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Department of the Treasury

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

OMB No 1545-0047

ay have to use a copy of this return to satisfy state reporting requirements

Open to Public

| _ | | 2008 calendar year, or tax year beginning JUL 1, 2008 and ending | JUN 30, 2009 | mopection |
|--------------------------------|----------------------|---|--------------------------------------|--------------------------------------|
| | | | | |
| BC | heck if pplicable | C Name of organization | D Employer identific | ation number |
| _ | ∵ ∏Addres | USE HS THE FITTSBURGH CONFERENCE ON ANALITICAL | 1 | |
| <u>_</u> | _ change | print or CHEMISTRY AND APPLIED SPECTROSCOPY | <u> </u> | |
| | _Name _change | Doing Business As | 25-11 | .41360 |
| | Initial return | See Number and street (or P.O. box if mail is not delivered to street address) Room/si | lite E Telephone number | |
| | Termin- ation | Specific 300 PENN CENTER BLVD 332 | (412) | 825-3220 |
| | Amend | ad tions City or town, state or country, and ZIP + 4 | G Gross receipts \$ | 10,285,458. |
| | Applica | | H(a) Is this a group ret | |
| | pendin | | for affiliates? | Yes X No |
| | | 300 PENN CENTER BLVD. NO. 332, PITTSBURGH, | P H(b) Are all affiliates incli | |
| 1 7 | | empt status: X 501(c) (3 | | st (see instructions) |
| | | e: ► WWW.PITTCON.ORG | H(c) Group exemption | • |
| | | | ear of formation: 1950 M | |
| | | | ear of formation; 1930 M | State of legal domicile. FA |
| P | | Summary | TO A DEGREE | 15 |
| ě | 1 1 | Briefly describe the organization's mission or most significant activities: PITTCON | IS A REGISTER | ED |
| Governance | ' | TRADEMARK OF THE PITTSBURGH CONFERENCE ON AN | | |
| F | 2 (| Check this box 🕨 📖 if the organization discontinued its operations or disposed of n | nore than 25% of its assets | |
| Š | 3 1 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 8 |
| 9 | 4 1 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 8 |
| Sa f | 5 | Total number of employees (Part V, line 2a) | 5 | 10 |
| Ę | 6 | Total number of volunteers (estimate if necessary) | 6 | 597 |
| Activities & | | Total gross unrelated business revenue from Part VIII, line 12, column (C) | 7a | 0. |
| ⋖ | 1 | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. |
| | | | Prior Year | Current Year |
| - | 8 | Contributions and grants (Part VIII, line 1h) | 1110.100. | - Janoni I Jan |
| ž | ŀ | · · · · · · · · · · · · · · · · · · · | | |
| Revenue | l . | Program service revenue (Part VIII, line 2g) | 1,209,550. | <824,009.> |
| Fe. | Į. | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | |
| | l | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 2,610,745. | 1,265,709. |
| | | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 3,820,295. | 441,700. |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 1,076,650. | 1,249,805. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | |
| S | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 435,779. | 438,190. |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | |
| ĝ | p. | Total fundraising expenses (Part IX, column (D), line 25) | | |
| ற | | Other expenses (Par IX, colemns 4) (1941) | 275,703. | 295,776. |
| | 18 | Total expenses. Add lines 13-17 must equal Par IX column (A), line 25) | 1,788,132. | 1,983,771. |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | 2,032,163. | <1,542,071.> |
| 280 | | 8 MAY 1 9 2010 8 | Beginning of Year | End of Year |
| <u>a</u> | 20 | | 16,043,182. | 14,319,225. |
| ASS | 21 | Total labilities (Part X, Ine 16) Total liabilities (Part X, Inne 29, CD CA 5 0.57 | 434,430. | 499,263. |
| Net Assets or Fund Balances | 22 | Net assets or fund balances Subtract ine 21 from line 20 | 15,608,752. | 13,819,962. |
| | art II | Signature Block | 13,000,7321 | 13/013/3021 |
| <u> </u> | - | | nts, and to the hest of my knowledge | e and belief, it is true, correct. |
| | | Under pepalities of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete) Beclaration of preparer (other than officer) is based on all information of which preparer has any knowle | adge / | 1. |
| | | \\ \(\mathral{M}\) \(\lambda \) \(\lambda \) | 15/10 | 110 |
| <u>⊸</u> Sig | | Signature of officer | Date | 710 |
| ⊟Her | ·e | · - | Date | |
| . S | | X, OFFICER | | |
| | _ | Type or print name and title | | |
| ≕. ₁Pai∈ | ď | Preparer's Date | Check if Prepare | r's identifying number tructions) |
| | parer's | signature ZUGENZ J/ LOGAN 5/10/10 | employed > | |
| _, | | Firm's name (α ALPERN ROSENTHAL yours if | EIN ► | |
| ال | Only | self-employed). N339 SIXTH AVENUE. 8TH FL | | |
| Ŭ. | | PITTSBURGH, PA 15222-2525 | Phone no. ► 4 | 12-281-2501 |
| | y the IF | RS discuss this return with the preparer shown above? (see instructions) | | X Yes No |
| | 01 12-1 | | instructions. | Form 990 (2008) |
| در د | | EE SCHEDULE O FOR ORGANIZATION MISSION STATE | | |

THE PITTSBURGH CONFERENCE ON ANALYTICAL 25-1141360 CHEMISTRY AND APPLIED SPECTROSCOPY Page 2 Form 990 (2008) Part III | Statement of Program Service Accomplishments (see instructions) Briefly describe the organization's mission: TO SPONSOR AND SUSTAIN EDUCATIONAL AND CHARITABLE ACTIVITIES FOR THE ADVANCEMENT AND BENFIT OF SCIENCE ENDEAVOR. Did the organization undertake any significant program services during the year which were not listed on Yes X No the pnor Form 990 or 990-EZ? If "Yes", describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes", describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ 1,249,805. including grants of \$ 1,249,805.) (Revenue \$ (Code: TRANSFER TO RELATED ORGANIZATIONS FOR GRANTS TO UNIVERSITIES HIGH-SCHOOLS, AND OTHER NOT-FOR-PROFIT ORGANIZATIONS FOR THE EDUCATION AND ADVANCEMENT OF THE FIELDS OF ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY.) (Expenses \$ including grants of \$) (Revenue \$ (Code:) (Revenue \$ (Code:) (Expenses \$ including grants of \$ Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$

1,249,805. (Must equal Part IX, Line 25, column (B).)

Form **990** (2008)

Total program service expenses ▶ \$

| | , | | Yes | No |
|-----|---|------|----------|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | i | | |
| | If "Yes," complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | <u>X</u> |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and | | | |
| | reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice | | | |
| | 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 | | X |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? | | | |
| | If "Yes," complete Schedule D, Parts VI, VIII, 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 | | X |
| 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 | İ |
| 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 | | X |
| 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 1, 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 1, 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 | | <u> </u> |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | | |
| | disqualified person during the year? 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 | | | |
| | pnor 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 | | | Π |
| | contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | <u>L</u> | X |
| | | Form | 990 | (2008) |

Form 990 (2008) . CHEMISTRY AND APPLIED SPECTROSCOPY

Part IV Checklist of Required Schedules (continued)

25-1141360 Page 4

| | | | 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 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | 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 | L | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? | | | |
| | 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 | X | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 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)

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Form 990 (2008) Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 10 filed for the calendar year ending with or within the year covered by this return 2a $\overline{\mathbf{x}}$ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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)? 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. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с X 6a Did the organization solicit any contributions that were not tax deductible? 6a b If "Yes." did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b** Organizations that may receive deductible contributions under section 170(c). X a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes." indicate the number of Forms 8282 filed during the year 7d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal X benefit contract? 7e X 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g X h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h 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 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a 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? 10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

12a

10b

11a

11b

Section 501(c)(12) organizations. Enter N/A a Gross income from members or shareholders

amounts due or received from them.)

b Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Page 6

Form 990 (2008) CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Pa

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

| | Yes | No |
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Form 990 (2008)

CHEMISTRY AND APPLIED SPECTROSCOPY

25-1141360 Pa

Page 7

Part VIII 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

| (A) | y officer, director, truste | | | | | | (D) | (E) | (F) | |
|--------------------------------------|-----------------------------|----------|-----------------------|-------------|----------|---------------------------------|--------------|--|--|--|
| Name and Title | Average | | | Pos | | | | Reportable | Reportable | Estimated |
| | hours per week | director | Institutional frustee | all Officer | | Highest compensated Compensated | | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| EDWARD P. LADNER, JR. | 10 00 | ,, | | 37 | | | | | 0 | • |
| PRESIDENT | 10.00 | X | _ | X | ⊢ | - | <u> </u> | 0. | 0. | 0 |
| ANNETTE S. WILSON VICE PRESIDENT | 6.00 | x | | x | İ | | | 0. | 0. | 0 |
| JOHN A. VARINE | 0.00 | 1 | \vdash | <u> </u> | ┢ | - | | • | 0. | 0 |
| IMMEDIATE FORMER PRESIDE | 2.00 | x | | | | | | 0. | ٥. | 0 |
| WILLIAM R. SHARPE | 2.00 | + | \vdash | \vdash | t | | | † <u>-</u> - | · · | <u>`</u> |
| MEMBER | 2.00 | x | | | | | | 0. | 0. | 0 |
| ADRIAN C. MICHAEL | | | | | | | | | | |
| MEMBER | 2.00 | Х | | | 1 | | | 0. | 0. | 0 |
| DAVID F. PENSENSTADLER | | | | | | | | | | |
| MEMBER | 2.00 | X | | | | | | 0. | 0. | 0 |
| HUBERT C. MACDONALD | | | | | | | | | | _ |
| MEMBER | 2.00 | Х | <u> </u> | | | 丄 | $oxed{oxed}$ | 0. | 0. | 0 |
| RONALD G. BARGIEL | | | | | 1 | | | | | _ |
| TREASURER | 2.00 | X | <u> </u> | X | <u> </u> | ↓_ | <u> </u> | 0. | 0. | 0 |
| CHARLES W. GARDNER | 2 00 | | | ,, | | | İ | 0. | 0. | ١ , |
| ASSISTANT TREASURER SARAH L. SHOCKEY | 2.00 | ┝- | | X | ┢ | ╀ | ⊢ | 0. | U • | 0 |
| SECRETARY | 2.00 | | | x | | 1 | | 0. | 0. | 0 |
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CHEMISTRY AND APPLIED SPECTROSCOPY

25-1141360 Page 8

| | 990 (2008) CHEMISTR | | | | | | | | | <u>25-114</u> | <u> 113</u> | 360 | Pa | ge 8 |
|-----|---|-----------------|--|-----------------------|----------|----------|------------------------------|---------|---------------------------|-------------------------------|-------------|-----------|--------------|-------------|
| Par | t VII Section A. Officers, Directors, Tru | istees, Key Ei | mple | oyee | s, a | ınd | High | est | Compensated Employ | ees (continued) | _ | | | |
| | (A) | (B) | l | | (6 | C) | | | (D) | (E) | | (| F) | |
| | Name and title | Average | | | | | | | | Reportable | Estimated | | | - |
| | | hours | (C | heci | k all | that | app | ily) | compensation | compensation | | amo | | र्म |
| | | per week | ector | | | | | | from the | from related organizations | | compe | her Insat | IOD |
| | | | o di | E | | | ated | | organization | (W-2/1099-MISC) |) | • | n the | |
| | | | Individual trustee or director | institutional trustee | | စ္စ | npens | | (W-2/1099-MISC) | | | organ | | |
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| | | | | 턆 | Officer | eş eş | Highest compensated employee | Ē | | | | organ | zatio | ≀ns |
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| 1b | Total | | <u>l</u> | <u> </u> | <u> </u> | <u> </u> | ┕ | <u></u> | 0. | ļ ₍ | 0. | - | | 0. |
| 2 | Total number of individuals (including those | e in 1a) who re | ceiv | ed r | nore | tha | | 00. | | | | | | |
| | compensation from the organization | • | | | | | | | • | | • | | | 0 |
| | | | | | | | | | | • | | Y | es | No |
| 3 | Did the organization list any former officer, | director or tru | stee | e, ke | y er | nplo | уее, | or I | highest compensated e | mployee on | [| | | |
| | line 1a? If "Yes," complete Schedule J for s | such individual | • | | | | | | | | Ĺ | 3 | | X |
| 4 | For any individual listed on line 1a, is the su | um of reportab | ole c | omp | ens | atıo | n an | d ot | ther compensation from | the organization | Ľ | | _ | |
| | and related organizations greater than \$15 | 0,000? If "Yes, | , " cc | mpl | ete | Sch | edul | e J | for such individual | | Ļ | 4 | _ | X |
| 5 | Did any person listed on line 1a receive or a | accrue compe | nsat | tion : | fron | n an | y un | relat | ted organization for serv | rices rendered to | Ļ | | _ | |
| | the organization? If "Yes," complete Sched | lule J for such | pers | son | _ | | | | <u> </u> | | | 5 | | X |
| | tion B. Independent Contractors | | | | | | | | | | | | | |
| 1 | Complete this table for your five highest co | mpensated in | dep | ende | ent (| cont | tract | ors 1 | that received more than | \$100,000 of comp | ensa | ation fro | m | |
| | the organization. | | | | | | | | | | | | | |

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|------------------------------------|----------------------------|
| | GENERAL EXPO | |
| | CONTRACTOR | 688,236. |
| SHERATON CHICAGO HOTEL & TOWERS, 301 EAST | | |
| | HEADQUARTERS | 571,340. |
| SOCIETY FOR ANALYTICAL CHEMISTS OF PITTSBUR | | |
| | PROFESSIONAL SOCIETY | 550,000. |
| SPECTROSCOPY SOCIETY OF PITTSBURGH, C/O 2008 CHAIR HUB MACDONALD 150 SHERWOOD | PROFESSIONAL SOCIETY | 550,000. |
| EVENT TRANSPORTATION | TRANSPORTATION | |
| P.O. BOX E, FAIRFAX, VA 22031 | COMPANY | 462,959. |
| 2 Total number of independent contractors (including those in 1) who received motors from the organization ► 14 | ore than \$100,000 in compensation | |

25-1141360 CHEMISTRY AND APPLIED SPECTROSCOPY Page 9 Form 990 (2008) Part VIII Statement of Revenue (D) Revenue (B) (A) (C) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512. revenue revenue 513, or 514 Federated campaigns 1a 1 a **b** Membership dues 1b 1c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total, Add lines 1a-1f Business Code Program Service 2 a All other program service revenue Total, Add lines 2a-2f Investment income (including dividends, interest, and 624,412 624,412. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Secunties (II) Other 7 a Gross amount from sales of 2634781 assets other than inventory b Less: cost or other basis 4083202 and sales expenses <1448421 c Gain or (loss) <1448421.> <1448421 d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See a 7026265 Part IV, line 18 ь 5760556. b Less: direct expenses c Net income or (loss) from fundraising events 265 709 265 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue Total. Add lines 11a-11d 0.<824,009.>441,700.1,265,709. Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Form **990** (2008)

Form 990 (2008)

CHEMISTRY AND APPLIED SPECTROSCOPY

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).

| Do r 7b, 8 | not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---------------|---|-----------------------|---|---------------------------------------|---------------------------------------|
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the U.S. See Part IV, line 21 | 1,155,305. | 1,155,305. | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the U.S. See Part IV, line 22 | 68,000. | 68,000. | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the U.S. | | | | |
| | See Part IV, lines 15 and 16 | 26,500. | 26,500. | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 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 salanes and wages | 357,762. | | 357,762. | |
| В | Pension plan contributions (include section 401(k) | | | | |
| | and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 44,816. | | 44,816. | |
| 0 | Payroll taxes | 35,612. | | 35,612. | |
| 1 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal | | | | • |
| | Accounting | | | | |
| | Lobbying | - | | | |
| | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | 71,459. | | 71,459. | |
| 2 | Advertising and promotion | 791. | | 791. | |
| 3 | Office expenses | 35,678. | | 35,678. | |
| 4 | Information technology | | | | |
| 5 | Royalties | · | | | |
| 16 | Occupancy | 128,417. | · , , , , , , , , , , , , , , , , , , , | 128,417. | |
| 7 | Travel | | | | |
| 8 | Payments of travel or entertainment expenses | | | · · · · · · · · · · · · · · · · · · · | . / |
| • | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | 88. | | 88. | · · · · · · · · · · · · · · · · · · · |
| 80 | Interest | | | | • |
| .0 !1 | Payments to affiliates | | | | |
| . 1 | Depreciation, depletion, and amortization | 48,702. | | 48,702. | |
| 23 | Insurance | ==, | | | . = |
| 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.) | | | , | |
| _ | EQUIPMENT | 6,888. | | 6,888. | |
| a b | GRATUITIES | 1,635. | | 1,635. | · |
| _ | TRAINING | 1,530. | | 1,530. | · |
| c d | MISCELLANEOUS | 588. | | 588. | |
| _ | DUES AND SUBSCRIPTIONS | 0. | | | |
| e | | | | | |
| f | All other expenses | 1,983,771. | 1,249,805. | 733,966. | |
| 5 | Total functional expenses. Add lines 1 through 24f Joint Costs, Check here | 1,000,111. | 1,443,003. | , 33, 300 | |
| 26 | | | | | |
| | SOP 98-2. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation | | | | 5 000 (22 |

25-1141360 Page 10

Form 990 (2008)

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

25-1141360 Page 11

| Pal | スプ | Balance Sileet | | | | | | | | |
|-------------|--|---|--------------------------|-----|-----------------------|--|--|--|--|--|
| | | | (A) Beginning of year | | (B) End of year | | | | | |
| | 1 | Cash - non-interest-bearing . | 2,081. | 1 | | | | | | |
| | 2 | Savings and temporary cash investments | 4,202,001. | 2 | 2,735,471. | | | | | |
| | 3 | Pledges and grants receivable, net | | 3 | <u></u> | | | | | |
| | 4 | Accounts receivable, net | 298,883. | 4 | 160,000. | | | | | |
| | 5 | Receivables from current and former officers, directors, trustees, key | | | | | | | | |
| | | employees, or other related parties. Complete Part II of Schedule L | | 5 | | | | | | |
| | 6 | Receivables from other disqualified persons (as defined under section | · | | | | | | | |
| | | 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete | | | | | | | | |
| | | Part II of Schedule L | | 6 | | | | | | |
| ςς, | 7 | Notes and loans receivable, net | | 7 | | | | | | |
| Assets | 8 | Inventories for sale or use | | 8 | | | | | | |
| As | 9 | Prepaid expenses and deferred charges | 75,960. | 9 | 10,198. | | | | | |
| | ĺ | Land, buildings, and equipment: cost basis 10a 1,066,001. | | | | | | | | |
| | | Less: accumulated depreciation. Complete | | | | | | | | |
| | | Part VI of Schedule D 10b 894,875. | 142,514. | 10c | 171,126. | | | | | |
| | 11 | Investments - publicly traded securities | | 11 | • | | | | | |
| | 12 | Investments · other securities. See Part IV, line 11 | 11,321,743. | 12 | 11,242,430. | | | | | |
| | 13 | Investments · program-related. See Part IV, line 11 | | 13 | · · · · · · | | | | | |
| | 14 | Intangible assets | | 14 | | | | | | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | | | | | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 16,043,182. | 16 | 14,319,225. | | | | | |
| | 17 | Accounts payable and accrued expenses | 36,830. | 17 | 9,388. | | | | | |
| | 18 | Grants payable | | 18 | | | | | | |
| | 19 | Deferred revenue | 397,600. | 19 | 489,875. | | | | | |
| | 20 | Tax-exempt bond liabilities | | 20 | | | | | | |
| Liabilities | 21 | Escrow account liability Complete Part IV of Schedule D | | 21 | | | | | | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, | , , | | • | | | | | |
| | | highest compensated employees, and disqualified persons. Complete Part II | , | | | | | | | |
| | | of Schedule L | | 22 | | | | | | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | | | | | | |
| | 24 | Unsecured notes and loans payable | | 24 | | | | | | |
| | 25 | Other liabilities. Complete Part X of Schedule D | <u>.</u> | 25 | | | | | | |
| | 26 | Total liabilities. Add lines 17 through 25 | 434,430. | 26 | 499,263. | | | | | |
| | | Organizations that follow SFAS 117, check here X and complete | | | | | | | | |
| nces | | lines 27 through 29, and lines 33 and 34. | , | | | | | | | |
| | 27 | Unrestricted net assets | 15,608,752. | 27 | 13,819,962. | | | | | |
| 3al; | 28 | Temporanly restricted net assets | | 28 | | | | | | |
| Fund Bala | 29 | Permanently restricted net assets | | 29 | | | | | | |
| Ξ | } | Organizations that do not follow SFAS 117, check here and | , | | | | | | | |
| ō | | complete lines 30 through 34. | | | • | | | | | |
| Net Assets | 30 | Capital stock or trust principal, or current funds | | 30 | | | | | | |
| Ass | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | | | | | | |
| ĕ | 32 | Retained earnings, endowment, accumulated income, or other funds | 45 400 550 | 32 | | | | | | |
| Z | 33 | Total net assets or fund balances | 15,608,752. | | 13,819,962. | | | | | |
| | 34 | Total liabilities and net assets/fund balances | 16,043,182. | 34 | 14,319,225. | | | | | |
| Pa | rt XI | Financial Statements and Reporting | | | | | | | | |
| | | | 7 | | Yes No | | | | | |
| 1 | | ounting method used to prepare the Form 990: Cash X Accrual | _i Other | | 2a X | | | | | |
| 2a | | Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant? | | | | | | | | |
| b | | 2b X | | | | | | | | |
| С | | If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, | | | | | | | | |
| _ | | ew, or compilation of its financial statements and selection of an independent acco | | _1_ | 2c X | | | | | |
| за | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit | | | | | | | | | |
| ı. | | and OMB Circular A-133? | | | 3a X | | | | | |
| | | es," did the organization undergo the required audit or audits? | | | 3b | | | | | |
| 83201 | 1 12-18 | o-u8 | | | rom 330 (2008) | | | | | |

SCHEDULE A (Form 990 or 990-EZ)

POTITI 990 OF 990-E

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.

Public Charity Status and Public Support

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

Employer identification number 25-1141360

| Part I | Reason | for Public Char | ity Status (All organiz | ations mus | st complet | e this part | .) (see inst | ructions) | | | |
|-------------|---|-----------------------------|--|--------------|--|--------------------------|--|------------------------|--|--------------------|-------------|
| The organ | ization is not a | private foundation | because it is: (Please ch | eck only o | ne organız | ation.) | | - | | | |
| 1 📋 | | | s, or association of churc | | | | (b)(1)(A)(i) | | | | |
| 2 | A school des | cribed in section 17 | '0(b)(1)(A)(ii). (Attach Sci | hedule E.) | | | | | | | |
| з 🗔 | | | tal service organization of | | n section | 170(b)(1)(| A)(iii). (Att | ach Sche | dule H.) | | |
| $\vec{a} =$ | • | • | operated in conjunction | | | | | | • | e hospital's name. | |
| · | city, and state | _ | | | | | | 1-7(·/(· ·/(··· | ,, | ,, | |
| 5 🗌 | • | | benefit of a college or ur | nversity ov | vned or or | erated by | a governr | nental uni | describe | d in | — |
| 5 | _ | (b)(1)(A)(iv). (Comple | | | | , o. u.ou b, | a govon | | . 40001150 | 4 111 | |
| • 🗀 | | | ent or governmental unit | describer | l in sectio | n 170(h)(1 | WAW) | | | | |
| 7 | | _ | eives a substantial part | | | | | r from the | accord o | ublic decembed in | |
| <i>'</i> | • | • | · | oi its supp | OIL HOIH a | governine | intai uniit u | i iioiii liile | general p | nnic described in | |
| • | section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) | | | | | | | | | | |
| 8 🖳 | - | | | | | | L. 4 | | | -l 4- 4 - | |
| 9 X | • | | eives: (1) more than 33 1 | | | | | | | • | |
| | | | nctions · subject to certa | | | | | | | - | |
| | | | axable income (less sect | ion 511 ta | x) from bu | sinesses a | icquirea b | y tne orga | inization a | rter June 30, 1975 | <i>'</i> - |
| 40 [| | 509(a)(2). (Complete | • | | | | - F00(-)/ | N (a.a | A | | |
| 10 | • | - | perated exclusively to te | • | - | | | | • | | _ |
| 11 📖 | J | • | perated exclusively for the | | • | | • | | • | • | ř |
| | - | • • • | ations described in secti | | | |). See sec | tion 509(| a)(3). Ched | ok the box that | |
| | | | organization and compl | | | | | | | | |
| | a Type I | | - /1 | | | tionally int | • | | | Type III - Other | |
| e [] | , | • | at the organization is not | | • | - | • | | | | ı |
| _ | | - | han one or more publicly | | - | | | | 3(a)(1) or s | ection 509(a)(2). | |
| f | • | | tten determination from t | the IHS tha | atitisaly | pe i, Type | II, or Type | 9 111 | | | |
| | | rganization, check t | | | | | | • | • | | |
| g | , - | | organization accepted ar | | | • | | - | | [V] | |
| | | • | directly controls, either al | one or tog | etner with | persons c | iescribed | in (ii) and (| iii) below, | | No |
| | • | | upported organization? | | | | • | | | 11g(i) | — |
| | • • | • | n described in (i) above? | | _ | | | | | 11g(ii) | — |
| | | | person described in (i) o | | | | | | • | 11g(iii) | |
| h | Provide the f | ollowing information | about the organizations | the organ | ization su | oports. | | | | | |
| | | | (III) Tunn of | T | | | | T | . 1 | | |
| (i) Name | of supported | (ii) EIN | (iii) Type of organization | | rganization sted in your | (v) Did you organizat | | (vi) Is organizatio | | (vii) Amount of | |
| org | anızatıon | | (described on lines 1-9 | | document? | | | (i) organız U.S | ed in the | support | |
| | | | above or IRC section | Yes | No | Yes | No | Yes | I No | | |
| | | ļ | (see instructions)) | res | NO | 162 | 140 | 165 | 100 | | |
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| | | | | | | | | | + | | — |
| Total | | | , | l . | · | | ١, | | . | | |

| Schedule | A (Form 990 or 990-EZ) 2008 Support Schedule for | Organizations | Described in | Sections 170(| b)(1)(A)(iv) an | a 170(b)(1)(A)(vi | Page 2 |
|------------------------------------|---|---|--|-----------------------------------|--------------------|---------------------|---------------------------------------|
| | (Complete only if you checked | | | | | | |
| Section | A. Public Support | | | | | <u>-</u> | · · · · · · · · · · · · · · · · · · · |
| Calenda | r year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| men | s, grants, contributions, and nbership fees received. (Do not ude any "unusual grants.") | | | | | | |
| ızatı | revenues levied for the organ- on's benefit and either paid to xpended on its behalf | | | | | | |
| fum | value of services or facilities ished by a governmental unit to organization without charge | | | | | | |
| 4 Tota | al. Add lines 1 - 3 | | | | | | |
| by e | portion of total contributions ach person (other than a | | ,- | | , | | |
| sup | ernmental unit or publicly ported organization) included ine 1 that exceeds 2% of the | | , | | • | ` . | |
| amo | ount shown on line 11, | | | | ```` | , , , , | |
| | lic Support. Subtract line 5 from line 4 | | | | | 1 | |
| Section | n B. Total Support | | , | , | | | |
| | r year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| | ounts from line 4 | | | | | | |
| | ss income from interest, | | | | | | |
| | dends, payments received on | | | | | 1 | |
| | unties loans, rents, royalties | | | | | i | |
| | income from similar sources | | | | | + | |
| | income from unrelated business vities, whether or not the | | | | | | |
| | iness is regularly carned on | | | 1 | | | |
| | er income. Do not include gain | | | | | | |
| | oss from the sale of capital | | | | | 1 | |
| | ets (Explain in Part IV.) | | | | | | |
| | al support. Add lines 7 through 10 | W | | , | | | |
| | ss receipts from related activities | etc (see instruct | ions) | | | 12 | |
| | at five years. If the Form 990 is fo | | | ırd, fourth, or fifth ta | x year as a secti | on 501(c)(3) | |
| orga | anization, check this box and stop | here | | | | | ▶□ |
| Sectio | n C. Computation of Pub | ic Support Pe | ercentage | | | | |
| 14 Pub | olic support percentage for 2008 (| line 6, column (f) o | divided by line 11, | column (f)) | - | 14 | % |
| 15 Pub | olic support percentage from 2007 | ' Schedule A, Par | t IV-A, line 26f | | | 15 | % |
| 16a 33 · | 1/3% support test - 2008. If the | organization did n | ot check the box | on line 13, and line ¹ | 14 is 33 1/3% or | more, check this bo | x and |
| | p here. The organization qualifies | | | | | | |
| sto | | raanization did n | ot check a boy on | line 13 or 16a, and | line 15 is 33 1/39 | % or more, check th | is box |
| sto | 1/3% support test - 2007. If the | nganization did n | or check a box on | | | | |
| stop b 33 and | stop here. The organization qua | lifies as a publicly | supported organi | zation | | | ▶□ |
| stop b 33 and and 17a 10% | | lifies as a publicly t - 2008. If the or | supported organı ganızatıon dıd not | zation check a box on line | 13, 16a, or 16b, | and line 14 is 10% | or more, |

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

Schedule A (Form 990 or 990-EZ) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Page 3 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.) Section A. Public Support (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions. merchandise sold or services performed, or facilities furnished in any activity that is related to the 6943444. 7499237. 7702014. 7574111. 7026265.36745071. organization's tax-exempt purpose 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 6943444. 7499237. 7702014. 7574111. 7026265.36745071. 6 Total. Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b 36745071. 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 6943444 7702014 7574111. 7026265.36745071. 7499237 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties 624,412. 757,818 952,260 256,436 491,086 3082012. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 256,436 491,086 757.818 952,260 624.412. 3082012. 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 carned on 12 Other income. Do not include gain or loss from the sale of capital 27,588 1,919 307 29,814 assets (Explain in Part IV.) 39856897. 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 92.1915 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 94.43 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g Section D. Computation of Investment Income Percentage 7.73 17 % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 5.47 18 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 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 $\triangleright \boxed{X}$ more 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 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

OMB No 1545-0047

Name of the organization

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

Employer identification number 25-1141360

| Par | t I Organizations Maintaining Donor Advise | ed Funds or Other Similar Funds | or Accounts. Complete | e if the |
|-----|--|--|---|-----------------|
| | organization answered "Yes" to Form 990, Part IV, line | | | |
| | | (a) Donor advised funds | (b) Funds and other ac | counts |
| 1 | Total number at end of year | | | |
| 2 | Aggregate contributions to (during year) | | | |
| 3 | Aggregate grants from (during year) | | | |
| 4 | Aggregate value at end of year | | | |
| 5 | Did the organization inform all donors and donor advisors in | writing that the assets held in donor advise | d funds | |
| | are the organization's property, subject to the organization's | exclusive legal control? | Ye: | s No |
| 6 | Did the organization inform all grantees, donors, and donor a | advisors in writing that grant funds may be | used only | |
| | for charitable purposes and not for the benefit of the donor of | or donor advisor or other impermissible priv | rate benefit? Yes | s No |
| Par | t II Conservation Easements. Complete if the or | ganization answered "Yes" to Form 990, Pa | art IV, line 7. | |
| 1 | Purpose(s) of conservation easements held by the organizat | ion (check all that apply). | | |
| | Preservation of land for public use (e.g., recreation or p | pleasure) Preservation of an hist | oncally important land area | l |
| | Protection of natural habitat | Preservation of certifie | d historic structure | |
| | Preservation of open space | | | |
| 2 | Complete lines 2a-2d if the organization held a qualified cons | servation contribution in the form of a cons | ervation easement on the la | ast day |
| | of the tax year. | | · · · · · · · · · · · · · · · · · · · | |
| | | | Held at the Er | nd 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 sti | ructure included in (a) | . 2c | |
| đ | Number of conservation easements included in (c) acquired | | 2d | |
| 3 | Number of conservation easements modified, transferred, re | eleased, extinguished, or terminated by the | organization during the tax | able |
| | year ▶ | | | |
| 4 | Number of states where property subject to conservation ea | | | |
| 5 | Does the organization have a written policy regarding the pe | eriodic monitoring, inspection, violations, an | | г, |
| _ | enforcement of the conservation easements it holds? | | L Ye | s LNo |
| 6 | Staff or volunteer hours devoted to monitoring, inspecting, a | - | · | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and | _ | | |
| 8 | Does each conservation easement reported on line 2(d) abo | ve satisfy the requirements of section 170(| (1)(4)(0)(i) Ye | s No |
| 9 | and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservat | tion accoments in its revenue and evinence | | |
| 9 | include, if applicable, the text of the footnote to the organization | | | |
| | conservation easements. | ation's imanicial statements that describes t | rie organization s accounti | ig ioi |
| Pai | rt III Organizations Maintaining Collections of | of Art. Historical Treasures, or Ot | her Similar Assets. | |
| | Complete if the organization answered "Yes" to Form | | | |
| | | · — · · · · · · · · · · · · · · · · · · | | |
| 1a | If the organization elected, as permitted under SFAS 116, no | ot to report in its revenue statement and ha | lance sheet works of art. h | ıstorıcal |
| | treasures, or other similar assets held for public exhibition, e | | | |
| | the footnote to its financial statements that describes these | | , | |
| b | If the organization elected, as permitted under SFAS 116, to | | e sheet works of art, histor | ncal treasures. |
| _ | or other similar assets held for public exhibition, education, | | | |
| | these items: | | , | J |
| | (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 tro | easures, or other similar assets for financial | gain, provide | |
| | the following amounts required to be reported under SFAS | | | |
| а | Revenues included in Form 990, Part VIII, line 1 | <u>-</u> | ▶ \$ | |
| b | Assets included in Form 990, Part X | | > \$ | |
| | , | | | |

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

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Page 2 Schedule D (Form 990) 2008 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research Other b Preservation for future generations Provide 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 raise funds rather than to be maintained as part of the organization's collection? Yes Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or Part IV 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 ☐ Yes No on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e 1f Ending balance Yes 2a Did the organization include an amount on Form 990, Part X, line 21? No b If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. (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 f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment 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 Yes No (i) unrelated organizations 3a(i) 3a(ii)

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIV the intended uses of the organization's endowment funds

| Part VI Investments - Land, Buildir | ngs, and Equipment. Se | ee Form 990, Part X, line 1 | 0. | |
|--|--------------------------------------|------------------------------------|--|----------------|
| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Depreciation | (d) Book value |
| 1a Land | | | \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| b Buildings | | | | |
| c Leasehold improvements | | 43,461. | 40,887. | 2,574. |
| d Equipment | | 1,022,540. | 853,988. | 168,552. |
| e Other | | | | |
| Total. Add lines 1a-1e. (Column (d) should equal | Form 990, Part X, column (B). | line 10(c)) | • | 171,126. |

CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Page 3 Schedule D (Form 990) 2008 Part VIII Investments - Other Securities. See Form 990, Part X, line 12 (a) Description of security or category (c) Method of valuation: (b) Book value Cost or end-of-year market value (including name of security) Financial derivatives and other financial products Closely-held equity interests Other 11,242,430. HEFFREN TILLOTSON/CONTINGENCY END-OF-YEAR MARKET VALUE Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶ 11,242,430. 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 Total. (Col (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

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.

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

25-1141360 Page 4 Schedule D (Form 990) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 441,700. Total revenue (Form 990, Part VIII, column (A), line 12) 1,983,771. Total expenses (Form 990, Part IX, column (A), line 25) 2 <1,542,071.> Excess or (deficit) for the year Subtract line 2 from line 1 3 3 <246,719.Net unrealized gains (losses) on investments 4 4 Donated services and use of facilities 5 5 6 Investment expenses 6 Prior period adjustments 7 7 Other (Describe in Part XIV) 8 8 Total adjustments (net). Add lines 4-8 < 246,719.9 <1,788,790.> Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 7,161,327. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 2a 1,205,790. b Donated services and use of facilities 2b 2c c Recovenes of prior year grants 5,760,556. d Other (Describe in Part XIV) 2d 6,966,346. 2e e Add lines 2a through 2d 194,981. Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 246,719. 4b **b** Other (Describe in Part XIV) c Add lines 4a and 4b 246,719. 441,700. 5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 8,950,117. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 1,205,790. a Donated services and use of facilities 2a 2b b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 2c 5,760,556. 2d d Other (Describe in Part XIV) 6,966,346. e Add lines 2a through 2d 1,983,771. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4b c Add lines 4a and 4b 4c 1,983,771. Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b PART XII, LINE 2D - OTHER ADJUSTMENTS: DIRECT SPECIAL EVENT EXPENSES: 5760556. PART XII, LINE 4B - OTHER ADJUSTMENTS: NET UNREALIZED LOSS ON INVESTMENT: 246719. PART XIII, LINE 2D - OTHER ADJUSTMENTS:

| Schedule D (| Form 990) 2008 | | THE PITTSB CHEMISTRY | URGH AND | CONFER | ENCE SPEC | ON ANALYI TROSCOPY | CICAL | 25-1141360 | Page 5 |
|--------------|----------------|-------------|-------------------------------|-------------|--------|---------------------------------------|-----------------------|-------|---------------------------------------|--------|
| Part XIV | Supplement | al Inform | CHEMISTRY . ation (continued) | | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | EXPENSES: | 576 | 0556. | | | | | |
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Schedule F (Form 990)

Statement of Activities Outside the United States

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Name of the organization | | | |
|--------------------------|------------|----|--------|
| THRETTOTTE THE | CONFERENCE | ON | ANALYT |

Employer identification number

CHEMISTRY AND APPLIED SPECTROSCOPY

25-1141360

| Totals | Part I General Info | rmation on A | ctivities Out | tside the United States. | Complete if the organization answered " | Yes" |
|--|------------------------------|--|------------------|----------------------------------|---|--------------|
| grantees' eligibility for the grants or assistance, and the selection cntena used to award the grants or assistance? 2 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 (c) Number of (d) Activities conducted in region (is a program service, describe specific type of service(s) in region in the region in the region (b) Ypo) (ib, Lundraiang, program services, grants to recipients located in the region) BUROPE 0 0 SRANT MAKING GRANT MAKING 21,000. ASIA 0 0 SRANT MAKING SRANT MAKING 1,000. AUSTRALIA 0 0 DEANT MAKING SRANT MAKING 1,000. NORTH AMERICA 0 0 SRANT MAKING SRANT MAKING 2,500. NORTH AMERICA 0 SRANT MAKING SRANT MAKING 2,500. | | | | | | |
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| 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of offices in the region (b) Number of offices in the region (b) type) (i.e., fundrasing, program service, describe specific type) of service(s) in region EUROPE (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 21,000. ASIA (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 2,000. AUSTRALIA (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 1,000. MORTH AMERICA (0) 0 SRANT MAKING SRANT MAKING 2,500. | grantees' eligibility for th | he grants or assis | stance, and the | selection criteria used to award | the grants or assistance? | Yes No |
| 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of offices in the region (b) Number of offices in the region (b) type) (i.e., fundrasing, program service, describe specific type) of service(s) in region EUROPE (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 21,000. ASIA (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 2,000. AUSTRALIA (0) 0 SRANT MAKING SRANT MAKING SRANT MAKING 1,000. MORTH AMERICA (0) 0 SRANT MAKING SRANT MAKING 2,500. | | | | | | |
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| | Totals | <u> </u> | | ,` | | 26,500. |

Page 2

Schedule F (Form 990) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360

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

| | ļ |
|---|--|
| recipient who received more than \$5,000. Check this box if ho one recipient received more than \$5,000 | |
| e tnan | |
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| 25,000 | Iditiona |
| e than | 90) if ad |
| ed mo | 96 mro |
| receiv | e F-1 (F |
| ant who | Use Schedule F-1 (Form 990) if additional space is needed. |
| recipie | Use S |

| 1 (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) . |
|-------------------------------|--|---|---|-----------------------------|---------------------------------|-----------------------------------|--|---|
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| 1 1 | , | | | | | | | |
| 2 Enter total number of | organizations that are | Enter total number of organizations that are recognized as chantles | by the foreign country or for which the grantee or counsel has provided a | which the grante | se or counsel has pro | vided a | | |

Schedule F (Form 990) 2008

3 Enter total number of other organizations or entitles

section 501(c)(3) equivalency letter

25-1141360

Schedule F (Form 990) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY 25–1141360

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.

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

| (h) Method of valuation (book, FMV, appraisal, other) | | | | | | | |
|---|--------------|-------------|-------------|---------------|--|--|--|
| (g) Description of non-cash assistance | | | | | | | |
| (f) Amount of non-cash assistance | .0 | 0. | 0. | 0. | | | |
| (e) Manner of cash disbursement | нвск | неск | неск | CHECK | | | |
| (d) Amount of cash grant | 17,000,CHECK | 2,000.CHECK | 1,000.CHECK | 2,500,5 | | | |
| (c) Number of recipients | 15 | н | н | 2 | | | |
| (b) Region | EUROPE | ASIA | AUSTRALIA | NORTH AMERICA | | | |
| (a) Type of grant or assistance (b) Region recipients | EDUCATION | | | | | | |

THE PITTSBURGH CONFERENCE ON ANALYTICAL 25-1141360 Page 4 CHEMISTRY AND APPLIED SPECTROSCOPY Schedule F (Form 990) 2008 Part IV | 'Supplemental Information Complete this part to provide the information required by Part I, line 2, and any other additional information. THE GRANTS THAT ARE GIVEN ARE USED FOR LABORATORY EQUIPMENT. THE RECIPIENT PICKS THE EQUIPMENT AND THE EQUIPMENT IS ORDERED BY THE SCIENCE WEEK CHAIRMAN. THIS ASSURES WE GET GOOD PRICING AND ALSO THAT THE INTENDED EQUIPMENT IS ORDERED.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2008

Department of the Treasury Internal Revenue Service THE PITTSBURGH CONFERENCE ON ANALYTICAL **Employer identification number** Name of the organization CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360

| | Complete if the organization answer | | | | no 17 | |
|---|---|-------------------------------|--------------------|------------------------|--------------------------------|---------------------|
| | | | | | | |
| 1 Indicate whether the organization rais | | | | | | |
| a Mail solicitations | e Solicitat | ion of | non-g | overnment grants | | |
| b Email solicitations | f Solicitat | ion of | goven | nment grants | | |
| c Phone solicitations | g 🔲 Special | fundra | Isina e | events | | |
| d In-person solicitations | 3 — | | | | | |
| | | (| | | ***** | |
| 2 a Did the organization have a written of | | | | | _ | |
| key employees listed in Form 990, Pa | | | | | | |
| b if "Yes," list the ten highest paid indi | | | | | | be |
| compensated at least \$5,000 by the | organization. Form 990-EZ filers are | not re | quirec | to complete this tal | ole. | |
| | | ī | | | | |
| (i) Name of individual | | (iii) fundr | Did | (iv) Gross receipts | (v) Amount paid | (vi) Amount paid |
| or entity (fundraiser) | (ii) Activity | have cu | aiser istody | from activity | to (or retained by) fundraiser | to (or retained by) |
| or entity (turioralser) | | have cu or con contribu | trol of utions? | nom douvity | listed in col. (i) | organization |
| <u></u> | | _ | | | | |
| | | Yes | No | | | |
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| Total | <u> </u> | _ | | | | |
| 3 List all states in which the organization | on is registered or licensed to solicit | funds | or has | been notified it is ex | cempt from registrati | ion or licensing. |
| _ | | | | | | |
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule G (Form 990 or 990-EZ) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

| | | on Form 990-EZ, line 6a. List events with | | | | | | | | |
|-----------------|------|---|----------------------------|--|----------------------|---------------------|----------------|------------------|------------|-------------|
| | | | (a) Event #1 | | (b) Event #2 | (c) Other Events | (d |) Total | Event | |
| | | | CONFERENCE | | | NONE | | i col. (a | | |
| | | | FOR ANALYTIC | | | | 1 (700 | | | ugii |
| | | | (event type) | | (event type) | (total number) | 1 | col. | (CJ) | |
| Revenue | | | | | | | + | | | |
| ve. | _ | Drane receipts | 7,026,265. | | | | 1 7 | ,02 | 6 2 | 55 |
| ۳ | 1 | Gross receipts | 7,020,203. | | | | + ' | , 0 2 | 0,2 | |
| | _ | Less: Charitable contributions | | | | | ļ | | | |
| | 2 | Less: Charitable contributions | | | | | + | | | |
| | _ | Owen revenue (line 1 minus line 2) | 7,026,265. | | | | 7 | ,02 | 6 2 | 65 |
| \dashv | 3 | Gross revenue (line 1 minus line 2) | 7,020,203. | | | | + | , 02 | 0,2 | 03. |
| | | O-sh aman | | 1 | | | | | | |
| | 4 | Cash prizes | | | | | + | | | |
| . | _ | M | | | | | } | | | |
| ses | 5 | Non-cash prizes | | | | | + | | | |
| be | _ | 5 | 577 712 | 1 | | | | 57 | 7 7 | 1 2 |
| ă | 6 | Rent/facility costs | 577,713. | ├ | | | + | 31 | 7,7 | 13. |
| Direct Expenses | | 011 | E 100 040 | | | | - | 10 | າ ວ | 12 |
| ۵ | 7 | Other direct expenses | 5,182,843. | | | | 1 3 | ,18 | 4,0 | 43. |
| | | | | | | | . ₋ | 76 | Λ E | E C . |
| | 8 | Direct expense summary Add lines 4 through | 1 / In column (d) | | | > | 1 3 | ,76 | 0,5 | <u> </u> |
| | _ | | | | | | 4 | 26 | - 7 | 00 |
| Pa | 9 | Net income summary. Combine lines 3 and 8 III Gaming. Complete if the organization | in column (d) | 000 | Dort IV line 10 or | operated many than | 1 + | ,26 | <u> </u> | <u>09.</u> |
| Pa | יוו | \$15,000 on Form 990-EZ, line 6a. | answered res to rolli | 990, | raitiv, line 19, or | reported more than | | | | |
| | | \$15,000 on Form 990.EZ, line 6a. | 1 | (h | Pull tabs/Instant | | I (a) T | otal ga | mina | Δdd |
| en. | | | (a) Bingo | | o/progressive bingo | (c) Other gaming | | a) thro | | |
| Revenue | : | | | J.I.Ig | s, p. eg. ecc. e sge | | 100 (. | | 9 | (0) |
| æ | | _ | | 1 | | | 1 | | | |
| | 1 | Gross revenue | | - | | | + | | | |
| | _ | | | | | | | | | |
| es | 2 | Cash prizes | | ļ | | | | | | |
| ens | _ | | | | | | 1 | | | |
| Exp | 3 | Non-cash prizes | | | | | + | | | |
| Direct Expenses | | D. at the other contra | | | | | ł | | | |
| Öre | 4 | Rent/facility costs | | - | | <u> </u> | | | | |
| | | | | i | | | | | | |
| | 5 | Other direct expenses | <u> </u> | | | | | | | |
| | | | Yes% | | Yes % | Yes 9 | ٥ | .3 | . ` | |
| | 6 | Volunteer labor | ∐No | | No | | ┼ | , _' , | | ` . |
| | | | | | | | 1. | | | |
| | 7 | Direct expense summary. Add lines 2 through | h 5 in column (d) | | | • | ΄ — | | |) |
| | _ | | | | | _ | | | | |
| | 8 | Net gaming income summary. Combine lines | 1 and 7 in column (d) | | | | | | V | N. |
| | _ | | | | | | | | Yes | No |
| | | ter the state(s) in which the organization opera | - | | | | | <u> </u> | | |
| | | the organization licensed to operate gaming ac | ctivities in each of these | states | s? | • | | 9a | | |
| b | If " | 'No," Explain: | | | | | | | | |
| | _ | | | | | | | | | |
| | | | | | | | | <u> </u> | ļ | |
| | | ere any of the organization's gaming licenses r | evoked, suspended or te | ermina | ted during the tax | year? | | 10a | | |
| t | If " | 'Yes," Explain: | | | | | | ١, | | ` |
| | _ | | | | | | | 1 | | |
| | _ | | | | | | | <u> </u> | ļ | |
| 11 | | bes the organization operate gaming activities | | | | • | | 11 | <u> </u> | |
| 12 | | the organization a grantor, beneficiary or truste | ee of a trust or a member | r of a | partnership or othe | er entity formed to | | | <u> </u> | |
| | ad | minister chantable gaming? | | | | | | 12 | L | L |

| Schedule G (Form 990 or 990 EZ) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY 25-114: | <u> 136</u> | <u>0 Ρε</u> | age 3 |
|---|-------------|-------------|-------------|
| | | Yes | |
| 13 Indicate the percentage of gaming activity operated in: | | | |
| a The organization's facility | - 1 | | |
| b An outside facility % | | | |
| 14 Provide the name and address of the person who prepares the organization's gaming/special events books and records: | | | |
| Name ▶ | | | |
| Address ▶ | | | |
| 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? | 15a | | |
| b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address: | : | , | , |
| Name ▶ | | | |
| Address ▶ | ì | | , |
| 16 Gaming manager information: | | | ; |
| Name | | | |
| Gaming manager compensation \$ | Ì | | |
| Description of services provided ▶ | - | | |
| | | | |
| Director/officer Employee Independent contractor | ļ | | |
| 17 Mandatory distributions: | | , | |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to | | <u> </u> | |
| retain the state gaming license? | 17a | | |
| b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ | | | |

Schedule G (Form 990 or 990-EZ) 2008

| SCHEDULE 1 | | | Č | | | | | OMB No 1545-0047 |
|--|---|-----------------------------|--|---|---|---|--|--|
| (Form 990) | | | Governn | Governments, and Individuals in the U.S. | uals in the U.S. | • | | 2008 |
| Department of the Treasury Internal Revenue Service | | ▲ Сошрі | Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990. | n answered "Yes," on F ▶ Attach to Form 990. | " on Form 990, Pe n 990. | ırt IV, lines 21 or 22. | | Open to Public . Inspection |
| Name of the organization | on THE PITTSBURGH CONFER. CHEMISTRY AND APPLIED | SURGH CON AND APPL | ENCE ON SPECTRO | ANALYTICAL SCOPY | Ţ | | | Employer identification number 25-1141360. |
| Part General Inf | General Information on Grants and Assistance | d Assistance | | | | | | |
| 1 Does the organiza | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | substantiate the | e amount of the grants | or assistance, the | grantees' eligibility | / for the grants or ass | ıstance, and the selectı | ON X Vec |
| criteria used to av | critena used to award the grants or assistance / Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. | rance r cedures for mont | toring the use of grant | funds in the United | d States. | | |] |
| art II | 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 | overnments and | 1 Organizations in the | • United States. C | omplete if the orga | Inization answered "Y | 'es" on Form 990, Part | IV, line 21, for any |
| recipient th | recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed | 5,000. Check this | box if no one recipier | nt received more th | ian \$5,000. Use Pa | irt IV and Schedule I-1 | (Form 990) if additiona | il space is needed |
| 1 (a) Name and ad or gov | 1 (a) Name and address of organization or government | (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 |
| CHROMATOGRAPHY FORUM OF THE | RUM OF THE | | | | | | | |
| DELAWARE VALLEY - - NEWARK, DE 19711 | DELAWARE VALLEY - 1090 ELKTON ROAD - NEWARK, DE 19711 | | | 3,000. | 0. | | | DAL NO GARE AWARD |
| 0 1 | DRIVE, SUITE 300 | | | | • | | | |
| COLUMBIA, MD 21046 | 9 | | | 3,500. | 0 | | | WIGHT AWARD |
| SOCIETY FOR ELECTRO-ANALYTICAL CHEMISTRY - PARIS, FRANCE 7523 | RO-ANALYTICAL | | | 4,000. | 0 | | | EDUCATION |
| CHEMICAL HERITAGE FOUNDATION | FOUNDATION | | | | | | | |
| 4 | 19106 | | | 10,000. | 0. | | | HERITAGE AWARD |
| SOCIETY FOR ELECTRO-ANALYTICAL | RO-ANALYTICAL | | | | | | | |
| CHEMISTRY - IOWA CITY, | CITY, IA 52242 | | | 4,000. | 0 | | | EDUCATION |
| ACS DIVISION OF ANALYTICAL CHEMISTRY - 207 PEPPERMINT DRIVE | NALYTICAL EPPERMINT DRIVE - | | | | | | | |
| SEATTLE, WA 98103 | | | | 4,000. | 0 | | .65 | ACS AWARD SESSION |
| | Enter total number of section 501(c)(3) and government organizations | d government or | ganizations | | | | · | |
| 3 Enter total number HA For Privacy Act | Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice, see the In- | tion Act Notice. | see the Instructions | structions for Form 990. | | | | Schedule I (Form 990) 2008 |

25-1141360

Page 2

Schedule I (Form 990) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY

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.

| USe Schedule I-1 (Form 990) if additional space is needed. | Ď. | | | | |
|---|--------------------------|--------------------------|---------------------------------------|---|---|
| (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. |
| | | | | | • |
| AWARDS | 26 | 14,500. | 0. | | |
| SCIENCE EQUIPMENT | ਜ | 2,000. | 0. | | |
| EDUCATION | 4.5 | 51,500. | .0 | | |
| | | | | | |
| | | | | | |
| Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. | de the information | required in Part I, | line 2, and any other | additional information. | |
| SCHEDULE I, PART I, LINE 2: THE GRANTS | ANTS THAT | ARE | GIVEN ARE USED | FOR | |
| LABORATORY EQUIPMENT. THE RECIPIENT | T PICKS | THE EQUIP | EQUIPMENT AND T | THE EQUIPMENT | |
| IS ORDERED BY THE SCIENCE WEEK CHA | CHAIRMAN. TI | THIS ASSURES | WE GET | GOOD PRICING | |
| AND ALSO THAT THE INTENDED EQUIPMENT | - '' | IS ORDERED. | | | |
| | | | | | |

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Part II and Part III, Schedule I (Form 990)

Open to Public OMB No 1545-0047 2008

(h) Purpose of grant or assistance Inspection **Employer identification number** SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT 25-1141360 EEEA PLAQUES (g) Description of non-cash assistance appraisal, other) (f) Method of (book, FMV, Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) valuation 0 0 o. ó ö ö ö o. (e) Amount of assistance non-cash THE PITTSBURGH CONFERENCE ON ANALYTICAL (d) Amount of cash grant 4 798 1,000, 538. 200. 405. 2,027 2,170 1,549 CHEMISTRY AND APPLIED SPECTROSCOPY (c) IRC Code section of applicable (p) EIN VERNIER SOFTWARE & TECHNOLOGY (a) Name and address of organization or government 13979 SOUTHWEST MILIKAN WAY WAYNESBURG PLAQUES & GIFTS CYBER ED SCIENCE SOFTWARE AUDUBON NATURE INSTITUTE FORT ATKINSON, WI 53538 380 NORTH FAIRWAY DRIVE NORTH SHORE CARE SUPPLY VERNON HILLS , IL 60061 3985 COMMERCIAL AVENUE VERNON HILLS, IL 60062 NEW ORLEANS, LA 70178 901 JANESVILLE AVENUE WAYNESBURG, PA 15370 NORTHBROOK, IL 60062 165 EAST HIGH STREET Name of the organization 500 GREENVIEW COURT BEAVERTON, OR 97005 LEARNING-RESOURCES CHICO, CA 95927 ETA CUISENAIRE P.O. BOX 4327 P O BOX 3480 PartI

Enter total number of other organizations

Enter total number of Section 501(c)(3) and government organizations

SCHEDULE 1-1

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047

| SCHEDULE 1-1 (Form 990) | | Continua Attach to For | Continuation Sheet for Schedule I (Form 990) ttach to Form 990 to list additional information for | Continuation Sheet for Schedule I (Form 990) ach to Form 990 to list additional information | o) n for | | 2008 Open to Public |
|---|-------------------|--|---|---|---|--|---|
| | | Part II | Part II and Part III, Schedule I (Form 990) | dule I (Form 990). | | | Inspection |
| Name of the organization THE PITTSBURGH CHEMISTRY AND | SURGH AND 7 | CONFERENCE ON ANALYTICAL APPLIED SPECTROSCOPY | ANALYTICA SCOPY | 1 | | Employe 2 | Employer identification number $25-1141360$ |
| Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Orga | nizations in the U | .S. (Schedule I (Fo | rm 990), Part II.) | | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code 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 |
| CPO 80 NORTHWEST BOULEVARD NASHUA, NH 03061 | | | 370. | •0 | | | SCIENCE EQUIPMENT |
| DELTA EDUCATIONAL P O BOX 3000, 80 NORTHWEST BOULEVAR NASHUA, NH 03061 | | | 798. | .0 | | | SCIENCE EQUIPMENT |
| FREY SCIENTIFIC 80 NORTHWEST BOULEVARD NASHUA, NH 03061 | | | 3,381. | • 0 | | | SCIENCE EQUIPMENT |
| NSTA P O BOX 90214 WASHINGTON, DC 20090 | | | 1,369. | 0. | | | SCIENCE EQUIPMENT |
| PASCO SCIENTIFIC 10101 FOOTHILLS BOULEVARD ROSEVILLE, CA 95747 | | | 8,413. | 0. | | | SCIENCE EQUIPMENT |
| SCHOOL AIDS 9335 INTERLINE AVENUE BATON ROUGE, LA 70809 | | | 442. | 0 | | | SCIENCE EQUIPMENT |
| WINDTEK INC 10451 PEACHTREE STREET GIRARD, PA 16417 | | | 216. | 0 | | | SCIENCE EQUIPMENT |
| FLINN SCIENTIFIC INC P O BOX 219 BATAVIA, IL 60510 | | | 3,071. | 0. | | | SCIENCE EQUIPMENT |
| Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations | nd government org | ganizations | | | | ٠ | A A |
| 24 | perwork Reducti | on Act Notice, see th | e Instructions for | Form 990. | | | Schedule I-1 (Form 990) 2008 |

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047 Open to Public

1.6

Inspection

25-1141360

Employer identification number Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY Name of the organization

(h) Purpose of grant or assistance SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT (g) Description of non-cash assistance appraisal, other) (f) Method of (book, FMV, valuation 0. ٥. 0 . ٥. o ö 0 (e) Amount of assistance non-cash 753. 767. 735. 759. 340. 906. 1,052, 12,646. (d) Amount of cash grant (c) IRC Code section if applicable (p) EIN WASHINGTON HIGHWAY - WIRTZ, VA 745 STATE CIRCLE, P O BOX 1941 FISHER SCIENTIFIC COMPANY LLC 4400 SOUTH FEDERAL BOULEVARD (a) Name and address of organization or government LABORATORY SAFETY INSTITUTE P O BOX 850, 7195 BOOKER T THE MICROSCOPE STORE, LLC TURNING TECHNOLOGIES LLC 255 WEST FEDERAL STREET 2000 ALFRED NOBEL DRIVE STEVE SPANGLER SCIENCE 4500 TURNBERRY DRIVE YOUNGSTOWN, OH 44503 BIO-RAD LABORATORIES ENGLEWOOD, CO 80110 ANN ARBOR, MI 48106 HERCULES, CA 94547 192 WORCESTER ROAD APPLETON, WI 54912 HANOVER, IL 60133 NATICK, MA 01760 SCHOOL SPECIALTY SCHOOL-TECH INC P 0 BOX 1579 Part 1 24184

Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

² Enter total number of Section 501(c)(3) and government organizations

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Part II and Part III, Schedule I (Form 990).

Open to Public OMB No 1545-0047 Inspection

THE PITTSBURGH CONFERENCE ON ANALYTICAL

Employer identification number 25-1141360

(h) Purpose of grant or assistance SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT SCIENCE EQUIPMENT non-cash assistance (g) Description of (book, FMV, appraisal, other) (f) Method of valuation Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) 0. 0. 0 Ö ٥. ٠. ٥. Ö (e) Amount of non-cash assistance 699. 200. 254. 618. 405. 6,696. 11,956, 2,872 (d) Amount of cash grant CHEMISTRY AND APPLIED SPECTROSCOPY (c) IRC Code section if applicable (p) EIN SCIENCE KIT & BOREAL LABORATORIES P O BOX 5003 SCIENCE KIT & BOREAL LABORATORIES FISHER SCIENTIFIC COMPANY LLC (a) Name and address of organization or government NORTHWEST 7504 P O BOX 1450 WARD'S NATURAL SCIENCES HANOVER PARK, IL 60133 WARD'S NATURAL SCIENCE PA 19380 MINNEAPOLIS, MN 55485 777 EAST PARK DRIVE, 4500 TURNBERRY DRIVE PITTSBURGH, PA 15264 PITTSBURGH, PA 15264 ROCHESTER, NY 14692 Name of the organization TONAWANDA, NY 14151 APPLETON, WI 54912 VWR INTERNATIONAL SCHOOL SPECIALTY P O BOX 644312 P 0 BOX 644307 P O BOX 92912 WEST CHESTER, P O BOX 8030 P O BOX 2078 CYBER ED INC Part

Enter total number of other organizations

Enter total number of Section 501(c)(3) and government organizations

SCHEDULE I-1
(Form 990)
Department of the Treasury Internal Revenue Service

Name of the organization

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047
2008
Open to Public
Inspection

THE PITTSBURGH CONFERENCE ON ANALYTICAL

Employer identification number 25-1141360

(h) Purpose of grant or assistance EDUCATION EDUCATION SDUCATION EDUCATION SDUCATION EDUCATION SDUCATION EDUCATION (g) Description of non-cash assistance appraisal, other) (f) Method of (book, FMV, Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) valuation 0 Ö 。 ٥. ö ٥. ö ö (e) Amount of assistance non-cash 3,000. 000 2,500. 1,000 1,000, 1,000 1,500 1,500 (d) Amount of cash grant CHEMISTRY AND APPLIED SPECTROSCOPY (c) IRC Code section if applicable (p) EIN DUQUESNE UNIVERSITY, 600 FORBES AV 1093 GENERAL WASHINGTON MEMORIAL 825 NORTH CASS AVENUE, SUITE 304 BOULEVARD - WASHINGTON CROSSING, (a) Name and address of organization or government MICRO MATERIALS RESEARCH INC LABORATORY SAFETY INSTITUTE 19 BOWEN AVENUE, SUITE 100 SABIC INNOVATIVE PLASTICS IN 47712 CHESTERLAND, OH 44026 175 SCHEFFIELD DRIVE THE LEARNING KEY INC PITTSBURGH, PA 15282 IL 60558 192 WORCESTER ROAD MACRON SYSTEM INC ASPEX CORPORATION DELMONT, PA 15626 MEDFORD, MA 02155 NATICK, MA 01760 MOUNT VERNON, 1 LEXAN LANE P O BOX 306 CENSA INC WESTMONT, PA 18977 ACS LABS Part N

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of Section 501(c)(3) and government organizations

Enter total number of other organizations

SCHEDULE I-1
(Form 990)
Department of the Treasury Internal Revenue Service

Name of the organization

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

THE PITTSBURGH CONFERENCE ON ANALYTICAL

CHEMISTRY AND APPLIED SPECTROSCOPY

OMB No 1545-0047

2008

Open to Public inspection

Inspect Employer identification number 25-1141360

(h) Purpose of grant or assistance CONFERENCES CONFERENCES EDUCATION SDUCATION EDUCATION SDUCATION SDUCATION EDUCATION (g) Description of non-cash assistance (book, FMV, appraisal, other) (f) Method of Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) valuation 0 0 o. Ö o. ٥. Ö ö (e) Amount of assistance non-cash 1,000. 1,000. 1,000, 1,000, 2,000 1,000, 523,314 514,586 (d) Amount of cash grant (c) IRC Code section ıf applicable 25-6048968 501 (C)(3) 501 (C)(3) 25-6072976 (p) EIN SPECTROSCOPY SOCIETY OF PITTSBURGH CHEMISTS OF PITTSBURGH - 300 PENN 1093 GENERAL WASHINGTON MEMORIAL BOULEVARD - WASHINGTON CROSSING MILESTONE DEVELOPMENT SERVICES CENTER BLVD. - PITTSBURGH, PA (a) Name and address of organization or government SPECTROSCOPIC SOLUTIONS LLC DUPONT ROAD - WV ROUTE 892 THE SOCIETY FOR ANALYTICAL SABIC INNOVATIVE PLASTICS P O BOX 178, 17 SNOWDROP STRANASKA SCIENTIFIC LLC FORT COLLINS , CO 80527 MULLICA HILL, NJ 08062 POLYMER SYNERGIES LLC 300 PENN CENTER BLVD. 665 MILLBROOK AVENUE WASHINGTON, WV 26181 PITTSBURGH, PA 15235 THE LEARNING KEY INC RANDOLPH, NJ 07869 NEWTON, PA 18940 P O BOX 270334 P 0 BOX 456 PA 18977 Part 15235

Enter total number of other organizations

Enter total number of Section 501(c)(3) and government organizations

SCHEDULE O

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2008
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THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

Employer identification number 25-1141360

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND APPLIED SPECTROSCOPY, A PENNSYLVANIA NON-PROFIT ORGANIZATION.

CO-SPONSORED BY THE

SPECTROSCOPY SOCIETY OF PITTSBURGH AND THE SOCIETY FOR ANALYTICAL

CHEMISTS OF PITTSBURGH, PITTCON IS THE PREMIER ANNUAL CONFERENCE AND

EXPOSITION ON LABORATORY SCIENCE. PROCEEDS FROM PITTCON FUND SCIENCE

EDUCATION AND OUTREACH AT ALL LEVELS, KINDERGARTEN THROUGH ADULT.

PITTCON DONATES NEARLY A MILLION DOLLARS EACH YEAR IN THE FORM OF

SCIENCE EQUIPMENT GRANTS, RESEARCH GRANTS, SCHOLARSHIPS AND INTERNSHIPS

FOR STUDENTS, AWARDS TO TEACHERS AND PROFESSORS, AND GRANTS TO PUBLIC

SCIENCE CENTERS, LIBRARIES AND MUSEUMS.

FORM 990, PART VI, SECTION A, LINE 10: THE INDIVIDUAL ORGANIZATION'S

OFFICER REVIEWS THE FORM BEFORE THEY SIGN THE FORM 990 FOR SUBMISSION TO

THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS

PART OF THE THE PITTSBURGH CONFERENCE'S POLICY/GUIDELINES MANUAL. THE

POLICY STATES "COMMITTEE MEMBERS, A MEMBER'S BUSINESS, OR ANYONE IN A

MEMBER'S IMMEDIATE FAMILY SHOULD NOT ENGAGE IN ANY BUSINESS, NEGOTIATIONS,

TRANSACTIONS OR OTHER DEALINGS WITH ANY COMPETING SHOWS, OR AGENCIES,

AUTHORITIES, GOVERNMENTAL BODIES, CONTRACTORS, VENDORS OR OTHER ENTITIES

WITH WHOM THE CONFERENCE IS DEALING OR MAY REASONABLY BE EXPECTED TO BE

DEALING WITH IN THE FUTURE.". WHEN NEW MEMBERS ARE APPOINTED TO THE

CONFERENCE OR VENDORS ARE AWARDED CONTRACTS, THE PRESIDENT REVIEWS THE

APPOINTMENTS OR CONTRACTS AND DETERMINES IF THERE IS A POSSIBLE CONFLICT OF LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule 0 (Form 990) 2008

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SCHEDULE 0

(Form 990)

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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.

2008
Open to Public Inspection

Name of the organization

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

Employer Identification number 25-1141360

| INTEREST. IF THEY BELIEVE THERE IS A CONFLICT, THE ISSUE IS BROUGHT BEFORE |
|--|
| THE BOARD OF DIRECTORS FOR A FINAL DETERMINATION. |
| |
| FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS ARE ALL |
| VOLUNTEERS AND DO NOT RECEIVE ANY COMPENSATION. THE PAID EMPLOYEES ARE |
| REVIEWED ANNUALLY BY THE ORGANIZATION'S PRESIDENT AND OFFICE MANAGER. |
| COMPENSATION IS DECIDED BY THE BOARD OF DIRECTORS AND IS BASED ON |
| PERFORMANCE REVIEWS AND SALARY SURVEYS FOR COMPERABLE POSITIONS WITHIN THE |
| LOCAL LABOR MARKET. |
| |
| FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS |
| GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS |
| AVAILABLE TO THE PUBLIC. |
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Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Identification of Disregarded Entities

Part I

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

Open to Public Inspection 2008

10

OMB No 1545-0047

Employer identification number 25-1141360

Direct controlling

End-of-year assets

Total income 9

> Legal domicile (state or foreign country)

Primary activity <u>e</u>

<u>©</u>

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▶ See separate instructions. THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

Name, address, and EIN of disregarded entity Part II Identification of Related Tax-Exempt Organizations

| (A) | (8) | (c) | (<u>a</u>) | (E) | (F) |
|--|---------------------------|--------------------------|--------------|----------------------------------|--------------------|
| Name, address, and EIN | Primary activity | Legal domicile (state or | Exempt Code | Public charity | Direct controlling |
| of related organization | | foreign country) | section | status (if section 501(c)(3)) | entity |
| SPECTROSCOPY SOCIETY OF PITTSBURGH - | | | | | |
| 25-6048968, 300 PENN CENTER BOULEVARD, NO. | EDUCATION IN THE FIELD OF | | | | |
| 332, PITTSBURGH, PA 15235 | APPLIED SPECTROSCOPY | PENNSYLVANIA | 6 | 501 (C)(3) | N/A |
| THE SOCIETY FOR ANALYTICAL CHEMISTS OF | | | | | |
| PITTSBURGH - 25-6072976, 300 PENN CENTER | EDUCATION IN THE FIELD OF | | | | |
| BOULEVARD, NO. 332, PITTSBURGH, PA 15235 | APPLIED SPECTROSCOPY | PENNSYLVANIA | | ខុត | N/A |
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2008

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25-1141360

Page 2

THE PITTSBURGH CONFERENCE ON ANALYTICAL

CHEMISTRY AND APPLIED SPECTROSCOPY

Part III Identification of Related Organizations Taxable as a Partnership Schedule R (Form 990) 2008

| €, | General or x managing le partner? 5) Yes No | | | | (H) Percentage ownership | | | • | 990) 2008 |
|-------------|--|--|--|---|--|---|--|---|----------------------------|
| = | Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | | | | (G) Share of Fend-of-year assets | | - | | Schedule R (Form 990) 2008 |
| Ē | Disproportionate affocations? | | | | ļ | | | | Sch |
| <u> </u> | Share of end-of-year assets | | | | (F) y Share of total income | | - | | |
| _ | | | | | (E) Type of entity (C corp, S corp, or trust) | | | | |
| <u> </u> | Share of total income | | | | | | <u>.</u> | | - |
| | Predominant income (related, investment, unrelated) | | | | (D) Direct controlling entity | ; | | | |
| (E) | Predominant income (related, investment, unrelated) | | | | (C) Legal domicile (state or foreign country) | | | | |
| <u>0</u> | Direct controlling entity | | | rust | (B) Primary activity | | | | |
| <u>©</u> | Legal domicile (state or foreign country) | | | poration or | Pri | | - - - - - - - - - - | | |
| (8) | Primary activity | | | Identification of Related Organizations Taxable as a Corporation or Trust | Z c | | | | |
| (Y) | Name, address, and EIN of related organization | | | Part IV Identification of Related Org | (A) Name, address, and EIN of related organization | | | | 832162 12-23-08 |

THE PITTSBURGH CONFERENCE ON ANALYTICAL CHEMISTRY AND APPLIED SPECTROSCOPY

| Schedule R (Form 990) 2008 CHEMISTRY AND APPLIED SPECTROSCOPY | 25- | 25-1141360 | | Page 3 |
|--|------------------------|-----------------|---------|-------------|
| Part V Transactions With Related Organizations | | | | |
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV. | | | Yes | ž |
| 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? | | | | |
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity | | ₽ P | | × |
| b Gift, grant, or capital contribution to other organization(s) | | a | × | |
| c Gift, grant, or capital contribution from other organization(s) | | 우 | | × |
| d Loans or loan guarantees to or for other organization(s) | | 무 | | × |
| e Loans or loan guarantees by other organization(s) | | - | | × |
| Calca of concess to attend and the concess of the c | | * | | 7> |
| | | = 5 | | 4 > |
| grantiase of assets from other organization(s) | | 2 = | | ا لا |
| | | = | | × |
| | | | | |
| j Lease of facilities, equipment, or other assets from other organization(s) | | = | | × |
| k Performance of services or membership or fundraising solicitations for other organization(s) | | * | | × |
| l Performance of services or membership or fundraising solicitations by other organization(s) | | = | | × |
| m Sharing of facilities, equipment, mailing lists, or other assets | | 13 | | × |
| n Sharing of paid employees | | Ę | | × |
| o Reimbursement paid to other organization for expenses | | 9 | | × |
| | | 2 | | × |
| | | | | |
| q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) | | 두 | | ×× |
| 2 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 threshold | è | | |
| (A) | (8) | <u>(</u> | _ | |
| Name of other organization(s) | Transaction type (a·r) | Amount involved | nvolve | - I |
| (1) SPECTROSCOPY SOCIETY OF PITTSBURGH | Д | 51 | 514,586 | 86. |
| (2) THE SOCIETY FOR ANALYTICAL CHEMISTS OF PITTSBURGH | В | 523, | 3,3 | 314. |
| (6) | | | | |
| (4) | | | | ı |
| | | | | |

Schedule R (Form 990) 2008

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25-1141360 Page 4

THE PITTSBURGH CONFERENCE ON ANALYTICAL

CHEMISTRY AND APPLIED SPECTROSCOPY

Part VI Unrelated Organizations Taxable as a Partnership

Schedule R (Form 990) 2008

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.

| (A) (B) | (B) | (5) | (Q) | <u>(ii)</u> | (F) | (0) | (E) |
|------------------------------------|------------------|-------------------------------------|--|---------------------------------|---------------------------------------|----------------------------|------------------------------------|
| | | | | | | | |
| Name, address, and EIN of entty | Primary activity | Legal domicile (state or foreign | Are all parmers section 501(c)(3) organizations? | Share of end-of- year assets | Uispropor- tionate allocations? | amount in box 20 | General or managing partner? |
| | | | Yes No | - 1 | | (Form 1065) | Yes No |
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| | | | | | | Schedule R (Form 990) 2008 | 990) 2008 |

| Form 8868 (Rev 4-2009) | Page 2 | | | | | | | |
|---|---------|--|--|--|--|--|--|--|
| • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box | X | | | | | | | |
| Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filled Form 8868. | | | | | | | | |
| If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). | | | | | | | | |
| Part I Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). | | | | | | | | |
| Name of Exempt Organization Type of THUE DISTRIBUTION CONFEDENCE ON ANALYTICAL | umber | | | | | | | |
| PRINT THE FITTIBLIAN CONFERENCE ON ANALITICAL | | | | | | | | |
| File by the CHEMISTRY AND APPLIED SPECTROSCOPY 25-1141360 | | | | | | | | |
| Number, street, and room or suite no. If a P.O. box, see instructions. For IRS use only due date for 300 PENN CENTER BLVD, NO. 332 | | | | | | | | |
| filing the return See City, town or post office, state, and ZIP code. For a foreign address, see Instructions. | | | | | | | | |
| Instructions PITTSBURGH, PA 15235 | | | | | | | | |
| Check type of return to be filed (File a separate application for each return): | | | | | | | | |
| | m 8870 | | | | | | | |
| Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069 | | | | | | | | |
| STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. | | | | | | | | |
| TREASURER | | | | | | | | |
| • The books are in the care of ▶ 300 PENN CENTER BLVD. SUITE 332 - PITTSBURGH, PA 1523 | 5 | | | | | | | |
| Telephone No ► (412)825-3220 FAX No. ► | | | | | | | | |
| • If the organization does not have an office or place of business in the United States, check this box | | | | | | | | |
| • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, che | ck this | | | | | | | |
| box 🕨 📖 . If it is for part of the group, check this box 🕨 🔛 and attach a list with the names and EINs of all members the extension is fo | r. | | | | | | | |
| 4 I request an additional 3-month extension of time until MAY 15, 2010 | | | | | | | | |
| 5 For calendar year, or other tax year beginningJUL_1,2008, and endingJUN_30,2009 | · | | | | | | | |
| 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting | period | | | | | | | |
| 7 State in detail why you need the extension | | | | | | | | |
| ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN. | | | | | | | | |
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| nonrefundable credits. See instructions. 8a \$ b 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. | | | | | | | | |
| c 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. 8c \$ N/ | A | | | | | | | |
| Signature and Verification | | | | | | | | |
| Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belie it is true, correct, and complete, and that I am authorized to prepare this form | ef, | | | | | | | |
| Signature ▶ CPA Date ▶ 2/4//0 | | | | | | | | |
| Form 8868 (Rev. | 4-20091 | | | | | | | |

ALPERN ROSENTHAL 339 SIXTH AVE., PGH., PA 15222