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SCANNED APR 19 200

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2009

Open to Public Inspection

<u>A</u>	For the 20	09 cal <u>endar y</u>	ear, or tax year beginning, and ending					
_	Check if applic	100	C Name of organization PENNSYLVANIA ONCOLOGY HEMATO			D Emplo	yer identif	ication number
X	Address chang	ge use IRS label or	MANAGERS' SOCIETY C/O FRAN S	SPINES				
	Name change		Doing Business As			25-	17676	522
	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address)		Room/suite		one number	
\equiv	Termination	Specific	425 AMWELL ROAD		#2	215	<u>-762-</u>	
		Instruc-	City or town, state or country, and ZIP + 4			G Gross rece	pts\$	183,898
\sqcup	Amended retur		HILLSBOROUGH NJ 08844					_
\Box	Application per	nding F Name	e and address of principal officer			H(a) Is this a	т. г	
						affiliate H(b) Are all	affiliates	
						include	-	Yes No
	Tax-exempt	t etatus X	501(c) (6) ◀ (insert no) 4947(a)(1) or 527	· · · · · · · · · · · · · · · · · · ·		11 140,	attach a list ((see instructions)
<u>.</u>	Website:		POHMS . COM			H(c) Group	exemption nu	mhar 🕨
		ızatıon X Cor		L Yes	ar of formation		M State of le	
*******	art I	Summa		12			Otalo O. I	
	T		he organization's mission or most significant activities					
•	T	HE ORGA	NIZATIONS SEEKS TO IMPROVE THE BUSINESS O	CONDITIO	гис			
anc	F	OR PRIV	ATE ONCOLOGY AND HEMATOLOGY MEDICAL PRACT	rices i	N			
Activities & Governance	T	HE COMM	ONWEALTH OF PENNSYLVANIA THROUGH EDUCATION	ON AND				
ŏ	2 Che	ck this box	▶ ☐ If the organization discontinued its operations or disposed of mo	ore than 25%	6 of its net ass	sets		
ಷ	3 Nun	nber of voting	members of the governing body (Part VI, line 1a)			3		
ies	4 Nun	nber of indep	endent voting members of the governing body (Part VI, line 1b)			4		
Ę	5 Tota	al number of	employees (Part V, line 2a)			5		
Aci			volunteers (estimate if necessary)			6		
		_	lated business revenue from Part VIII, column (C), line 12			7a		
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34		Prior Yea	7b		rrent Year
	8 Con	tributions an	d grants (Part VIII, line 1h)		FIIOLIE	1	Cui	Tent real
Revenue			revenue (Part VIII, line 2g)		15:	2,204		183,155
Ş.		=	ne (Part VIII, column (A), lines 3, 4, and 7d)		6,254		743	
ď		er revenue (F		4,350				
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)			2,808		183,898
	l		ar amounts paid (Part IX, column (A), lines 1–3)					
	14 Ben	efits paid to	or for members (Part IX, column (A), line 4)					
S	15 Sala	aries, other c	ompensation, employee benefits (Part IX, column (A), lines 5–10)					
benses	16a Prof	esaronal mul	traising fees (Part IX, column (A), line 11e)					
xpe	b Tota	al fundraising	expenses (Part IX, column (D), line 25) ► 4,154	<u> </u>				
Ж	h ^ر 1	er expenses	(Part IX, collign (A), lines 11a-11d, 11f-24f)			3,236		228,613
	1段 1	al experiences	Addumes 1377 (must equal Part IX, column (A), line 25)			3,236		228,613
- 0	19 Rev		penses_Subfect line 18 from line 12			0,428		-44,715 d of Year
ets o	20 Tota	QGDE	Maria Maria	 -	Beginning of Cur	B,240		243,525
Ass	21 Tota		Part X, line 26)			0,230		243,323
Net Assets or Fund Balances	22 Net	•	nd balances Subtract line 21 from line 20		288	8,240		243,525
	art II		re Block	<u> </u>		- ,		
		Under penal	ties of perjury, I declare that I have examined this return, including accompanying	schedules ar	nd statements, a	and to the bes	st of my kno	wiedge
		and belief, it	is true, correct, and complete Declaration of preparer (other than officer) is base	ed on all inform	nation of which i	preparer has	any knowle	dge
Sig	jn 💮	<u> </u>	Jul 2000					
He	re	Signatu	re of officer			Date	~	
			FERRY B. WhITLARK , I REASU	RED			3 ~	19-10
_		Type or	print name and title		 -			
Pai	id	Preparer's		Date	Check self-	ıf	Preparer's (see instri	s identifying number uctions)
	eparer's	signature	JOSEPH D. BATTAGLINI	02/16	/10 employ	red ▶ 🔲	P00	357847
	e Only	Firm's name	(or yours BATTAGLINI & COMPANY, PC			EIN ▶	23-	<u>-2578107</u>
if self-employed), 1049 LANCASTER AVENUE								
_	\mathcal{L}	address, and	DERWIN, 111 19912 9941			no 🕨	610-9	964-1344
			eturn with the preparer shown above? (see instructions)					Yes No
For DAA	Privacy A	ct and Pape	rwork Reduction Act Notice, see the separate instructions.				F	orm 990 (2009)

		NNSYLVANIA (25-1767622		Page 2
1		ment of Program he organization's missi		piisnments			
	See Schedi		011				
	•						
							
2			ificant program serv	ces during the year which	were not listed on		
	the prior Form 99		0.1.1.0				Yes X No
2		these new services or		hanaa oo haasa taaadaada			
3	services?	non cease conducting, o	or make significant c	changes in how it conducts	s, any program		Yes X No
		these changes on Sch	nedule O				1es 21 No
4				organization's three larges	st program services by	/ expenses	
				947(a)(1) trusts are require		•	
	allocations to oth	ers, the total expenses	, and revenue, if any	, for each program service	e reported		
	(Code) (Expenses \$		including grants of \$) (Revenue \$)
E	EDUCATION	AND TRAININ	IG				
				•			
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
40	(Code) (Expenses \$		including grants of \$) (Revenue \$	
70	(Code) (Expenses \$		including grants or \$) (Revenue \$,
		•					
4d	Other program se	ervices (Describe in Sc	hedule O)		- 		
	(Expenses \$		including grants o	f \$) (Revenue \$		
4e	Total program se	ervice expenses >					
							Form 990 (2009)

Part IV	Checklist of	f Requ	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		
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		X
6	Did the organization maintain any donor advised funds or any similar funds or 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, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	\square		
	Schedule D, Parts XI, XII, and XIII	12		<u> </u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{\mathbf{x}}{\mathbf{x}}$
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			v
4-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	4.		v
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	, ,	İ	v
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	45		v
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
13	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		X
20	If "Yes," complete Schedule G, Part III	19		$\frac{\mathbf{x}}{\mathbf{x}}$
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>~</u>

Part IV Checklist of Required Schedules (continued)

ves No in the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II 21 X X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 X X Did the organization answer "Yes" to Part IVI. Sciench A, Ine 3, 4 of 8 should compensation of the organization aware "Yes" complete Schedule I, Parts I and III 22 X X Did the organization aware travel port of the service of the compensation of the organization aware at accessing to be displayed and the organization and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," answer lines 24 th through 24d and complete Schedule IX If "No," go to line 25 Did the organization make a travel proceeds of trave-exempt bones 31, 2002? If "Yes," answer lines 24 th through 24d and complete Schedule IX If "No," go to line 25 Did the organization make a native accession of travelexempt bones beyond a temporary peniod exception? 24d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and the travelex of the thirth an arteritude science of the organization and the process of the process of the science of the science of the organization and the process of the science of the organization and as an organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and the travelex of the year process of the organization with a disqualified person until and the travelex of the year process of the organization with a disqualified person in a prove year, and that the transaction has not been reported on any of the organization with a disqualifi					
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22 Dit the organization report more than \$5,000 of grants and other assistance to individuals in the Unided States on Part IX, colining (A), line 2 If "Yes," complete Schedule I, Parts I and III 22 X X	21				
United States on Part IX, column (A), Ine 2º II "Yes," complete Schedule I, Parts I and III 22 X 23 Dot the organization answer "Yes" to Part IVI, Section A), Ine 3.4, or 6 shout compensation of the organization sourcent and former officers, directors, frustees, key employees, and highest compensated employees? 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 lines 24b through 26d and complete Schedule II. If IVI, "On," go to line 29 24b Did the organization invest any proceeds of tix-exempt bonds beyond a temporary period exception? 24c United Scales and a section account of the than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization and as an an escrow account other than a refunding escrow at any time during the year? 24d Did the organization and as an an one behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and so an one behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and so an one behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and so an one behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and so an one behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and so and the complex of the organization prompts of the part of			21		<u> </u>
23 bd the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization surreit and former efficiens, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X X 24a X 510,000 as of the last day of the year, that was issued after December 31, 2002; If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 24a X D did the organization invest any proceeds of trace-weempt bronds beyond a temporary period exception? 24b D did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any trace-weimpt bronds? 24c of the organization and a car as an "on behalf of issuer for bonds outstanding at any time during the year? 24d D is the organization and a since of the organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization and the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization sprior Forms 990 or 990-E22 If "Yes," complete Schedule L, Part I is 0. Was a loan to or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II is 0. Was a loan to or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II is 0. Was a loan to or by a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part II is 0. Was the organization or applicable filing thresholds, conditions, and exceptions) and a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV is 0. Did the organization receive more than \$25,000 in non-cash c	22 ,				77
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 X. 24a Dd 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 lines 24b through 24d and complete Schedule II. If "In", og to line 25 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary pend exception? 24b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary pend exception? 24b Dd the organization and as an an accrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Dd the organization and as an an accrow account other than a refunding escrow at any time during the year? 24d Dd the organization acts as a not behalf of issuer for bonds outstanding at any time during the year? 24d Dd the organization acts as a not behalf of issuer for bonds outstanding at any time during the year? 24d Dd the organization accounts of the companization of the organization engage in an excess benefit transaction with a desqualified person outstanding the year? 15ex, complete Schedule L. Part II b is the organization aware that it engaged in an excess benefit transaction with a desqualified person outstanding as of the end of the organization synor Forms 990 or 990-E27 If "Pes," complete Schedule L. Part II b is the organization and the transaction with a desqualified person outstanding as of the end of the organization to with a desqualified person outstanding as of the end of the organization to with a desqualified person outstanding as of the end of the organizations tax year? If "Yes," complete Schedule L. Part IV b das a loan to or by a current or former former, director, trustee, by employee, highly compensated employee, or disqualified person outstanding as of the end of the organization with organization with an account to the organizat	00		22	<u> </u>	X
employees? If "Yes," complete Schedule J 24b Did the organization have at axweempt bond issue with an outstanding principal amount of more than 5100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K if "No." go to line 25 25b Did the organization maintain an escrow account other than a refunding secrow at any time during the year confedence of the organization maintain an escrow account other than a refunding secrow at any time during the year confedence of the organization and as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and as an "on behalf of issuer for bonds outstanding at any time during the year? 24d 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 bid the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II bid Was a loan of the time transaction bear neported on any of the organization's prior Forms 590 or 950-E27 If "Yes," complete Schedule L, Part II bid Was a loan to or by a current of 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 bid Was a loan too or by a current of former officer, director, trustee, or to a person related to such an individual? If "Yes," complete Schedule L, Part II bid Was the organization or apart to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing inresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV bid the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Sc	23				
248 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 5100.000 as of the last day of the year, that was issued after December 31, 2002? If Yes," answer lines 24b through 24d and complete Schedule K. If YNO." go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any an an exception of the december 31, 2002? If Yes," answer lines 24d Did the organization and are an an behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization 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 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If Yes," complete Schedule L, Part II 25b Universe; organization of the organization stay year? If Yes, complete Schedule L, Part II 26b Vas 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 stay year? If Yes, complete Schedule L, Part II 27c Value organization aparty to a business transaction with one of the following parties (see Schedule L, Part II 28c Vas the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 28c Variety of the organization or former officer, director, trustee, or key employee? If Yes, complete Schedule L, Part IV 28c Variety of the organization or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or key employee of the organization (or a family member) was an officer, d		· · · · · · · · · · · · · · · · · · ·			7
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with a disqualified person during the year? If "Yes," complete Schedule L, Part I provey: and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 360-EZ? If "Yes," complete Schedule L, Part I Was a loant 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 X Obd the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X X Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X A family member) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of sts net assets? If "Yes," complete Schedule N, Part II 31 X Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-2 and 301 7701-32 if "Yes," complete Schedule R, Part I 33 X Was the organization or controlled entity within the meaning of s			240		
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior 976ms 990 or 990-E27 if "Yes," complete Schedule L, Part II 25b	25a				
prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II 28 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 28 In the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 29 A Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 A Caurrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A A mentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A mentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 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 II 31 X 32 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 Did the organization liquidate, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization related to any lax-exempl or taxable entity? If "Yes," complete Schedule R, Part V, Ine 2 33 S	L		25a		
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Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			30		
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III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 34 X X X X X X X X X X X X X		·	33		
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Schedule R, Part V, line 2 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 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 35 X X X X X X X X X X X X X	٠-	•	34		
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI By Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			36		
Part VI By Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19° Note. All Form 990 filers are required to complete Schedule O 37	>/				
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O 38 X					v
19? Note. All Form 990 filers are required to complete Schedule O		·	37		
	00				v
		13. Note. All Point 990 filers are required to complete Schedule O		990	

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c' Did the organization comply with backup withholding rules for reportable payments to vendors and reportable X gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 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 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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 X account)? 4a If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 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 Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) PENNSYLVANIA ONCOLOGY HEMATOLOGY 25-1767622 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? X 3 X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b 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 a The governing body? X 8a X Each committee with authority to act on behalf of the governing body? b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a X b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and 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

425 AMWELL ROAD

NJ 08844

HILLSBOROUGH

organization > FRAN SPINE

972-540-9411

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. Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization	n did not compe	ensate	e an	y cui	rrent	offic	ær, c	lirector, or trustee		
(A) Name and Title	(B) Average	Pos	(C) Position (check all that apply)					(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	or director		Officer	Key employee	Highest compensated employee	Former	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
FRAN SPINE										
ADMIN DIRECTOR	<u></u>	<u> </u>						3,750	0	0
CENTRAL PA HEM &	MED									
BOARD MEMBER								0	0	0
BRONSTEIN JEFFRI	‡ S						ŀ		_	
BOARD MEMBER		_			<u> </u>	_	╙	0	0	0
SURINDER VOHRA, I	MID.								_	_
BOARD MEMBER		_					⊢	0	0	0
MARY LOIS MOSS PRESIDENT								0	o	o
I. BRODSKY ASSOC	ATES									
TREASURER	1							0	0	0
CANCER CARE OF CI	TETRAL P	A								
VICE-PRESIDENT							╙	0	0	0
	1									
		-			! —	_	⊢			
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Ta		7	71003	3, r\t	y 21	iibio	yees	o, an	id nignest Compensated	Employees (continued)			
	(A) Name and Title	(B) Average hours per week	—		chec		hat a		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of		
٠	•	Week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	trom the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	com fr org and	other pensation om the anization d related anization	n I
					-		ă						
		!									-		
													
									<u> </u>				
		-											
)						
		-											_
45	Total	1							3,750				
2	Total Total number of individuals (in reportable compensation from				thos	e list	ed a	bove		\$100,000 in			
					4-							Ye	s No
3 4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line	' complete Schede e 1a, is the sum	dule . of re	J for porta	such able	n ind	ividu pens	al atıoı	n and other compensation	from	-	3	X
5	the organization and related o individual Did any person listed on line 1								·				x
	services rendered to the organition B. Independent Contract	nization? If "Yes,"										<u>. </u>	X
1	Complete this table for your five compensation from the organic	ve highest compe	ansaf	ted ı	ndep	end	ent c	ontr	actors that received more t	than \$100,000 of			
	Name and	(A) business address							Descript	(B) tion of services		(C) Compen) isation
										·			
					-					· <u> </u>			
2	Total number of independent of more than \$100,000 in compe						d to	thos	e listed above) who receive	ed		0	
DAA			<u></u>								F		0 (2009)

Pa	Part VIII Statement of Revenue											
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections		
S S	12	Federated car	mnaigne	1a				revenue		512, 513, or 514		
Contributions, gifts, grants and other similar amounts	h	Membership o		1b								
P,E	6	Fundraising e		1c								
ifts ar a	ا	Related organ		1d								
s, g nila	u	=										
ons	e	•		1e			,					
outi her	T	All other contribution	ns, gifts, grants, s not included above									
ᆵ				1f								
Sor	g		ins included in lines 1a-	·1f	\$							
	<u> </u>	Total. Add line	es 1a-1f			P						
žuč						Busn. Code	107 630	107 620				
Seve	2a	MEMBERS					107,630	107,630				
Se F	b	CONTRAC	TS AND CONFE	RENCE	S		75,525	75,525				
Ž	C											
Su	d					-						
Program Service Revenue	e	A 11 - 41-										
Si Si			ram service reve	nue			103 155					
_		Total. Add line		al al a		• • • • • • • • • • • • • • • • • • •	183,155					
	3		come (including	aiviaer	ias, intere	est, and	743	743				
		other similar a	•				743	743				
	4		nvestment of tax	-exem	pt bona p	roceeas >						
	5	Royalties	() Real		(··) [lamanal .						
	٥-	O B	(ı) Real		(11) P	Personal						
	6a	Gross Rents										
	b	Less rental exps										
	C	Rental inc or (loss)										
	d 7a	Net rental inco Gross amount from	(i) Securities		(1)	Other				·		
		sales of assets	(i) Occuriacs	•	(11)	Other						
	_	other than inventory										
	b	Less cost or other basis & sales exps										
	_	· ·										
	c d	Gain or (loss)			<u> </u>							
		Net gain or (lo	om fundraising eve	nte								
흴	oa	(not including \$	om fundraising eve	IIIS								
Ver		-	reported on line 1c)									
윤		See Part IV, line		a					-			
Other Reven	h	Less direct ex		ь			4					
₹			(loss) from fund	- (evente			i				
			om gaming activitie		EVEIRS							
	Ja	See Part IV, line		a								
	h	Less direct ex		b								
			(loss) from gam	- (trutios							
			f inventory, less	g uo	irritics							
		returns and all	=	а								
	b	Less cost of g		ь								
İ			(loss) from sale:	sofin	/entory	•						
ı			ellaneous Revenue			Busn. Code						
Ì	11a							 				
ŀ	b	-										
ľ	C											
l	d	All other reven	iue									
	е	Total. Add line	es 11a-11d			•						
l	12	Total Revenue	e. See instruction	ns		▶	183,898	183,898	0	0		

Form 990 (2009)

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					
-	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		ļ		
3	Grants and other assistance to governments,		ľ		
	organizations, and individuals outside the		ļ		
	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)				
а	Management	51,375		51,375	
b	Legal	11,102		11,102	
С	· · · · · · · · · · · · · · · · · · ·				
d	, ,				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g					
12	Advertising and promotion				
13	Office expenses				,- <u>-</u>
14	Information technology				
15	Royalties				
16	Occupancy	0 040	9 940		
17	Travel	8,840	8,840		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	143,016	143,016		
19	Conferences, conventions, and meetings	143,010	143,010		
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
23	insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed			ŕ	
	5% of total expenses shown on line 25 below)				
а	WEB DESIGN	4,524	2,262		2,262
b	COMPUTER FEES	2,626	,	2,626	
С	INSURANCE	1,913		1,913	
d	TELEPHONE	1,458		729	729
е	POSTAGE AND DELIVERY	1,207		603	604
f	All other expenses	2,552		1,993	559
25	Total functional expenses. Add lines 1 through 24f		154,118	70,341	4,154
26	Joint costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and		İ		
	fundraising solicitation				
AA					Form 990 (2009)

Par	t X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		288,240	1	243,525
	2	Savings and temporary cash investments			2	
•	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
- 1	5	Receivables from current and former officers, directors,	trustees, key	,		
		employees, and highest compensated employees. Com				
		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	
e	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		8		
₹	9	Prepaid expenses and deferred charges		9		
1	0a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b	-	10c	
1		Investments—publicly traded securities	1001		11	
- 1		Investments—other securities See Part IV, line 11		12		
- 1		Investments—program-related See Part IV, line 11		13		
		Intangible assets		14	· · · · · · · · · · · · · · · · · · ·	
		Other assets See Part IV, line 11				
		Total assets. Add lines 1 through 15 (must equal line 34		288,240	15	242 525
-		Accounts payable and accrued expenses		200,240	16	243,525
- 1		Grants payable		17		
		Deferred revenue			18	
	-	Tax-exempt bond liabilities		····	19	
		·	Controller D		20	
Liabilities 5 2		Escrow or custodial account liability Complete Part IV or			21	
≒ ′		Payables to current and former officers, directors, trusted	•			
<u>ia</u>		employees, highest compensated employees, and disqu	alified	1		
_ .		persons Complete Part II of Schedule L			22	
		Secured mortgages and notes payable to unrelated third			23	·
1		Unsecured notes and loans payable to unrelated third pa	arties		24	
		Other liabilities Complete Part X of Schedule D			25	****
<u>, 2</u>		Total liabilities. Add lines 17 through 25		-	26	
ĕ		Organizations that follow SFAS 117, check here ▶ 🗓	and			
Ĕ		complete lines 27 through 29, and lines 33 and 34.				i
<u> 2</u>		Unrestricted net assets		288,240	27	243,525
2 0 2		Temporarily restricted net assets			_28	· · · · · · · · · · · · · · · · · · ·
E 2		Permanently restricted net assets			29	ļ
ᄄᆝ		Organizations that do not follow SFAS 117, check her	e ▶			i
<u>6</u>		and complete lines 30 through 34.				<u>'</u>
ත් 3		Capital stock or trust principal, or current funds			30	
80 3	1	Paid-in or capital surplus, or land, building, or equipment	fund		31	·
8 3:	2	Retained earnings, endowment, accumulated income, or	other funds		32	
Net Assets or Fund Balances		Total net assets or fund balances		288,240	33	243,525
Z 3,	4	Total liabilities and net assets/fund balances		288,240	34	243,525

Form **990** (2009)

orm	1990 (2009) PENNSYLVANIA ONCOLOGY HEMATOLOGY 25-1767622		Pa	ge 12
Pa	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schèdule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
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 Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PENNSYLVANIA ONCOLOGY HEMATOLOGY MANAGERS' SOCIETY C/O FRAN SPINES

Employer identification number 25–1767622

Form 990 - Organization's Mission or Most Significant Activities
THE ORGANIZATIONS SEEKS TO IMPROVE THE BUSINESS CONDITIONS
FOR PRIVATE ONCOLOGY AND HEMATOLOGY MEDICAL PRACTICES IN
THE COMMONWEALTH OF PENNSYLVANIA THROUGH EDUCATION AND
TRAINING.

Form 990, Part III, Line 4d - All Other Achievements
PROVIDE EDUCATIONAL AND ADMINISTRATIVE SUPPORT TO
HEMATOLOGY AND ONCOLOGY PRACTICE MANAGERS.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public