|--------------------------|----------------------|---------------|-----------------------------|--------------------------|-----------------------------|-------------------------------|-------------|
| Location | ı = 1209 | | | | | | | | | | | | |
| | AMS System I | mplementation | ! | | | | | | | | | | |
| | 01/20/09 | 2,019 32 | | SLMM | 05 00 | 0 00 | 2.019 32 | 05/31/09 | 0 00 | 33 65 | 168 28 | 168 28 | |
| 000467 | Sage Account | | | | | | _, | | | | | | |
| | 07/01/08 | 1,100 00 | Ρ | SLMM | 05 00 | 0 00 | 1,100 00 | 05/31/09 | 0 00 | 18 34 | 220 00 | 220 00 | |
| 000468 | Teleconference | e Telephone | | | | | , | | | | | | |
| | 07/15/08 | 399 99 | Ρ | SLMM | 05 00 | 0.00 | 399.99 | 05/31/09 | 0.00 | 6.67 | 80 00 | 80 00 | |
| 000469 | Desktop Print | er | | | | | | | | | | | |
| | 07/15/08 | | Ρ | SLMM | 05 00 | 0 00 | 446 81 | 05/31/09 | 0 00 | 7 45 | 89 36 | 89,36 | |
| 000470 | Sonic Wall So | | _ | | | | | | | | | | |
| | 08/01/08 | 1,000 74 | Ρ | SLMM | 05 00 | 0.00 | 1,000 74 | 05/31/09 | 0.00 | 16.68 | 183 47 | 183 47 | |
| 000471 | Athlon Compu | | _ | | | | | | | | ** | | |
| | 09/01/08 | | Р | SLMM | 05 00 | 0 00 | 552 63 | 05/31/09 | 0 00 | 9 22 | 92 11 | 92 11 | |
| 0004/2 | Tosheba Lapt | • | _ | 01344 | 05.00 | 0.00 | 0.400.40 | 05/04/00 | 0.00 | 95.04 | 050.00 | 000.00 | |
| 000470 | 09/15/08 | 2,100 49 | | | 05 00 | 0 00 | 2,100 49 | 05/31/09 | 0 00 | 35 01 | 350 08 | 350 08 | |
| 000473 | Panel System 07/15/08 | 7.544 08 | | | 07 00 | 0 00 | 7 5 4 4 0 0 | 05/31/09 | 0.00 | 89 82 | 1,077 73 | 1.077 73 | |
| 000474 | Athlon Compu | | r | SCIVIN | 07 00 | 0 00 | 7,344 00 | 03/3/1/09 | 0.00 | 09 02 | 1,07773 | 1,077 73 | |
| 000474 | 10/15/08 | 1,030.05 | Р | SI MAM | 05 00 | 0.00 | 1 020 05 | 05/31/09 | 0 00 | 17 17 | 154 51 | 154 51 | |
| 100475 | AMS Software | | ' | OCIVIIVI | 03 00 | 0.00 | 1,000.00 | 03/3//03 | 0.00 | 17 17 | 10451 | 101 31 | |
| 000473 | 01/20/09 | 135,012.07 | р | SLMM | 05 00 | 0.00 | 135,012 07 | 05/31/09 | 0 00 | 2,250 20 | 11,251.01 | 11,251.01 | |
| 000476 | AMS Server | 100,012.07 | • | OGIIII | 00 00 | 0.00 | 100,012 01 | 03/01/03 | 000 | 2,200 20 | 11,201.01 | 11,201.01 | |
| 000170 | 01/20/09 | 6,381 79 | Ρ | SLMM | 05 00 | 0.00 | 6.381.79 | 05/31/09 | 0 00 | 106 36 | 531 82 | 531 82 | |
| 000477 | 2 SQL Proces | • | • | OC. | 00 00 | 0.00 | 0,00170 | 00/01/00 | 5 65 | 100 00 | 55.52 | 55.52 | |
| | 01/20/09 | 3,130.40 | Ρ | SLMM | 05 00 | 0.00 | 3.130 40 | 05/31/09 | 0 00 | 52 17 | 260 87 | 260 87 | |
| 000478 | Backup Syste | | | | | | -, | | | | | | |
| | 01/20/09 | 1,987 01 | | SLMM | 05 00 | 0.00 | 1,987.01 | 05/31/09 | 0 00 | 33 11 | 165 59 | 165 59 | |
| 000480 | Rework Works | | | | | | • | | | | | | |
| | 01/01/09 | 2,093 75 | Ρ | SLMM | 07 00 | 0.00 | 2,093 75 | 05/31/09 | 0,00 | 24 93 | 149 55 | 149 55 | |
| 000481 | Printer | | | | | | | | | | | | |
| | 01/01/09 | 334.68 | Ρ | SLMM | 05 00 | 0.00 | 334 68 | 05/31/09 | 0.00 | 5 58 | 33 47 | 33 47 | |
| 000482 | 5 Flat Screen | | | | | | | | | | | | |
| | 01/15/09 | 1,149 95 | Ρ | SLMM | 05 00 | 0 00 | 1,149 95 | 05/31/09 | 0.00 | 19 17 | 115 00 | 115 00 | |
| 000483 | 5 Athlon Comp | | _ | | | | | | | | | | |
| | 01/25/09 | 3,270.00 | Р | SLMM | 05 00 | 0 00 | 3,270.00 | 05/31/09 | 0 00 | 54 50 | 272.50 | 272 50 | |
| 000484 | Reupholster P | | _ | | | | | | | | | | |
| 000400 | 01/15/09 | 1,485 34 | ٢ | SLMM | 07 00 | 0 00 | 1,485 34 | 05/31/09 | 0 00 | 17 69 | 106 10 | 106 10 | |
| UUU486 | 22' Monitor | 007.00 | _ | CLAM | 05.00 | 0.00 | 207.05 | 05/04/00 | 0.00 | 4.40 | 00.00 | 00.00 | |
| 000407 | 02/15/09 | | | SLMM | 05 00 | 0 00 | 267 05 | 05/31/09 | 0 00 | 4 46 | 22 26 | 22 26 | |
| 000487 | 5 Acer Wide S | 1,291.65 | | | 05 00 | 0.00 | 120165 | 05/21/00 | 0.00 | 21.52 | 86 11 | 06.11 | |
| 000488 | 02/25/09 Protor | 1,291.00 | г | SCIVILA | 05 00 | 0 00 | 1,29100 | 05/31/09 | 0.00 | 21 52 | 00 11 | 86.11 | |
| JUU400 | 02/25/09 | 61636 | P | SI MAA | 05 00 | 0 00 | 61636 | 05/31/09 | 0 00 | 10.27 | 41 09 | 41.09 | |
| ากกสด | 2 Dell Servers | | ' | OLIVAVI | 03 00 | 0.00 | 010.00 | 03/3/1/03 | 000 | 10.27 | 4103 | 41.05 | |
| 00000 | 03/15/09 | 8,639 13 | Р | SLMM | 05 00 | 0 00 | 8 630 13 | 05/31/09 | 0.00 | 143 99 | 575 94 | 575.94 | |
| 000490 | File Maker Me | | | OLIMIN | 00 00 | 0 00 | 0,000.10 | 03/01/03 | 0.00 | 140 00 | 3/304 | 373.34 | |
| 700430 | 03/25/09 | 2,300 00 | | SLMM | 05 00 | 0.00 | 2 300 00 | 05/31/09 | 0.00 | 38 33 | 115.00 | 115 00 | |
| 000491 | _ | | | | | | 2,000.00 | 000 1100 | 000 | 00 00 | 110.00 | 11000 | |
| | 03/31/09 | 1,973.64 | | | 07 00 | 0.00 | 1 973 64 | 05/31/09 | 0 00 | 23 49 | 70 49 | 70 49 | |
| 000492 | 5 Acer Flat Sc | • | | <i></i> | 7, 00 | 0.00 | 1,07004 | 30/0 // 00 | 0.00 | 20 10 | | 1045 | |
| | 02/01/09 | 1,095.45 | Р | SLMM | 05 00 | 0 00 | 1.095.45 | 05/31/09 | 0 00 | 18 26 | 91 29 | 91 29 | |
| 000493 | Desk with retu | | | | 00 00 | 0.00 | 1,030 40 | 3010 1103 | 000 | 10.20 | 0,25 | 3123 | |
| | 04/20/09 | 2,738.75 | | | 07 00 | 0.00 | 2 738 75 | 05/31/09 | 0.00 | 32 60 | 65 21 | 65 21 | |
| | | _,, | • | | -, 00 | 0.00 | 410010 | 344 1100 | 0.00 | JE 30 | 00 21 | V3 Z I | |

ASRM
Depreciation Expense Report
As of June 30, 2009

| 95 NO | In Svc Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Ke) Cod |
|--|--|--|--|--|---|--|---|--|---|---|---|--|------------|
| | 1200 | | | | | | | | | | | | |
| | 1 = 1209 | aftu ara Hadai | | | | | | | | | | | |
| 00494 | 7 Office 2007 S | • | | CLADA | 05.00 | 0.00 | 701.01 | 05/31/09 | 0.00 | 12 03 | 24 06 | 24 06 | |
| 00405 | 05/01/09 | | | SLMM | 05 00 | 0 00 | 721.01 | 03/3 1/09 | 000 | 1203 | 24 00 | 24 00 | |
| 30495 | Indesign Prem | | | | | 0.00 | 4 007 46 | 05/04/00 | 0.00 | 20.62 | 61 25 | 61 25 | |
| 20400 | 05/15/09 | 1,837.46 | | SLIMIM | 05 00 | 0 00 | 1,837 40 | 05/31/09 | 0 00 | 30.63 | 0123 | 0123 | |
| 10496 | 1 Dell T3400 C | | | CLAM | 05.00 | 0.00 | 1,000,61 | 05/04/00 | 0.00 | 22.72 | 45 45 | 45 45 | |
| | 04/20/09 | 1,363.61 | | | 05 00 | 0 00 | 1,363 61 | 05/31/09 | 0.00 | 22.72 | 4040 | 4545 | |
| JU497 | 12 Dell T3400 | | | | 05.00 | 0.00 | 40.050.00 | 00/04/00 | 0.00 | 200.50 | 445.00 | 445.00 | |
| | 05/01/09 | 13,350 00 | Р | SLMM | 05 00 | 0 00 | 13,350 00 | 05/31/09 | 0 00 | 222 50 | 445 00 | 445 00 | |
| 00498 | 3 Zody Chairs | | _ | | | | | 0.710.1100 | | 00.05 | 47.70 | 47.70 | |
| | 04/30/09 | 2,003.52 | | | 07 00 | 0.00 | 2,003 52 | 05/31/09 | 0.00 | 23 85 | 47 70 | 47 70 | |
| 0499 | Redesign and | | | | | | | | | | | | |
| | 05/01/09 | 2,950 21 | | | 07 00 | 0 00 | 2,950.21 | 05/31/09 | 0 00 | 35 12 | 70 24 | 70 24 | |
| 0500 | Dell Computer | | | | | | | | | | | | |
| | 06/01/09 | 4,140 70 | | | 05 00 | 0.00 | 4,140 70 | | 0 00 | 69 01 | 69 01 | 69 01 | |
| 00501 | Captivate Soft | ware for Educa | itior | n Departme | ent | | | | | | | | |
| | 06/01/09 | 1,317 88 | Ρ | SLMM | 05 00 | 0 00 | 1,317 88 | | 0 00 | 21 97 | 21 97 | 21 97 | |
| 0502 | 3 Netbook Cor | nputers | | | | | | | | | | | |
| | 06/15/09 | 1,086 76 | Ρ | SLMM | 05 00 | 0 00 | 1,086 76 | | 0 00 | 18 11 | 18 11 | 18 11 | _ |
| Locati | on = 1209 | 981,952 37 | • | | | 0 00 | 981,952.37 | • | 502,081 48 | 8,304 69 | 58,190 66 | 560,272 14 | |
| | disposals | (75,981 52) | 1 | | | 0 00 | (75,981 52) | | (75,905 53) | ., | ,- | (75,905 53) | |
| | d transfers | (10,00102) | | | | | (10,00102 | ' | (, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | , , , | , |
| | Count = 63 | | | | | | | | | | | | |
| | - | | | | | | | | | | | | - |
| | d Cubtotal | 005 070 05 | | | | 0.00 | 00E 070 0E | | 406 175 05 | 8 304 60 | 59 100 66 | 484 366 61 | |
| | et Subtotal ount = 258 | 905,970 85 | | | | 0 00 | 905,970.85 | | 426,175 95 | 8,304.69 | 58,190.66 | 484,366 61 | |
| Co ocation | ount = 258 n = 1509 BUILDING | | _ | | | | | | | <u> </u> | | | |
| ocation 00192 | n = 1509 BUILDING 07/01/91 | 788,779 00 | | MF100 | 31 06 | 0 00 | 905,970.85 788,779.00 | | 426,175 95 424,646 84 | 8,304.69 2,086.72 | 58,190.66 25,040.60 | 484,366 61 | |
| ocation 00192 | ount = 258 n = 1509 BUILDING | 788,779 00 | | MF100 | | 0 00 | 788,779.00 | 05/31/09 | 424,646 84 | 2,086.72 | 25,040 60 | 449,687 44 | - |
| Co ocation 00192 00256 | ount = 258 a = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 | 788,779 00 PROVEMENTS 91,676 46 | S R | MF100 | 31 06 31 06 | | | 05/31/09 | | <u> </u> | | | - |
| Co ocation 00192 00256 | ount = 258 n = 1509 BUILDING 07/01/91 BUILDING IMI | 788,779 00 PROVEMENTS 91,676 46 | S R | MF100 | | 0 00 | 788,779.00 | 05/31/09 | 424,646 84 | 2,086.72 | 25,040 60 | 449,687 44 | - |
| Co ocation 00192 00256 | ount = 258 a = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 | 788,779 00 PROVEMENTS 91,676 46 | S R YS1 | MF100 FEM | | 0 00 | 788,779.00 91,676.46 | 05/31/09 | 424,646 84 | 2,086.72 | 25,040 60 | 449,687 44 | |
| Concation 00192 00256 00301 | ount = 258 n = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI | 788,779 00 PROVEMENTS 91,676 46 VAGEMENT S 21,639,00 | S R YS1 | MF100 FEM | 31 06 | 0 00 | 788,779.00 91,676.46 | 05/31/09 05/31/09 | 424,646 84 44,989 31 | 2,086.72 242.53 | 25,040 60 2,910 36 | 449,667 44 47,899 67 | |
| Concession 00192 00256 00301 | ount = 258 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 | 788,779 00 PROVEMENTS 91,676 46 VAGEMENT S 21,639.00 IPS | S R YS1 P | MF100 FEM SLHY | 31 06 15 00 | 0 00 | 788,779.00 91,676.46 21,639.00 | 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 | 2,086.72 242.53 | 25,040 60 2,910 36 | 449,667 44 47,899 67 | |
| Conception 00192 00256 00301 | Dunt = 258 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN | 788,779 00 PROVEMENTS 91,676 46 VAGEMENT S 21,639,00 | S R YS1 P | MF100 FEM SLHY | 31 06 | 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 | 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 | 2,086.72 242.53 120.22 | 25,040 60 2,910 36 1,442 60 | 449,687 44 47,899 67 18,753 80 | |
| Concession 00192 00256 00301 | punt = 258 D = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639.00 IPS 50,760 00 | S R YS1 P | MF100 FEM SLHY SLHY | 31 06 15 00 20 00 | 0 00 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 50,760.00 | 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 | 2,086.72 242.53 120.22 | 25,040 60 2,910 36 1,442 60 | 449,687 44 47,899 67 18,753 80 | |
| Concession 00192 00256 00301 00333 | punt = 258 n = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639.00 IPS 50,760 00 | S R YS1 P P | MF100 IEM SLHY SLHY SLHY | 31 06 15 00 | 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 | 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 | 2,086.72 242.53 120.22 211.50 | 25,040 60 2,910 36 1,442 60 2,538 00 | 449,687 44 47,899 67 18,753 80 27,918 00 | |
| Concession 00192 00256 00301 00333 | Dunt = 258 D = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 BUILDING RENO | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639.00 IPS 50,760 00 100,420 00 vation Project | S R YS1 P P | MF 100 FEM SLHY SLHY SLHY SŁMM | 31 06 15 00 20 00 20 00 | 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 50,760.00 100,420.00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 | 2,086.72 242.53 120 22 211 50 418 42 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 | |
| Concention 0192 0256 0301 0333 00418 00420 | punt = 258 n = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449,87 | S R YS1 P P | MF 100 FEM SLHY SLHY SLHY SŁMM | 31 06 15 00 20 00 | 0 00 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 50,760.00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 | 2,086.72 242.53 120.22 211.50 | 25,040 60 2,910 36 1,442 60 2,538 00 | 449,687 44 47,899 67 18,753 80 27,918 00 | |
| Concession 10192 10256 10301 100333 100418 100420 | punt = 258 D = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639.00 IPS 50,760 00 100,420 00 vation Project 174,449.87 | S R YS1 P P P - 20 R | MF100 FEM SLHY SLHY SLMM 07 SLMM | 31 06 15 00 20 00 20 00 15 00 | 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 | 2,086.72 242.53 120 22 211 50 418 42 969 17 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 | |
| Concation 10192 10256 100301 100333 100418 100420 100422 | punt = 258 D = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639.00 IPS 50,760 00 100,420 00 vation Project 174,449.87 ions 167,806.96 | S R YS1 P P P - 20 R | MF100 FEM SLHY SLHY SLMM 07 SLMM | 31 06 15 00 20 00 20 00 | 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676.46 21,639.00 50,760.00 100,420.00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 | 2,086.72 242.53 120 22 211 50 418 42 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 | |
| Concatior 00192 00256 00301 00333 000418 000420 000422 | punt = 258 Description = 258 D | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449,87 ions 167,806,96 verments | S R YS1 P P P 20 R | MF100 TEM SLHY SLHY SLMM 07 SLMM SLMM | 31 06 15 00 20 00 20 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 | |
| Conception | punt = 258 Description = 258 D | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449.87 ions 167,806.96 verments 9,703.00 | S R YS1 P P P 20 R | MF100 TEM SLHY SLHY SLMM 07 SLMM SLMM | 31 06 15 00 20 00 20 00 15 00 | 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 | 2,086.72 242.53 120 22 211 50 418 42 969 17 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 | |
| Conception | punt = 258 D = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 Building Impro 01/10/08 Parking Lot Lig | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449,87 ions 167,806,96 verments 9,703,00 ghbing | R YSI P P P P P R R | MF100 FEM SLHY SLHY SLMM 07 SLMM SLMM SLFM | 31 06 15 00 20 00 20 00 15 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 9,703.00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 323 43 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 53 91 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 646 87 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 970 30 | |
| Conception Conce | punt = 258 1 = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 Building Impro 01/10/08 Parking Lot Lig 03/01/08 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 PS 50,760 00 100,420 00 vation Project 174,449.87 ions 167,806.96 vements 9,703.00 ghting 1,525 00 | R YSI P P P P P R R | MF100 FEM SLHY SLHY SLMM 07 SLMM SLMM SLFM | 31 06 15 00 20 00 20 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 9,703.00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 | |
| Conception Conce | punt = 258 Description = 258 Description = 258 Description = 258 Description = 259 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 Building Impro 01/10/08 Parking Lot Lig 03/01/08 Building Reno 03/01/08 Building Reno | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449.87 ions 167,806.96 vements 9,703.00 ghbing 1,525 00 vation | R YSI P P P P P R R | MF100 FEM SLHY SLHY SLMM 07 SLMM SLMM SLFM | 31 06 15 00 20 00 20 00 15 00 15 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 9,703.00 1,525 00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 323 43 33.89 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 53 91 8.48 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 646 87 101.67 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 970 30 135.56 | |
| Coocatior 00192 00256 00301 00333 00418 00420 00422 00441 00442 | punt = 258 1 = 1509 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 Building Impro 01/10/08 Parking Lot Lig 03/01/08 Building Reno 04/15/08 | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449,87 ions 167,806,96 vements 9,703,00 ghting 1,525 00 vation 985 00 | S RYSI P P P P P P R R R | MF100 FEM SLHY SLHY SLMM 07 SLMM SLMM SLFM SLFM | 31 06 15 00 20 00 20 00 15 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 9,703.00 1,525 00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 323 43 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 53 91 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 646 87 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 970 30 | |
| Coocatior 00192 00256 00301 00333 00418 00420 00422 00441 00442 | punt = 258 Description = 258 Description = 258 Description = 258 Description = 259 BUILDING 07/01/91 BUILDING IMI 01/01/93 ENERGY MAI 07/01/96 14 HEAT PUN 12/01/98 04/16/07 Building Reno 06/01/07 2007 Renovat 10/01/07 Building Impro 01/10/08 Parking Lot Lig 03/01/08 Building Reno 03/01/08 Building Reno | 788,779 00 PROVEMENTS 91,676 46 NAGEMENT S 21,639,00 IPS 50,760 00 100,420 00 vation Project 174,449,87 ions 167,806,96 vements 9,703,00 ghting 1,525 00 vation 985 00 | S RYSI P P P P P P R R R | MF100 FEM SLHY SLHY SLMM 07 SLMM SLMM SLFM SLFM | 31 06 15 00 20 00 20 00 15 00 15 00 15 00 | 0 00 0 00 0 00 0 00 0 00 0 00 0 00 | 788,779.00 91,676 46 21,639 00 50,760 00 100,420 00 174,449 87 167,806 96 9,703.00 1,525 00 | 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 05/31/09 | 424,646 84 44,989 31 17,311.20 25,380 00 5,831 09 12,599 43 8,390 35 323 43 33.89 | 2,086.72 242.53 120 22 211 50 418 42 969 17 932 27 53 91 8.48 | 25,040 60 2,910 36 1,442 60 2,538 00 5,021 00 11,629 99 11,187 13 646 87 101.67 | 449,687 44 47,899 67 18,753 80 27,918 00 10,852 09 24,229 42 19,577 48 970 30 135.56 | |

ASRM

Depreciation Expense Report As of June 30, 2009

Book = Internal FYE Month = June

| In Svc Sys No_Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Pnor Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Cod |
|---|------------------------------|----|--------------|----------------|--------------------------|----------------------|--------------|-----------------------------|--------------------------|-----------------------------|----------------------------|--------------|
| Location = 1509 Less disposals and transfers Count = 0 | 1,411,884 29 | • | | | 0 00 | 1,411,884 29 0 00 | | 539,567 96 0 00 | 5,07170 | 60,859 89 | 600,427 85 0 00 | |
| Net Subtotal Count = 11 | 1,411,884 29 | | | | 0 00 | 1,411,884 29 | | 539,567 96 | 5,071 70 | 60,859 89 | 600,427 85 | - |
| _ocation = 1509 R 000193 LAND | | | | | | | | | | | | |
| 07/01/91 | 421,280 00 | R | NoDep | | 0 00 | 421,280 00 | 05/31/09 | 0 00 | 0 00 | 0 00 | 0 00 | - |
| Location = 1509 | 421,280.00 | | | | 0 00 | 421,280.00 | | 0.00 | 0 00 | 0 00 | 0 00 | 1 |
| R Less disposals and transfers Count = 0 | 0.00 | | | | 0 00 | 0.00 | | 0 00 | | | 0.09 |) |
| Net Subtotal Count = 1 | 421,280 00 | - | | | 0 00 | 421,280.00 | | 0 00 | 0 00 | 0 00 | 0 00 | <u>-</u> |
| Location = F & S 000445 Color Prin 02/15/08 Location = F & S Less disposals and transfers Count = 0 | 1,041 14 1,041.14 0.00 | • | SLMM | 05 00 | 0 00 | 1,041 14 0 00 | 05/31/09 | 86 76 86 76 0 00 | 17.36 17.36 | 208 23 208 23 | 294 99 294 99 0 00 | -) - |
| Net Subtotal Count = 1 | 1,041 14 | | | | 0.00 | 1,041.14 | | 86 76 | 17.36 | 208 23 | 294 99 |) |
| Location = WASH 000299 GATEWA 02/01/96 | Y 2000 2,982.00 | Р | SŁHY | 05 00 | 0 00 | 2,982.00 | 04/30/09 | 2,982 00 | 0 00 | 0 00 | 2,982 00 |) d |
| 000319 COMPUT 10/01/97 | 6,756 90 | Р | SLHY | 05 00 | 0 00 | 6,756.90 | 05/31/09 | 6,756 90 | 0.00 | 0 00 | 6,756.90 |) |
| 000357 Dell Lap T 08/01/00 | 2,164 20 | Ρ | SLHY | 05 00 | 0 00 | 2,164 20 | 04/30/09 | 2,164 20 | 0 00 | 0 00 | 2,164 20 |) d |
| 000359 Network o 09/01/00 000384 poweredg | omputer system 9,256 41 | Ρ | SLHY | 05 00 | 0 00 | 9,256.41 | 04/30/09 | 9,256 41 | 0 00 | 0 00 | 9,256 41 | 1 d |
| 12/01/04 000385 optiplex p | 5,463.69 | | | 05 00 | 0 00 | 5,463 69 | 05/31/09 | 3,915 65 | 91 07 | 1,092 74 | 5,008 39 | 9 |
| 12/01/04 000415 Dell Lapto | 1,607 50 | Р | SLMM | 05 00 | 0 00 | 1,607 50 | 05/31/09 | 1,152 04 | 26 80 | 321 50 | 1,473 54 | 4 |
| 11/01/06 000440 Desktop (| 966 84 Computer - Eleanor | ſ | SLMM | 05 00 | | | 05/31/09 | 306 17 | 16.12 | 193 37 | 499.54 | |
| 01/15/08 000485 Dell Lapto | p Computer | | SLHY | 05 00 | | | 05/31/09 | 90 80 | 15 14 | 181 60 | 272.40 | |
| 01/15/09 000503 Dell Comp 06/15/09 | outer for Wash Staf | ff | SLMM | 05 00 05 00 | | 865.90 875.25 | 05/31/09 | 0 00 | 14 44 14.59 | 86.59 14.59 | 86 59 14.59 | |
| | | | | | | | | | | | | |

ASRM

Depreciation Expense Report As of June 30, 2009

Book = Internal FYE Month = June

| In Svc Sys No Date | Acquired Value | | Depr Meth | Est Life | Salv / 168(k) Sec 179 | Depreciable Basis | Prior Thru | Prior Accum Depreciation | Depreciation This Run | Current YTD Depreciation | Current Accum Depreciation | Key Code |
|--|----------------------------|-------------------|--------------|-------------|--------------------------|-----------------------------|---------------|-----------------------------|--------------------------|-----------------------------|-------------------------------|---------------------------------------|
| Location = WASH | 31,846 70 | - | | | 0 00 | 31,846 70 | | 26,624 17 | 178,16 | 1,890 39 | 28,514 56 | |
| Less oisposals and transfers Count = 3 | (14,402 61 |) | | | 0 00 | (14,402 61) | | (14,402 61) | | | (14,402 61) | |
| Net Subtotal Count = 7 | 17,444 09 | | | | 0 00 | 17,444 09 | | 12,221 56 | 178.16 | 1,890 39 | 14,11195 | |
| Grand Total Less disposals and transfers Count = 66 | 2,848,004 50 (90,384.13 | | | | 0 00 0 00 | 2,848,004 50 (90,384.13) | | 1,068,360 37 (90,308 14) | 13,571 91 | 121,149 17 | 1,189,509 54 (90,308 14) | · · · · · · · · · · · · · · · · · · · |
| Net Grand Total Count = 278 | 2,757,620 37 | - = | | | 0 00 | 2,757,620 37 | • | 978,052.23 | 13,571 91 | 121,149 17 | 1,099,201 40 | |

Report Assumptions -----

Report Name Depreciation Expense Source Report < Standard Report>

Calculation Assumptions

Short Year none

Include Sec 168(k) Allowance & Sec 179 No Adjustment Convention None

Key Codes

- a A depreciation adjustment amount is included in the reporting period
- b The asset's business-use percentage is less than 100%
- d The asset has been disposed
- The asset has switched from a MACRS table calculation to the MACRS formula calculation.
- The asset's depreciation has been limited by luxury auto rules
- m The asset's depreciation was calculated using the mid-quarter convention
- r The assets acquired value was reduced to arrive at the depreciable basis
- The asset has switched from declining-balance to a straight-line
- v The asset has switched to remaining value over remaining life due to ACE

Group/Sorting Criteria

Group = LOCATION

Include Assets that meet the following conditions

All FAS Assets

Sorted by Location (with subtotals), System No

| Form 8 | 8868 (Rev. 4-2009) | | | Page 2 |
|---|---|----------|-------------------------------|----------|
| Note. | ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo . Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed to are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co | Form 8 | 3868. | X |
| Type print | or THE AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE | Empl | oyer identification i | number |
| File by extended due data filing the return instruct | Number, street, and room or suite no. If a P.O. box, see instructions. 1209 MONTGOMERY HIGHWAY City, town or post office, state, and ZIP code. For a foreign address, see instructions. | For IF | RS use only | |
| | k type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 | | orm 5227 | rm 8870 |
| STOF | P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous | sly file | d Form 8868. | |
| Te ● If t | NANCY FRANKEL the books are in the care of ▶ 1209 MONTGOMERY HIGHWAY - BIRMINGHAM, A the blephone No. ▶ 205-978-5000 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box | | • | |
| box] | this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box and attach a list with the names and EINs of all | | | |
| 4 5 6 7 | For calendar year, or other tax year beginning | | 30, 2009 Change in accounting | g period |
| 8a b | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8a 8b | \$ | |
| с — | Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification | 8c | _ | /A |
| | penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the ue, correct, and complete, and that I am authorized to prepare this form. | best o | f my knowledge and be | lief, |
| Signat | ture ► Title ► CPA | Date | > | |

Form 8868

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

| • If you a | re filing for an Automatic 3-Month Extension, complete only Part I and check this box | | ightharpoons X | | | |
|---|--|---------------------|---|--|--|--|
| • If you a | re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this | form). | | | | |
| Do not co | omplete Part II unless you have already been granted an automatic 3-month extension on a previously fil | led For | m 8868. | | | |
| Part I | Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | | | | |
| A corpora | tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com | plete | | | | |
| Part I only | | • | ▶ □ | | | |
| - | corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an | exten: | sion of time | | | |
| | ome tax returns | | 5.5.1. 5. di.,,,5 | | | |
| noted bel (not autor you must | c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Charities & Nonprofits. | cally if nsolida | (1) you want the additional ated Form 990-T. Instead, | | | |
| Type or | Name of Exempt Organization | Empl | oyer identification number | | | |
| print | THE AMERICAN SOCIETY FOR REPRODUCTIVE | _ | | | | |
| File by the | MEDICINE | 04-2284338 | | | | |
| due date for filing your return See | Number, street, and room or suite no. If a P O. box, see instructions. 1209 MONTGOMERY HIGHWAY | | | | | |
| instructions | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | | | | | |
| | BIRMINGHAM, AL 35216 | | | | | |
| Check ty | pe of return to be filed (file a separate application for each return). | | | | | |
| X For | m 990 Form 990-T (corporation) Form 47 | 720 | | | | |
| For | m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 | 227 | | | | |
| For | m 990-EZ Form 990-T (trust other than above) Form 60 | 069 | | | | |
| For | m 990-PF | 370 | | | | |
| Teleph If the c | NANCY FRANKEL books are in the care of ▶ 1209 MONTGOMERY HIGHWAY - BIRMINGHAM, A cone No. ▶ 205-978-5000 FAX No. ▶ briganization does not have an office or place of business in the United States, check this box s for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all | ıs ıs for | r the whole group, check this | | | |
| ıs fo | quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt $FEBRUARY\ 15\ ,\ 2010\ $, to file the exempt organization return for the organization named a property the organization's return for. | | The extension | | | |
| 2 If th | sis tax year is for less than 12 months, check reason: Initial return Final return | | Change in accounting period | | | |
| 3a If th | is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | | | |
| | refundable credits. See instructions. | 3a | \$ | | | |
| | is application is for Form 990-PF or 990-T, enter any refundable credits and estimated | | | | | |
| | payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | | | |
| | ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, | | | | | |
| dep | osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). | \vdash | 37/3 | | | |
| See | instructions. | 3c | \$ N/A | | | |
| | | | | | | |