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Department of the Treasury Internal Revenue Stervice

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)

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

OMB No 1545-0047 2008 Open to Public Inspection

			<u> </u>		
<u>A I</u>	or the 2008	B calendar year, or tax year beginning $9/01/08$, and ending $8/31/0$	9		
B 0	heck if applicab	Please C Name of organization ALPHA GAMMA RHO FRATERNITY		D Employ	er identification number
\square	ddress change	use IRS BETA EPSILON CHAPTER			
二	_	label or Dans Business As		23-7	7321941
\sqsubseteq	lame change	type Number and street (or P O box if mail is not delivered to street address)	Room/suite		ne number
LI LI	nitial return		Roomisuite		-785- <u>5</u> 891
٦,	ermination	Specific ZI7 N DROADWAI	- 		
\equiv		Instruc- City or town, state or country, and ZIP + 4		G Gross receipt	s\$ 196,146
	mended return	tions POPLAR BLUFF MO 63901		ļ.	
	pplication pend	F Name and address of principal officer		H(a) Is this a g	group return for
_				affiliates?	
				H(b) Are all af included	Yes No
				If "No," a	ttach a list (see instructions)
ī .	Fax-exempt s	status X 501(c) (7) ◀ (Insert no) 4947(a)(1) or 527]	
	Website. ▶			H(c) Group ex	temption number ▶ 0339
	Type of organization		Year of formation	·	State of legal domicile
•••••	art i		Tobi of formation		· otata ar lagar commune
		Summary			
	1 Briefl	y describe the organization's mission or most significant activities			
9					
띭					
ËΙ					
8	2 Chec	k this box Fig. 1 if the organization discontinued its operations or disposed of more than	25% of its assets		
ŏ		ber of voting members of the governing body (Part VI, line 1a)		3	
≪5 ∨2		ber of independent voting members of the governing body (Part VI, line 1b)		4	
Ë				5	
Activities & Governance		number of employees (Part V, line 2a)		6	
Ą		number of volunteers (estimate if necessary)		——————————————————————————————————————	
		gross unrelated business revenue from Part VIII, line 12, column (C)		7a	
	b Netu	inrelated business taxable income from Form 990-T, line 34	Т в	7b	0
			Prior Yo	ear	Current Year
<u>o</u>		ributions and grants (Part VIII, line 1h)		2 600	106 077
Revenue	9 Prog	ram service revenue (Part VIII, line 2g)	11	3,622	196,077
ě	10 Inves	stment income (Part VIII, column (A), lines 3, 4, and 7d)		134	69
œ	11 Othe	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12 Total	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11	3,756	196,146
	13 Gran	ts and similar amounts had PartiX, column (A), lines 1-3)			
	14 Bene	efits paid to or for members (Part IX, q elymn (A), line 4)			
		ries, other compensation, employee tegerits (Part IX, column (A), lines 5–10)			
enses	46a Drofe	essionariundrajsito restation, column (A), line 11e)			
ē	to Take	SSIGNATURATION OF THE STATE OF			
Expe		fund asing expenses (Part IX, column#d), line 25)	1 7	2,609	189,289
		r expenses (Ran) X optum (A), lines 11a-11d, 11f-24f)			
≘	18 Total	expenses Add Hites 19 17 (must equal Part IX, column (A), line 25)		2,609	189,289
₹	19 Reve	enue less expenses Subtract line 18 from line 12		8,853	6,857 End of Year
Se Se	18 Total 19 Reve 20 Total 21 Total 22 Net a art II		Beginning		
set	20 Total	assets (Part X, line 16)		1,002	701,918
وري الأراك	21 Total	l liabilities (Part X, line 26)		3,268	671,225
30	22 Net a	assets or fund balances. Subtract line 21 from line 20	8	7,734	30,693
<u>~~P</u>	art II	Signature Block			
		Under penalties of perjury, I declare that have examined this return, including accompanying schedules			
Щ		and belief it is fill correct, and complete Declaration of preparer (other than officer) is based on all info	ormation of which pr		
Sio	ın İ	A SUL		711	13/10
Ae.	re	Signature of officer		Date	
Ö.		RONALD E ANTHONY CPA ASST TR	5A-<		
U		Type or print name and title			
			1 2.		Preparer's identifying number
Pai	.a	Preparer's Date	Chect	(1)	(see instructions)
		signature 7/	13/10 emplo	yed ▶ 📙	
	parer's	Firm's name (or yours		EIN	>
US	e Only	if self-employed),		Phone	_
		address, and ZIP + 4		no 🕨	
Mav	the IRS di	scuss this return with the preparer shown above? (see instructions)			Yes No
		acy Act and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2008)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008) ALPHA GAMMA RHO FRATERNITY 23-7321941 Page 3 **Checklist of Required Schedules** Part IV Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 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 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 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 6 X Schedule D. Part I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. Х 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 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," 9 Х complete Schedule D, Part IV X 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 Х Parts VI, VII, VIII, IX, or X as applicable 11 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 Х 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the U S ? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 Х 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 18 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 20 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H Х Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 21 22 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24a X 24b-24d and complete Schedule K If "No," go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b

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

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or

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

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X

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Pa	art IV Checklist of Required Schedules (continued)		Yes	No
28	Duning the tax year, did any person who is a current or former officer, director, trustee, or key employee		100	
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			į
-	employee), or an indirect business relationship through ownership of more than 35% in another entity			ĺ
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			Ė
	Part IV	28a		Х
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Х
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		Х
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	į į		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? 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			l
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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			
		1		1 37

Earm 990 (2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
			_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			1	:
	U S Information Returns Enter -0- if not applicable	1a	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able	}	Ī	
	gaming (gambling) winnings to prize winners?	1 1	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	-	Ī	
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)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	у		ı	. 32
	this return?		3a		<u>X</u>
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 auth				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial	1.		v
	account)?		4a		X
þ	If "Yes," enter the name of the foreign country	-1			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ıĸ			
_	and Financial Accounts				v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	17	30		
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity		5c		
6-	Regarding Prohibited Tax Shelter Transaction? Did the organization solicit any contributions that were not tax deductible?		6a		X
6a	If "Yes," did the organization include with every solicitation an express statement that such contributions	Or.	 		
b	gifts were not tax deductible?	01	6b		
7	Organizations that may receive deductible contributions under section 170(c).		"		
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	ın			
а	\$75?	····	7a		Х
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 to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			<u></u>
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers		1		į
	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	>	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	\$			l
	required?		7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect	ion			É
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor	oring		1	ŀ
	organization, have excess business holdings at any time during the year?		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds				Ė
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	1 1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		Į.
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-{		Í
11	Section 501(c)(12) organizations. Enter	144-1			
a	Gross income from members or shareholders	11a	-[•	İ
b	Gross income from other sources (Do not net amounts due or paid to other sources against	111]	•
40-	amounts due or received from them)	<u> 11b </u>	12a	•	t
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	12b]	120		<u> </u>
_ b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1201		990	

AGR 07/13/2010 3 26 PM Pg 7 Form 990 (2008) ALPHA GAMMA RHO FRATERNITY 23-7321941 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body 1a 1b Enter the number of voting members that are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 Х supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х The governing body? Х Each committee with authority to act on behalf of the governing body? 8b h 9a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 Х 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Yes No X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give

	rise to conflicts?	120		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			l
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	<u> </u>	X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)			ŧ
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1
	with a taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			1
	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	

5 6	ction C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed NONE
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)
	available for public inspection. Indicate how you make these available. Check all that apply
	Own website Another's website Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest
	policy, and financial statements available to the public
20	State the name, physical address, and telephone number of the person who possesses the books and records of the
	organization ▶ RONALD ANTHONY CPA 217 N BROADWAY
:	POPLAR BLUFF MO 63901

573-785-5891

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if the or	rganization did not compe	ensate	any o	office	r, dı	<u>recto</u>	r, tru	stee, or key employee		
(A) Name and Title	(B) Average	Posi	ition ()) check	C) call ti	hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Tide	hours per week	Individual trustee or director		Officer		Highest compensated employee		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
PAUL POAG		1								
CO-PRES	5		<u> </u>	X		_		0	0	
WILLIAM HUTO										16
VP FINANCE	5			X	<u> </u>			0	0	0
WARREN WEATH										
CO-PRES	5	-	<u> </u>	Х	L_	 	<u> </u>	0	0	0
JOSH NEELY	1	ł	l		l	l	Ì	!		_
V-PRES	5	_	<u> </u>	X	<u> </u>	 	ļ	0	0	0
JUSTIN SHRAE							1	_	_	_
HOUSE MANAGE	5	_	-	X	<u> </u>	-	<u> </u>	0	0	
			ļ	+	-	┼—	 -			
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Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) .	(B)				2)		-6.3	(D)	(E)		(F)		
	Name and title	Average hours per week	or director		Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	ami comp fro orga	imated ount of other ensation im the nization	1	
			%	stee			nsate					related nizations		
				┝	_		ă				<u></u>			
												_		
1b	Total							<u> </u>						
2		viduals (including those	e in 1a) w	/ho re	eceiv	ed n	nore 1	than	\$100,000 in reportable con	npensation from the				
	organization ► 0							_			<u> </u>	Yes	s No	
3									ee, or highest compensated				х	
4	For any individual lis	? If "Yes," complete So sted on line 1a, is the si	um of rep	ortal	ole co	omp	ensat	tion :	and other compensation fro	m	<u> </u>		† <u> </u>	
	the organization and individual	related organizations	greater th	nan \$	150,	0003	If "Y	es,"	complete Schedule J for su	uch		,	X	
5	Did any person lister	d on line 1a receive or	accrue c	ompe	ensat	ion f	rom	any	unrelated organization for				X	
Soc	services rendered to tion B. Independent	the organization? If "Y	es," com	plete	Sch	edu	le J to	or su	uch person			<u> </u>	1 🏊 _	
1		for your five highest co	mpensat	ed in	depe	nde	nt co	ntrad	ctors that received more tha					
		(A) Name and business addres	ss						Descrip	(B) otion of services		(C) Compen	sation	
		·····												
	,								-					
2			including	thos	e ın '	1) wh	по гес	ceive	ed more than \$100,000 in			0		
DAA	compensation from	uie organization ►							- · · · · · · · · · · · · · · · · · · ·				0 (2008)	

23-7321941

Pa	rt V	III Statement of F	Revenue					<u> </u>	
						(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
		•					exempt	business	excluded from tax
							function revenue	revenue	under sections 512, 513, or 514
ર જ	1a	Federated campaigns	1a						
Contributions, gifts, grants and other similar amounts	, L	Membership dues	1b		[
후일		Fundraising events	1c			1			
E E	C	=	1d		———			:	
호흡	a	Related organizations							
Sis	8	Government grants (contributions)	10						
풀힐	f	All other contributions, gifts, grants,						:	
운히		and similar amounts not included at	L-!!L						
20	g	Noncash contributions included in li	nes 1a-1f \$		į				
<u> </u>	<u>h</u>	Total. Add lines 1a-1f			•				
흵					Busn. Code				
ᅙ	2a	MEMBERSHIP DUES				196,077	196,077		
8	b								
<u> Ş</u>	С								
اچ	d								
E	-				 			-	
E B	f	All other program service	revenue						
Program Service Revenue		Total. Add lines 2a–2f	10101100		•	196,077			
-	_ 9	Investment income (include	duna dunada -	do interes		190,077			
	3		aing aividen	ius, interesi	i, and	50	60		
		other similar amounts)				69	69	··· ·	
	4	Income from investment of	of tax-exem	pt bond pro	ceeds				· · · · · · · · · · · · · · · · · · ·
	5	Royalties							
		(i) I	Real	(II) P	ersonal	1			
	6a	Gross Rents							
	b	Less rental exps		ļ		1			
	С	Rental inc or (loss)		<u> </u>				,	
	d	Net rental income or (loss	5)		•				
	7a	Gross amount from (i) Se	curities	(11)	Other				
		sales of assets other than inventory							
	b	Less cost or other							
	_	basis & sales exps			1				
	С	Gain or (loss)							
	d	Net gain or (loss)			•	İ			
		Gross income from fundraisin	a ovente					······································	
0	oa		iy events			İ			
Ž.		(not including \$	4-)			į			
eve		of contributions reported on li							
Ř		See Part IV, line 18	a			I			
Other Revenu		Less direct expenses	b			ł			
ŏ		Net income or (loss) from		events	•			· · · · · · · · · · · · · · · · · · ·	
	9a	Gross income from gaming a	ctivities			1			
		See Part IV, line 19	а			!			
	b	Less direct expenses	b	L					<u></u>
	С	Net income or (loss) from	gaming ac	ti <u>vities</u>	•				
	10a	Gross sales of inventory,	less						
		returns and allowances	а		1				
	b	Less cost of goods sold	b	,					
		Net income or (loss) from	sales of in	ventory	>				
	Ť	Miscellaneous Re			Busn Code	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, , , , , , , , , , , , , , , , , , ,
	11a					İ	•		
	b					·			
	C	All ather							
	d	All other revenue			L				
	9	Total. Add lines 11a-11d		4 5 6 :	•				<u> </u>
	12	Total Revenue. Add lines	s 1n, 2g, 3,	4, 5, 6d, 7d	I, 8C,			_	_
		9c, 10c, and 11e			▶ 1	196,146	196,146	0	0

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).

	All other organizations must	(A)	(B)	(C)	(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	-			
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
	Legal Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17		,,		
f	· .				
g					
_	Advertising and promotion				
13	Office expenses	5,148		5,148	
14	Information technology				
15	Royalties				
16	Occupancy	73,117		73,117	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	37,924		37,924	
20	Interest	49,548		49,548	
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	23,552	C	23,552	
23	Insurance				
	0.1				
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)			<u> </u>	<u> </u>
a b					
C					
d					
9					
f	All other expenses		····································		
25	Total functional expenses. Add lines 1 through 24f	189,289		189,289	
26	Joint Costs. Check here Inf following	, , , , ,			
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

P	ârt X	Balance Sheet						
					(A) Beginning of year		(B) End of yea	r
	1	Cash—non-interest bearing			69,957	1	9	,085
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net				3		_
	4	Accounts receivable, net		Γ	-5,340	4		
	5	Receivables from current and former officers, directors, tru	istees,	key				
		employees, or other related parties. Complete Part II of Sc	hedule	· L		5		
	6	Receivables from other disqualified persons (as defined ur	nder se	ection	,			
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	Com	plete		1		
		Part II of Schedule L				6		_
2	7	Notes and loans receivable, net				7		
Assets	8	Inventories for sale or use				8		
As	9	Prepaid expenses and deferred charges				9		
`	10a	Land, buildings, and equipment cost basis	10a	787,038	,			
	ь	Less accumulated depreciation Complete				1		
		Part VI of Schedule D	10b	94,205	716,385	10c	692	<u>,833</u>
	11	Investments—publicly traded securities		11				
	12	Investments—other securities See Part IV, line 11		12				
	13	Investments—program-related See Part IV, line 11			·	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)	_		781,002	16	701	<u>,918</u>
	17	Accounts payable and accrued expenses		17				
	18	Grants payable				18		
	19	Deferred revenue				19	·	
	20	Tax-exempt bond liabilities		_		20		
<u>es</u>	21	Escrow account liability Complete Part IV of Schedule D		<u> </u>		21		
Liabilities	22	Payables to current and former officers, directors, trustees						
ap		employees, highest compensated employees, and disqual						
		persons Complete Part II of Schedule L	-	·	22			
	23	Secured mortgages and notes payable to unrelated third p	ļ_		23			
	24	Unsecured notes and loans payable	<u> </u>	500 050	24	601	005	
	25	Other liabilities Complete Part X of Schedule D		-	693,268	25	671	
	26	Total liabilities. Add lines 17 through 25			693,268	26	671	, 225
ces		Organizations that follow SFAS 117, check here ▶	and	1		1		
2	İ	complete lines 27 through 29, and lines 33 and 34.						
Balan	27	Unrestricted net assets		-		27		
8	28	Temporarily restricted net assets		-		28		
Fund	29	Permanently restricted net assets	. f	.		29		
屲		Organizations that do not follow SFAS 117, check her	₽ ▶ [<u>X</u>				
ō		and complete lines 30 through 34.		ľ		30		
Assets	30	Capital stock or trust principal, or current funds		}		30		
SS(31	Paid-in or capital surplus, or land, building, or equipment f			87,734	-	3.0	, 693
Ä	32	Retained earnings, endowment, accumulated income, or o	omer ii	inas	87,734			, 693
Net	33	Total net assets or fund balances			781,002	+		, 918
	34 art)	Total liabilities and net assets/fund balances (i Financial Statements and Reporting			7017002	<u> </u>	, , , ,	,,,,,,,
	a, t /	T mancial Statements and Reporting					Ye	s No
1	Ac	counting method used to prepare the Form 990 \overline{X} C	ash	Accrual Oth	ner			
2		ere the organization's financial statements compiled or revie					2a	X
		ere the organization's financial statements audited by an ind					2b	X
		Yes" to lines 2a or 2b, does the organization have a commi			oversight of			
		e audit, review, or compilation of its financial statements and					2c	
3		a result of a federal award, was the organization required to						
		e Single Audit Act and OMB Circular A-133?					3a	_ _
ı		Yes," did the organization undergo the required audit or aud	dits?				3b	

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. OMB No 1545-0047

Open to Public Inspection

	of the organization		Employer identification number				
Al	LPHA GAMMA RHO FRATERNITY						
BI	ETA EPSILON CHAPTER	<u> </u>		321941			
Pa	rt I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, P		counts	s. Complete if			
		(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	ne assets held in donor advised					
	funds are the organization's property, subject to the organization's exclus	ve legal control?		Yes	∐ No		
6	Did the organization inform all grantees, donors, and donor advisors in wi	iting that grant funds may be					
	used only for charitable purposes and not for the benefit of the donor or d	onor advisor or other					
	impermissible private benefit?			Yes	No		
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form	990, P	art IV, line 7			
1	Purpose(s) of conservation easements held by the organization (check al	I tha <u>t a</u> pply)					
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impo	rtant land	d area			
	Protection of natural habitat	Preservation of certified historic str	ucture				
	Preservation of open space						
2	Complete lines 2a-2d if the organization held a qualified conservation con	ntribution in the form of a conservation ease	ment				
	on the last day of the tax year		·				
			ļ	Held at the End	of the Year		
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
С	Number of conservation easements on a certified historic structure include	led in (a)	2c				
d	Number of conservation easements included in (c) acquired after 8/17/06		2d	<u> </u>			
3	Number of conservation easements modified, transferred, released, extin	guished, or terminated by the organization o	during				
	the taxable year						
4	Number of states where property subject to conservation easement is loc	eated					
5	Does the organization have a written policy regarding the periodic monito	ring, inspection, violations, and					
	enforcement of the conservation easements it holds?			∐ Yes	∟ No		
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	easements during the year 🔻 🛌 🔃 _					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ear	sements during the year 🕒 💄 🔔 _					
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section					
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			∐ Yes	∐ No		
9	In Part XIV, describe how the organization reports conservation easemer						
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that descri	bes				
	the organization's accounting for conservation easements	III A C C		A			
۲a	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to	Form 990 Part IV line 8	miliar /	455612.			
	Complete if the organization answered Tes to	1 0111 330, 1 art 14, line 0.			<u> </u>		
4.	If the account of the desired and a CEAC 440 and to report to	the review of statement and halance about w	orko of				
та	If the organization elected, as permitted under SFAS 116, not to report in art, historical treasures, or other similar assets held for public exhibition,			`			
	provide, in Part XIV, the text of the footnote to its financial statements that		iio sci vic	,,			
	provide, in that ATV, the text of the foothole to its illiancial statements that	r describes triese items					
h	If the organization elected, as permitted under SFAS 116, to report in its	revenue statement and balance sheet works	s of art.				
	historical treasures, or other similar assets held for public exhibition, educ						
	provide the following amounts relating to these items	sales, or recognist at farther arrest or public o	_, ,,,,,,,				
	(i) Revenues included in Form 990, Part VIII, line 1		•	≻ \$			
	(ii) Assets included in Form 990, Part X		ì	• • -			
2	If the organization received or held works of art, historical treasures, or o	ther similar assets for financial dain, provide	the	·			
_	following amounts required to be reported under SFAS 116 relating to the						
а	Revenues included in Form 990, Part VIII, line 1		•	≻ \$			
	Assets included in Form 990, Part X		•	• • • ·			
-				· ·	- -		

che		MA RHO FRATER		23-/3				age 2
Pa	rt III Organizations Maintaining					ts (continu	ied)	
3	Using the organization's accession and other retems (check all that apply)	ecords, check any of the fol	lowing that are a sig	nificant use of its coll	ection			
а	Public exhibition	d Loan o	r exchange program	s				
b	Scholarly research	e Other				_		
С	Preservation for future generations					_		
4	Provide a description of the organization's colle	ections and explain how the	y further the organiz	ation's exempt purpo	se in			
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to be	eceive donations of art, hist	orical treasures, or o	other similar		Yes	\Box	No
Do	ert IV Trust, Escrow and Custodi	al Arrangements Co	mplete if organ	ization answere	d "Yes" to F			
ra	Part IV, line 9, or reported a				u 100 to 1	o 000,		
								
та	Is the organization an agent, trustee, custodian	or other intermediary for co	ontributions of other	assets not		Yes	П.	No
	included on Form 990, Part X?					Tes	ш'	NO
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the following ta	ble			A		
					\vdash	Amoun		
¢	Beginning balance				1c			
d	Additions during the year				1d			
0	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on For	m 990, Part X, line 21?				Yes	_ <u> </u>	No
b	If "Yes," explain the arrangement in Part XIV							
*******	ert V Endowment Funds. Compl	ete if organization an	swered "Yes" to	Form 990, Par	t IV, line 10.			
	•	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Fou	r years	back
1a	Beginning of year balance							
	Contributions	-					*********	
~	Investment earnings or losses							
۰	-							
	Grants or scholarships				<u> </u>			
0	Other expenditures for facilities							
_	and programs							
Ť	Administrative expenses							
9	•			<u> </u>	L			
2	Provide the estimated percentage of the year							
	Board designated or quasi-endowment _	%						
b	Permanent endowment %							
	Term endowment ▶ %							
3a	Are there endowment funds not in the possess	sion of the organization that	are held and admini	stered for the				
	organization by					<u> </u>	Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)		
þ	If "Yes" to 3a(II), are the related organizations	listed as required on Sched	ule R?			3b		
4	Describe in Part XIV the intended uses of the							
Pa	art VI Investments—Land, Build	ings, and Equipment	See Form 990), Part X, line 10				
	Description of investment	(a) Cost or other basis	(b) Cost or ot	I	preciation	(d) Bool	k value	
		(investment)	basis (other)				
12	Land							
	Buildings		T					
	Leasehold improvements							
	•							
	Equipment		707	,038	94,205	6	92,	833
	Other I. Add lines 1a–1e (Column (d) should equal Fo	orm 990 Part Y column (P)		7 0 0 0	<u> </u>		92,	
, vta	i. Add intes Ta-Te (Column (d) should equal FC	nin 330, i ait A, column (D)	, 10(0/ /				<u> </u>	<u> </u>

Schedule D (Form 990) 2008 ALPHA GAMMA RHO FRATEI	RNITY	23-7321941	Page 3
Part VII Investments—Other Securities. See Form 990), Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
Financial derivatives and other financial products	 		
Closely-held equity interests			
Other			
			·· ·
		······································	-
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 99	0, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
			- Tharket Value
	 		
	 		
		<u>-</u>	
		·	
	-		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.	<u> </u>		
(a) Description			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	_	<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 25			
(a) Description of liability	(b) Amount		
Federal income taxes	671,225		
MORTGAGE LOAN	0/1,225		
	+		
	 		
	 		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	671,225		
In Part XIV, provide the text of the footnote to the organization's financial state		zation's liability for	
uncertain tax positions under FIN 48		·	

Sche	Jule D (Form 990) 2008 ALPHA GAMMA RHO FRATERNITY		23-732194	1	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to I	Finan	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	· · · · · · · · · · · · · · · · · · ·
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	L <u></u>
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements			1	·
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1		
а	Net unrealized gains on investments	2a		1	
þ	Donated services and use of facilities	2b	- · · · · · · · · · · · · · · · · · · ·		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
0	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	1 1	•	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses per R	eturr	1
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ı	1		
а	Donated services and use of facilities	2a			
þ	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c		1	
d	Other (Describe in Part XIV)	2d			
0	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	1	1	3_	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV)	4b	<u> </u>	∤ . '	
_	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	L
	rt XIV Supplemental Information lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	10.000	I.4. Port IV. Ispac 1h		
	b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and		14, Fait IV, illes ID		
311U 4	b, Fait V, line 4, Fait A, Fait Ai, line 6, Fait Aii, lines 20 and 40, and Fait Aii, lines 20 and	u 40			
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Schedule D (F	orm 990) 2008	Α	$_{ m LPH}$	IA (GAM	IMA	RH	[O :	FR/	^{1}TE	RN	ΙΙΤ	Y				23	- 73	21	941	-					Pa	ge 5
Schedule D (F Part XIV	Sup	pleme	ental	Info	rma	tion	(conf	linue	d)																			
	<u> </u>								,													_					-	-
•-			-		-	_			_	_	_	_	— ·		 -	_	_			_	_	_	_					
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information to Form 990**

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

2008

Open to Public

Name of the organization

ALPHA GAMMA RHO FRATERNITY BETA EPSILON CHAPTER Employer identification number 23 - 7321941

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

DEPRECIATION

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

ALPHA GAMMA RHO FRATERNITY BETA EPSILON CHAPTER

Attachment Sequence No Identifying number

	BETA EP	SILON CHAP	TER				23-	732	1941	
	ess or activity to which this form relates									
	NDIRECT DEPRECIATI		······································							
Pa	art I Election To Expens	•	-							
	Note: If you have a	ny listed propert	<u>y, complete Part V</u>	before you	com	<u>plete Pa</u>	rt I.		-	
1	Maximum amount. See the instruction	ons for a higher limit	for certain businesses					1_		250,000
2	Total cost of section 179 property pl	aced in service (see	instructions)					2		
3	Threshold cost of section 179 prope	rty before reduction i	n limitation (see instruction	ons)				3	ļ	800,000
4	Reduction in limitation Subtract line	3 from line 2 If zero	or less, enter -0-					4		
5	Dollar limitation for tax year Subtract line	4 from line 1 If zero or						5		
	(a) Description	of property	(b) Co	ost (business use	only)	(c) E	lected cos	<u> </u>		
6										
			<u></u>							
7	Listed property Enter the amount from	om line 29			7					••••••
8	Total elected cost of section 179 pro	operty Add amounts	in column (c), lines 6 and	1 7				8		
9	Tentative deduction Enter the small	ler of line 5 or line 8						9		
10	Carryover of disallowed deduction fi	om line 13 of your 20	007 Form 4562					10		
11	Business income limitation Enter th	e smaller of business	s income (not less than z	ero) or line 5 (s	ee ıns	tructions)		11		
12	Section 179 expense deduction Ad-	d lines 9 and 10, but	do not enter more than li	ne 11				12		
13	Carryover of disallowed deduction to			•	13					
Note	: Do not use Part II or Part III below for									
Pa	ert II Special Depreciation	on Allowance a	nd Other Deprecia	tion (Do no	t incl	<u>ude liste</u>	d prope	erty) ((See insti	ructions.)
14	Special depreciation allowance for c	jualified property (oth	er than listed property) p	laced in service	•					
	during the tax year (see instructions)						14		·
15	Property subject to section 168(f)(1)	election						15		
16	Other depreciation (including ACRS)						16	<u> </u>	23,552
Pε	art III MACRS Depreciati	on (Do not inclu	ide listed property.)	(See instru	ction	s.)				<u>. </u>
			Section A							
17	MACRS deductions for assets place	ed in service in tax ye	ars beginning before 200)8				17	<u> </u>	0
18	If you are electing to group any assets pla	iced in service during th	e tax year into one or more g	eneral asset acco	ounts, c	heck here	<u> </u>	<u> </u>		
	Section B—/	Assets Placed in Se	rvice During 2008 Tax	ear Using the	Gene	ral Depred	iation Sy	stem		
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciatio (business/investment use only-see instructions)		(e) (Convention	(f) Me	ethod	(g) Depre	ciation deduction
19a	3-year property									
b	5-year property									
C_	7-year property									
d	10-year property									
е	15-year property									
f	20-year property				Ĺ		· · · · · · · · · · · · · · · · · · ·			
g	25-year property			25 yrs			S/L			
h	Residential rental			27 5 yrs		MM	S/L			
	property			27 5 yrs		MM	S/l			
i	Nonresidential real			39 yrs		MM	S/l			
	property					MM	S/I			
	Section C—As	sets Placed in Serv	rice During 2008 Tax Ye	ar Using the A	Alterna	ative Depre	ciation S	System)	
20a	Class life						S/l			
b	12-year			12 yrs			S/l			
	40-year			40 yrs		MM	S/I			
Pa	art IV Summary (See ins	tructions)								
21	Listed property Enter amount from	line 28						21		<u></u>
22	Total. Add amounts from line 12, lin	nes 14 through 17, lin	es 19 and 20 in column (g), and line 21						
	Enter here and on the appropriate li							1 20	ì	12 551
	Lines here and on the appropriate if	nes of your return Pa	artnerships and S corpor	ations—see ins	tr			22	<u> </u>	23,552
23	For assets shown above and placed			ations—see ins	tr	<u> </u>		22		23,552