



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



Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009

Open to Public Inspection

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning January 1, 2009, and ending December 31, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Howard County Council on Aging Number and street (or P.O. box, if mail is not delivered to street address) Room/suite P.O. Box 765 City or town, state or country, and ZIP + 4 Big Spring, TX 79721-0765	D Employer identification number 751514689 E Telephone number 432-263-4016 F Group Exemption Number ▶
---	---	--	--

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: Cash Accrual
Other (specify) ▶

I Website: ▶ N/A

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

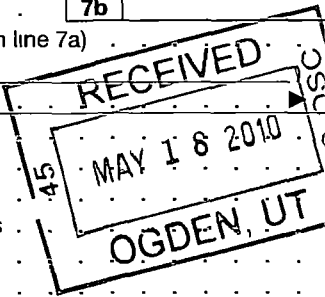
J Tax-exempt status (check only one) — 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

	Description		Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	84120.03
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	2113.86
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	b Less: direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
Expenses	7a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8 Other revenue (describe ▶ _____)	8	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	86233.89
	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
Net Assets	12 Salaries, other compensation, and employee benefits	12	19600.00
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ▶ See Statement 1)	16	52605.87
	17 Total expenses. Add lines 10 through 16	17	72205.87
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	14028.02
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	106792.27	
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	120820.29	



Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.)

	Description	(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	106792.27	120820.29
23	Land and buildings		
24	Other assets (describe ▶ _____)		
25	Total assets	106792.27	120820.29
26	Total liabilities (describe ▶ _____)		
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	106792.27	120820.29

SCANNED JUL 09 2010

69 28

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		✓
35a			
35b			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		✓
37b			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b _____		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a _____		
b	Gross receipts, included on line 9, for public use of club facilities 39b _____		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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-EZ? If "Yes," complete Schedule L, Part I		✓
40b			
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
40e			
41	List the states with which a copy of this return is filed. ▶ _____		
42a	The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	No
42b			✓
	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 .		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		✓
42c			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____ N/A		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	No
44			✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	No
45			✓

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- | | Yes | No |
|--|------------|-------------------------------------|
| 46 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 | 46 | <input checked="" type="checkbox"/> |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | <input checked="" type="checkbox"/> |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | <input checked="" type="checkbox"/> |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | <input checked="" type="checkbox"/> |
| b If "Yes," was the related organization a section 527 organization? | 49b | <input checked="" type="checkbox"/> |
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 . . . ▶ _____

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Patricia Nabors Signature of officer Date 5-14-10

▶ PATRICIA NABORS TREASURER Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____ Date _____ Check if self-employed Preparer's identifying number (See instructions) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____ EIN ▶ _____ Phone no. ▶ _____

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization Howard County Council on Aging	Employer identification number 75 : 1514689
---	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	Not Available	80987.00	81919.76	109098.53	84120.03	356125.32
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	Not Available	80987.00	81919.76	109098.53	84120.03	356125.32
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	Not Available	80987.00	81919.76	109098.53	84120.03	356125.32
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	Not Available	80987.00	81919.76	109098.53	84120.03	356125.32
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	Not Available	80987.00	81919.76	109098.53	84120.03	356125.32

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

HOWARD COUNTY COUNCIL ON AGING

75-1514689

Statement 1**Form 990-EZ, Part 1, Line 16****Other Expenses**

MEAL PREPARATION	\$ 45129.30
PAYROLL TAXES	\$ 5146.84
TELEPHONE	\$ 582.78
CHRISTMAS BONUS	\$ 300.00
OFFICE SUPPLY	\$ 335.95
COMPUTER REPAIR	\$ 1000.00
POSTAGE & POST OFFICE BOX RENTAL	\$ 52.05
PROGRAM EXPENSE	\$ 58.95
TOTAL:	\$ 52605.87

Statement 2**Form 990-EZ Part IV****List of Officers, Directors, Trustees, and Key Employees**

NAME & ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
Jerry Grimes 1604 Osage Big Spring, TX 79720	President 20 Hours	\$0.00	\$0.00	\$0.00
Judy Shrum 2303 Roberts Big Spring, TX 79720	Vice President 20 Hours	\$0.00	\$0.00	\$0.00
Lucy Griffith 2509 E. 24 th Street Big Spring, TX 79720	Secretary 20 Hours	\$0.00	\$0.00	\$0.00
Patricia Nabors 2502 Allendale Big Spring, TX 79720	Treasurer 20 Hours	\$0.00	\$0.00	\$0.00
Macaria Cantu 5510 Old Colorado City Big Spring, TX 79720	Director 40 Hours	\$18760.00		
Kimmie Plew 1206 Wasson Drive Big Spring, TX 79720	Co Director	\$ 840.00		
	TOTAL	\$19600.00	\$0.00	\$0.00

HOWARD COUNTY COUNCIL ON AGING

75-1514689

Statement 3

Form 990-EZ, Part V

Regarding Transfers Associated with Personal Benefit Contracts

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?.....NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.....NO

**Howard County Council On Aging
General Ledger
As of December 31, 2009**

7:18 PM
05/12/10
Accrual Basis

Type	Date	Num	Name	Mem	Split	Amount	Balance
Wells Fargo Checking							
Deposit	1/2/2009					598.00	-3,444.07
Transfer	1/2/2009					3,734.50	-2,846.07
Check	1/2/2009	1686				-1,000.00	888.43
Transfer	1/8/2009					5,000.00	-111.57
Transfer	1/8/2009					45,044.41	4,888.43
General Journal	1/16/2009					-44.41	49,932.84
Check	1/20/2009	1687				-50,000.00	49,888.43
Liability Check	1/23/2009	1688				-1,168.50	-1,280.07
Deposit	1/23/2009					1,233.33	-46.74
Transfer	1/24/2009					111.57	64.83
Check	1/30/2009	1689				-66.41	-1.58
Paycheck	1/30/2009	1690				-1,252.60	-1,254.18
Check	1/30/2009	1691				-3,450.00	-4,704.18
Transfer	2/3/2009					4,704.18	0.00
Transfer	2/17/2009					48.86	48.86
General Journal	2/17/2009					-48.86	0.00
Deposit	2/24/2009					333.33	333.33
Deposit	2/26/2009					514.50	847.83
Paycheck	2/27/2009	1692				-1,252.60	-404.77
Check	2/27/2009	1693				-3,555.00	-3,959.77
Transfer	3/3/2009					404.77	-3,555.00
Transfer	3/4/2009					3,555.00	0.00
Transfer	3/12/2009					5,000.00	5,000.00
General Journal	3/16/2009					-47.20	4,952.80
Deposit	3/18/2009					287.08	5,239.88
Paycheck	3/31/2009	1694				-1,290.60	3,949.28
Check	3/31/2009	1695				-36.75	3,912.53
Check	3/31/2009	1696				-4,182.50	-269.97
Transfer	4/2/2009					269.97	0.00
General Journal	4/13/2009					-47.20	-47.20
Transfer	4/14/2009					47.20	0.00
Liability Check	4/15/2009	1697				-1,371.40	-1,371.40
Deposit	4/16/2009					333.33	-1,038.07
Paycheck	4/30/2009	1698				-1,197.78	-2,235.85
Paycheck	4/30/2009	1699				-221.64	-2,457.49
Check	4/30/2009	1700				-116.43	-2,573.92
Check	4/30/2009	1701				-4,135.00	-6,708.92
Transfer	5/1/2009					980.88	-5,728.04
Deposit	5/4/2009					514.50	-5,213.54
Transfer	5/4/2009					5,213.54	0.00
Transfer	5/6/2009					5,000.00	5,000.00
General Journal	5/14/2009					-47.37	4,952.63
Deposit	5/21/2009					452.48	5,405.11
Paycheck	5/29/2009	1702				-1,290.60	4,114.51
Paycheck	5/29/2009	1703				-55.41	4,059.10
Check	5/29/2009	1704				-28.05	4,031.05
Check	5/29/2009	1705				-3,752.50	278.55
Deposit	6/15/2009					233.33	511.88

Howard County Council On Aging General Ledger As of December 31, 2009

7:18 PM
05/12/10
Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
General Journal	6/16/2009					-47.31	464.57
Check	6/18/2009	1706				-760.49	-295.92
Deposit	6/22/2009					514.50	218.58
Paycheck	6/26/2009	1707				-1,290.60	-1,072.02
Paycheck	6/26/2009	1708				-55.41	-1,127.43
Check	6/26/2009	1709				-3,685.00	-4,812.43
Transfer	6/29/2009					4,812.43	0.00
Deposit	7/7/2009					100.00	100.00
Deposit	7/14/2009					100.00	200.00
General Journal	7/16/2009					-47.31	152.69
Deposit	7/22/2009					233.33	386.02
Liability Check	7/31/2009	1710				-1,314.12	-928.10
Paycheck	7/31/2009	1711				-1,290.60	-2,218.70
Check	7/31/2009	1712				-3,805.00	-6,023.70
Transfer	8/3/2009					3,418.98	-2,604.72
Transfer	8/4/2009					1,290.60	-1,314.12
Transfer	8/5/2009					1,314.12	0.00
Transfer	8/14/2009					47.49	47.49
General Journal	8/14/2009					-47.49	0.00
Deposit	8/18/2009					100.00	100.00
Deposit	8/21/2009					233.33	333.33
Paycheck	8/28/2009	1713				-1,166.84	-833.51
Paycheck	8/28/2009	1714				-277.05	-1,110.56
Check	8/28/2009	1715				-65.93	-1,176.49
Check	8/28/2009	1717				-24.00	-1,200.49
Check	8/28/2009	1716				-4,032.50	-5,232.99
Transfer	8/28/2009					25.00	-5,207.99
Transfer	9/1/2009					5,207.99	0.00
Transfer	9/9/2009					8,000.00	8,000.00
General Journal	9/15/2009					-53.63	7,946.37
Deposit	9/17/2009					624.50	8,570.87
Paycheck	9/30/2009	1720				-1,290.60	7,280.27
Check	9/30/2009	1718				-3,907.50	3,372.77
Deposit	9/30/2009					233.33	3,606.10
Check	10/15/2009	1719				-15.00	3,591.10
Deposit	10/15/2009					1,733.33	5,324.43
General Journal	10/15/2009					-50.70	5,273.73
Paycheck	10/30/2009	1723				-1,228.72	4,045.01
Paycheck	10/30/2009	1724				-110.82	3,934.19
Liability Check	10/30/2009	1725				-1,292.82	2,641.37
Check	10/30/2009	1722				-3,922.50	-1,281.13
Check	10/30/2009	1721				-94.38	-1,375.51
Transfer	11/5/2009					82.69	-1,292.82
Transfer	11/6/2009					1,292.82	0.00
Transfer	11/12/2009					5,000.00	5,000.00
General Journal	11/13/2009					-50.64	4,949.36
Deposit	11/19/2009					747.83	5,697.19
Paycheck	11/30/2009	1727				-1,290.60	4,406.59
Check	11/30/2009	1726				-3,147.50	1,259.09

**Howard County Council On Aging
General Ledger
As of December 31, 2009**

7:18 PM
05/12/10
Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance	
Check	12/16/2009	1728				-300.00	959.09	
General Journal	12/17/2009					-50.66	908.43	
Paycheck	12/29/2009	1729				-1,228.72	-320.29	
Paycheck	12/29/2009	1730				-55.41	-375.70	
Check	12/29/2009	1731				-81.31	-457.01	
Check	12/29/2009	1732				-2,712.50	-3,169.51	
Transfer	12/30/2009					457.01	-2,712.50	
Total Wells Fargo Checking							731.57	-2,712.50
Wells Fargo Savings								
Transfer	1/2/2009					-3,734.50	43,461.20	
Deposit	1/7/2009					75,000.00	39,726.70	
Transfer	1/8/2009					-5,000.00	114,726.70	
Transfer	1/8/2009					-45,044.41	109,726.70	
Transfer	1/24/2009					-111.57	64,682.29	
Deposit	1/31/2009					3.25	64,570.72	
Transfer	2/3/2009					-4,704.18	64,573.97	
Transfer	2/17/2009					-48.86	59,869.79	
Deposit	2/28/2009					2.31	59,820.93	
Transfer	3/3/2009					-404.77	59,823.24	
Transfer	3/4/2009					-3,555.00	59,418.47	
Transfer	3/12/2009					-5,000.00	55,863.47	
Transfer	3/12/2009					-5,000.00	50,863.47	
Deposit	3/31/2009					2.25	50,865.72	
Transfer	4/2/2009					-269.97	50,595.75	
Transfer	4/14/2009					-47.20	50,548.55	
Deposit	4/30/2009					2.08	50,550.63	
Transfer	5/1/2009					-980.88	49,569.75	
Transfer	5/4/2009					-5,213.54	44,356.21	
Transfer	5/6/2009					-5,000.00	39,356.21	
Transfer	5/31/2009					1.73	39,357.94	
Transfer	6/29/2009					-4,812.43	34,545.51	
Transfer	6/30/2009					1.60	34,547.11	
Deposit	7/21/2009					12,093.05	46,640.16	
Transfer	8/3/2009					1.63	46,641.79	
Transfer	8/4/2009					-3,418.98	43,222.81	
Transfer	8/5/2009					-1,290.60	41,932.21	
Transfer	8/14/2009					-1,314.12	40,618.09	
Transfer	8/28/2009					-47.49	40,570.60	
Transfer	8/31/2009					-25.00	40,545.60	
Deposit	9/1/2009					1.75	40,547.35	
Transfer	9/9/2009					-5,207.99	35,339.36	
Transfer	9/30/2009					-8,000.00	27,339.36	
Deposit	10/31/2009					1.21	27,340.57	
Deposit	11/5/2009					1.16	27,341.73	
Transfer	11/6/2009					-82.69	27,259.04	
Transfer	11/12/2009					-1,292.82	25,966.22	
Transfer	11/12/2009					-5,000.00	20,966.22	
Deposit	11/30/2009					0.95	20,967.17	
Transfer	12/30/2009					-457.01	20,510.16	

**Howard County Council On Aging
General Ledger
As of December 31, 2009**

7:18 PM
05/12/10
Accrual Basis

Type	Date	Numb	Name	Memo	Split	Amount	Balance
Deposit	12/31/2009					0.89	20,511.05
Total Wells Fargo Savings							20,511.05
Accounts Receivable							
Total Accounts Receivable						-22,950.15	0.00
CD/Investment							
Check	1/20/2009	1687				50,000.00	50,005.00
Deposit	7/21/2009	156342				-10,000.00	100,005.00
Total CD/Investment						40,000.00	90,005.00
Undeposited Funds							
Total Undeposited Funds							0.00
Accounts Payable							
Total Accounts Payable							0.00
Payroll Liabilities							
Liability Check	1/23/2009	1688				480.00	-1,062.50
Liability Check	1/23/2009	1688				279.00	-582.50
Liability Check	1/23/2009	1688				279.00	-303.50
Liability Check	1/23/2009	1688				65.25	-24.50
Liability Check	1/23/2009	1688				65.25	40.75
Paycheck	1/30/2009	1690				-225.00	106.00
Paycheck	1/30/2009	1690				-99.20	-119.00
Paycheck	1/30/2009	1690				-99.20	-218.20
Paycheck	1/30/2009	1690				-23.20	-317.40
Paycheck	1/30/2009	1690				-23.20	-340.60
Paycheck	1/30/2009	1690				-23.20	-363.80
Paycheck	1/30/2009	1690				0.00	-363.80
Paycheck	2/27/2009	1692				-225.00	-588.80
Paycheck	2/27/2009	1692				-99.20	-688.00
Paycheck	2/27/2009	1692				-99.20	-787.20
Paycheck	2/27/2009	1692				-23.20	-810.40
Paycheck	2/27/2009	1692				-23.20	-833.60
Paycheck	2/27/2009	1692				0.00	-833.60
Paycheck	3/31/2009	1694				-187.00	-1,020.60
Paycheck	3/31/2009	1694				-99.20	-1,119.80
Paycheck	3/31/2009	1694				-99.20	-1,219.00
Paycheck	3/31/2009	1694				-23.20	-1,242.20
Paycheck	3/31/2009	1694				-23.20	-1,265.40
Paycheck	3/31/2009	1694				0.00	-1,265.40
Liability Check	4/15/2009	1697				637.00	-628.40
Liability Check	4/15/2009	1697				297.60	-330.80
Liability Check	4/15/2009	1697				297.60	-33.20
Liability Check	4/15/2009	1697				69.60	36.40
Liability Check	4/15/2009	1697				69.60	106.00
Paycheck	4/30/2009	1698				-169.00	-63.00
Paycheck	4/30/2009	1698				-91.76	-154.76
Paycheck	4/30/2009	1698				-91.76	-246.52

Howard County Council On Aging
 General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Paycheck	4/30/2009	1698				-21.46	-267.98
Paycheck	4/30/2009	1698				-21.46	-289.44
Paycheck	4/30/2009	1698				0.00	-289.44
Paycheck	4/30/2009	1699				0.00	-289.44
Paycheck	4/30/2009	1699				-14.88	-304.32
Paycheck	4/30/2009	1699				-14.88	-319.20
Paycheck	4/30/2009	1699				-3.48	-322.68
Paycheck	4/30/2009	1699				-3.48	-326.16
Paycheck	4/30/2009	1699				-1.92	-328.08
Paycheck	4/30/2009	1699				0.00	-328.08
Paycheck	4/30/2009	1702				-187.00	-515.08
Paycheck	5/29/2009	1702				-99.20	-614.28
Paycheck	5/29/2009	1702				-99.20	-713.48
Paycheck	5/29/2009	1702				-23.20	-736.68
Paycheck	5/29/2009	1702				-23.20	-759.88
Paycheck	5/29/2009	1702				0.00	-759.88
Paycheck	5/29/2009	1703				0.00	-759.88
Paycheck	5/29/2009	1703				-3.72	-763.60
Paycheck	5/29/2009	1703				-3.72	-767.32
Paycheck	5/29/2009	1703				-0.87	-768.19
Paycheck	5/29/2009	1703				-0.87	-769.06
Paycheck	5/29/2009	1703				-0.48	-769.54
Paycheck	5/29/2009	1703				0.00	-769.54
Paycheck	5/29/2009	1707				-187.00	-956.54
Paycheck	6/26/2009	1707				-99.20	-1,055.74
Paycheck	6/26/2009	1707				-99.20	-1,154.94
Paycheck	6/26/2009	1707				-23.20	-1,178.14
Paycheck	6/26/2009	1707				-23.20	-1,201.34
Paycheck	6/26/2009	1707				0.00	-1,201.34
Paycheck	6/26/2009	1708				0.00	-1,201.34
Paycheck	6/26/2009	1708				-3.72	-1,205.06
Paycheck	6/26/2009	1708				-3.72	-1,208.78
Paycheck	6/26/2009	1708				-0.87	-1,209.65
Paycheck	6/26/2009	1708				-0.87	-1,210.52
Paycheck	6/26/2009	1708				-0.48	-1,211.00
Paycheck	6/26/2009	1708				0.00	-1,211.00
Liability Check	7/31/2009	1710				543.00	-668.00
Liability Check	7/31/2009	1710				312.48	-355.52
Liability Check	7/31/2009	1710				312.48	-43.04
Liability Check	7/31/2009	1710				73.08	30.04
Liability Check	7/31/2009	1710				73.08	103.12
Paycheck	7/31/2009	1711				-187.00	-83.88
Paycheck	7/31/2009	1711				-99.20	-183.08
Paycheck	7/31/2009	1711				-99.20	-282.28
Paycheck	7/31/2009	1711				-23.20	-305.48
Paycheck	7/31/2009	1711				-23.20	-328.68
Paycheck	7/31/2009	1711				0.00	-328.68
Paycheck	8/28/2009	1713				-163.00	-491.68
Paycheck	8/28/2009	1713				-89.28	-580.96

Howard County Council On Aging
General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Paycheck	8/28/2009	1713				-89.28	-670.24
Paycheck	8/28/2009	1713				-20.88	-691.12
Paycheck	8/28/2009	1713				-20.88	-712.00
Paycheck	8/28/2009	1714				0.00	-712.00
Paycheck	8/28/2009	1714				0.00	-712.00
Paycheck	8/28/2009	1714				-18.60	-730.60
Paycheck	8/28/2009	1714				-18.60	-749.20
Paycheck	8/28/2009	1714				-4.35	-753.55
Paycheck	8/28/2009	1714				-4.35	-757.90
Paycheck	8/28/2009	1714				-2.40	-760.30
Paycheck	8/28/2009	1714				0.00	-760.30
Paycheck	9/30/2009	1720				-187.00	-947.30
Paycheck	9/30/2009	1720				-99.20	-1,046.50
Paycheck	9/30/2009	1720				-99.20	-1,145.70
Paycheck	9/30/2009	1720				-23.20	-1,168.90
Paycheck	9/30/2009	1720				-23.20	-1,192.10
Paycheck	9/30/2009	1720				0.00	-1,192.10
Paycheck	10/30/2009	1723				-175.00	-1,367.10
Paycheck	10/30/2009	1723				-94.24	-1,461.34
Paycheck	10/30/2009	1723				-94.24	-1,555.58
Paycheck	10/30/2009	1723				-22.04	-1,577.62
Paycheck	10/30/2009	1723				-22.04	-1,599.66
Paycheck	10/30/2009	1723				0.00	-1,599.66
Paycheck	10/30/2009	1724				-7.44	-1,607.10
Paycheck	10/30/2009	1724				-7.44	-1,614.54
Paycheck	10/30/2009	1724				-1.74	-1,616.28
Paycheck	10/30/2009	1724				-1.74	-1,618.02
Paycheck	10/30/2009	1724				-0.96	-1,618.98
Paycheck	10/30/2009	1724				0.00	-1,618.98
Liability Check	10/30/2009	1725				537.00	-1,081.98
Liability Check	10/30/2009	1725				306.28	-775.70
Liability Check	10/30/2009	1725				306.28	-469.42
Liability Check	10/30/2009	1725				71.63	-397.79
Liability Check	10/30/2009	1725				71.63	-326.16
Paycheck	11/30/2009	1727				-187.00	-513.16
Paycheck	11/30/2009	1727				-99.20	-612.36
Paycheck	11/30/2009	1727				-99.20	-711.56
Paycheck	11/30/2009	1727				-23.20	-734.76
Paycheck	11/30/2009	1727				-23.20	-757.96
Paycheck	11/30/2009	1727				0.00	-757.96
Paycheck	12/29/2009	1729				-175.00	-932.96
Paycheck	12/29/2009	1729				-94.24	-1,027.20
Paycheck	12/29/2009	1729				-94.24	-1,121.44
Paycheck	12/29/2009	1729				-22.04	-1,143.48
Paycheck	12/29/2009	1729				-22.04	-1,165.52
Paycheck	12/29/2009	1729				0.00	-1,165.52
Paycheck	12/29/2009	1730				0.00	-1,165.52
Paycheck	12/29/2009	1730				-3.72	-1,169.24

**Howard County Council On Aging
General Ledger
As of December 31, 2009**

7:18 PM
05/12/10
Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Paycheck	12/29/2009	1730				-3.72	-1,172.96
Paycheck	12/29/2009	1730				-0.87	-1,173.83
Paycheck	12/29/2009	1730				-0.87	-1,174.70
Paycheck	12/29/2009	1730				-0.48	-1,175.18
Paycheck	12/29/2009	1730				0.00	-1,175.18
Total Payroll Liabilities							-1,175.18
Sales Tax Payable							0.00
Total Sales Tax Payable							0.00
Opening Bal Equity							-5,831.81
Total Opening Bal Equity							-5,831.81
Retained Earnings (Retained Earnings)							-83,127.82
Total Retained Earnings (Retained Earnings)							-83,127.82
Campaign Income (Campaign Income)							0.00
Total Campaign Income (Campaign Income)							0.00
Contributions Income (Contribution Income)							0.00
Restricted (Restricted Contributions)							0.00
Total Restricted (Restricted Contributions)							0.00
Unrestricted (Unrestricted Contributions)							0.00
Total Unrestricted (Unrestricted Contributions)							0.00
Contributions Income (Contribution Income)							0.00
Deposit	1/2/2009	6169				-598.00	-598.00
Deposit	1/7/2009	8150...				-75,000.00	-75,598.00
Deposit	1/23/2009	76732				-233.33	-75,831.33
Deposit	1/23/2009	1509				-1,000.00	-76,831.33
Deposit	2/24/2009	2777				-233.33	-77,064.66
Deposit	2/24/2009	6188				-100.00	-77,164.66
Deposit	2/26/2009	6209				-514.50	-77,679.16
Deposit	3/18/2009	3450				-53.75	-77,732.91
Deposit	3/18/2009	77358				-233.33	-77,966.24
Deposit	4/16/2009	77720				-233.33	-78,199.57
Deposit	4/16/2009					-100.00	-78,299.57
Deposit	5/4/2009	6241				-514.50	-78,814.07
Deposit	5/21/2009	4011				-219.15	-79,033.22
Deposit	5/21/2009	78037				-233.33	-79,266.55
Deposit	6/15/2009	78337				-233.33	-79,499.88
Deposit	6/22/2009	6275				-514.50	-80,014.38
Deposit	7/7/2009	6194				-100.00	-80,114.38
Deposit	7/14/2009	4131				-100.00	-80,214.38
Deposit	7/22/2009	78627				-233.33	-80,447.71
Deposit	8/18/2009	4147				-100.00	-80,547.71
Deposit	8/21/2009	78904				-233.33	-80,781.04

Howard County Council On Aging
General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Depreciation Expense (Depreciation Expense)							
Total Depreciation Expense (Depreciation Expense)						0.00	0.00
Dues and Subscriptions (Dues and Subscriptions)							
Total Dues and Subscriptions (Dues and Subscriptions)						0.00	0.00
Equipment Rental (Equipment Rental)							
Total Equipment Rental (Equipment Rental)						0.00	0.00
Insurance (Insurance)							
Disability Insurance (Disability Insurance)							
Total Disability Insurance (Disability Insurance)						0.00	0.00
Liability Insurance (Liability Insurance)							
Total Liability Insurance (Liability Insurance)						0.00	0.00
Insurance (Insurance) - Other							
Total Insurance (Insurance) - Other						0.00	0.00
Total Insurance (Insurance)							
Total Insurance (Insurance)						0.00	0.00
Interest Expense (Interest Expense)							
Finance Charge (Finance Charge)							
Total Finance Charge (Finance Charge)						0.00	0.00
Loan Interest (Loan Interest Expense)							
Total Loan Interest (Loan Interest Expense)						0.00	0.00
Mortgage (Mortgage Interest)							
Total Mortgage (Mortgage Interest)						0.00	0.00
Interest Expense (Interest Expense) - Other							
Total Interest Expense (Interest Expense) - Other						0.00	0.00
Total Interest Expense (Interest Expense)							
Total Interest Expense (Interest Expense)						0.00	0.00
IRS							
Total IRS							
IRS 940						0.00	0.00
Total IRS 940						0.00	0.00
Licenses and Permits (Licenses)							
Total Licenses and Permits (Licenses)						0.00	0.00
Meals (Meals)							
Check	1/30/2009	1691		1380 @ 2 50	Wells Fargo C	3,450.00	3,450.00
Check	2/27/2009	1693		1422 @ 2 50	Wells Fargo C	3,555.00	7,005.00

Howard County Council On Aging
General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Numb	Name	Memo	Split	Amount	Balance
Check	3/31/2009	1696				4,182.50	11,187.50
Check	4/30/2009	1701				4,135.00	15,322.50
Check	5/29/2009	1705				3,752.50	19,075.00
Check	6/18/2009	1706				760.49	19,835.49
Check	6/26/2009	1709				3,685.00	23,520.49
Check	7/31/2009	1712				3,805.00	27,325.49
Check	8/28/2009	1716				4,032.50	31,357.99
Check	9/30/2009	1718				3,907.50	35,265.49
Check	10/30/2009	1722				3,922.50	39,187.99
Check	11/30/2009	1726				3,147.50	42,335.49
Check	12/29/2009	1731				81.31	42,416.80
Check	12/29/2009	1732				2,712.50	45,129.30
Total Meals (Meals)							45,129.30
Mileage (Mileage)							0.00
Total Mileage (Mileage)							0.00
Miscellaneous (Miscellaneous)							0.00
Check	12/16/2009	1728				300.00	300.00
Total Miscellaneous (Miscellaneous)							300.00
Office Supplies (Office Supplies)							0.00
Total Office Supplies (Office Supplies)							0.00
Payroll Expenses							0.00
Paycheck	1/30/2009	1690				1,600.00	1,600.00
Paycheck	1/30/2009	1690				99.20	1,699.20
Paycheck	1/30/2009	1690				23.20	1,722.40
Paycheck	1/30/2009	1690				0.00	1,722.40
Paycheck	2/27/2009	1692				1,600.00	3,322.40
Paycheck	2/27/2009	1692				99.20	3,421.60
Paycheck	2/27/2009	1692				23.20	3,444.80
Paycheck	2/27/2009	1692				0.00	3,444.80
Paycheck	3/31/2009	1694				1,600.00	5,044.80
Paycheck	3/31/2009	1694				99.20	5,144.00
Paycheck	3/31/2009	1694				23.20	5,167.20
Paycheck	3/31/2009	1694				0.00	5,167.20
Paycheck	4/30/2009	1698				1,480.00	6,647.20
Paycheck	4/30/2009	1698				91.76	6,738.96
Paycheck	4/30/2009	1698				21.46	6,760.42
Paycheck	4/30/2009	1698				0.00	6,760.42
Paycheck	4/30/2009	1699				240.00	7,000.42
Paycheck	4/30/2009	1699				0.00	7,000.42
Paycheck	4/30/2009	1699				14.88	7,015.30
Paycheck	4/30/2009	1699				3.48	7,018.78
Paycheck	4/30/2009	1699				1.92	7,020.70
Paycheck	4/30/2009	1699				0.00	7,020.70
Paycheck	5/29/2009	1702				1,600.00	8,620.70
Paycheck	5/29/2009	1702				99.20	8,719.90

Howard County Council On Aging
General Ledger
As of December 31, 2009

Type	Date	Num	Name	Memo	Split	Amount	Balance
Paycheck	5/29/2009	1702				23.20	8,743.10
Paycheck	5/29/2009	1702				0.00	8,743.10
Paycheck	5/29/2009	1703				60.00	8,803.10
Paycheck	5/29/2009	1703				3.72	8,806.82
Paycheck	5/29/2009	1703				0.87	8,807.69
Paycheck	5/29/2009	1703				0.48	8,808.17
Paycheck	5/29/2009	1703				0.00	8,808.17
Paycheck	6/26/2009	1707				1,600.00	10,408.17
Paycheck	6/26/2009	1707				99.20	10,507.37
Paycheck	6/26/2009	1707				23.20	10,530.57
Paycheck	6/26/2009	1707				0.00	10,530.57
Paycheck	6/26/2009	1708				60.00	10,590.57
Paycheck	6/26/2009	1708				3.72	10,594.29
Paycheck	6/26/2009	1708				0.87	10,595.16
Paycheck	6/26/2009	1708				0.48	10,595.64
Paycheck	6/26/2009	1708				0.00	10,595.64
Paycheck	7/31/2009	1711				1,600.00	12,195.64
Paycheck	7/31/2009	1711				99.20	12,294.84
Paycheck	7/31/2009	1711				23.20	12,318.04
Paycheck	7/31/2009	1711				0.00	12,318.04
Paycheck	8/28/2009	1713				1,440.00	13,758.04
Paycheck	8/28/2009	1713				89.28	13,847.32
Paycheck	8/28/2009	1713				20.88	13,868.20
Paycheck	8/28/2009	1713				0.00	13,868.20
Paycheck	8/28/2009	1714				300.00	14,168.20
Paycheck	8/28/2009	1714				18.60	14,186.80
Paycheck	8/28/2009	1714				4.35	14,191.15
Paycheck	8/28/2009	1714				2.40	14,193.55
Paycheck	8/28/2009	1714				0.00	14,193.55
Paycheck	9/30/2009	1720				1,600.00	15,793.55
Paycheck	9/30/2009	1720				99.20	15,892.75
Paycheck	9/30/2009	1720				23.20	15,915.95
Paycheck	9/30/2009	1720				0.00	15,915.95
Paycheck	10/30/2009	1723				1,520.00	17,435.95
Paycheck	10/30/2009	1723				94.24	17,530.19
Paycheck	10/30/2009	1723				22.04	17,552.23
Paycheck	10/30/2009	1723				0.00	17,552.23
Paycheck	10/30/2009	1724				120.00	17,672.23
Paycheck	10/30/2009	1724				7.44	17,679.67
Paycheck	10/30/2009	1724				1.74	17,681.41
Paycheck	10/30/2009	1724				0.96	17,682.37
Paycheck	10/30/2009	1724				0.00	17,682.37
Paycheck	11/30/2009	1727				1,600.00	19,282.37
Paycheck	11/30/2009	1727				99.20	19,381.57
Paycheck	11/30/2009	1727				23.20	19,404.77
Paycheck	11/30/2009	1727				0.00	19,404.77
Paycheck	12/29/2009	1729				1,520.00	20,924.77
Paycheck	12/29/2009	1729				94.24	21,019.01
Paycheck	12/29/2009	1729				22.04	21,041.05

Howard County Council On Aging
General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance	
Paycheck	12/29/2009	1729				0.00	21,041.05	
Paycheck	12/29/2009	1730				60.00	21,101.05	
Paycheck	12/29/2009	1730				3.72	21,104.77	
Paycheck	12/29/2009	1730				0.87	21,105.64	
Paycheck	12/29/2009	1730				0.48	21,106.12	
Paycheck	12/29/2009	1730				0.00	21,106.12	
Total Payroll Expenses							21,106.12	21,106.12
Post Office Box Rental	8/28/2009	1717				24.00	0.00	
Check							24.00	
Total Post Office Box Rental							24.00	24.00
Postage and Delivery (Postage and Delivery)							0.00	
Check	5/29/2009	1704				28.05	28.05	
Total Postage and Delivery (Postage and Delivery)							28.05	28.05
Printing and Reproduction (Printing and Repro							0.00	
Total Printing and Reproduction (Printing and Repro							0.00	
Professional Fees (Professional Fees)							0.00	
Accounting (Accounting Fees)							0.00	
Total Accounting (Accounting Fees)							0.00	
Consulting (Consulting Expense)							0.00	
Total Consulting (Consulting Expense)							0.00	
Legal Fees (Legal Fees)							0.00	
Total Legal Fees (Legal Fees)							0.00	
Professional Fees (Professional Fees) - Oth							0.00	
Total Professional Fees (Professional Fees) - (0.00	
Total Professional Fees (Professional Fees)							0.00	0.00
Program Expense (Program Expense)							0.00	
Check	8/28/2009	1715				24.00	24.00	
Check	10/15/2009	1719				15.00	39.00	
Check	10/30/2009	1721				19.95	58.95	
Total Program Expense (Program Expense)							58.95	58.95
Reconciliation Discrepancies							0.00	0.00
Total Reconciliation Discrepancies							0.00	0.00
Rent (Rent)							0.00	
Total Rent (Rent)							0.00	
Repairs (Repairs and Maintenance)							0.00	
Building Repairs (Building Repairs)							0.00	

Howard County Council On Aging
General Ledger
 As of December 31, 2009

7:18 PM
 05/12/10
 Accrual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Total Building Repairs (Building Repairs)							
Computer Repairs (Computer Repairs)							0.00
Check	1/2/2009	1686				1,000.00	0.00
Total Computer Repairs (Computer Repairs)							1,000.00
Equipment Repairs (Equipment Repairs)							
Total Equipment Repairs (Equipment Repairs)							0.00
Repairs (Repairs and Maintenance) - Other							
Total Repairs (Repairs and Maintenance) - Other							0.00
Total Repairs (Repairs and Maintenance)							0.00
Supplies (Supplies)							
Marketing (Marketing Supplies)							
Total Marketing (Marketing Supplies)							0.00
Office (Office Supplies)							
Check	1/30/2009	1689				66.41	66.41
Check	3/31/2009	1695				36.75	103.16
Check	4/30/2009	1700				116.43	219.59
Check	8/28/2009	1715				41.93	261.52
Check	10/30/2009	1721				74.43	335.95
Total Office (Office Supplies)							335.95
Supplies (Supplies) - Other							0.00
Total Supplies (Supplies) - Other							0.00
Total Supplies (Supplies)							335.95
Telephone (Telephone)							
General Journal	1/16/2009					44.41	44.41
General Journal	2/17/2009					48.86	93.27
General Journal	3/16/2009					47.20	140.47
General Journal	4/13/2009					47.20	187.67
General Journal	5/14/2009					47.37	235.04
General Journal	6/16/2009					47.31	282.35
General Journal	7/16/2009					47.31	329.66
General Journal	8/14/2009					47.49	377.15
General Journal	9/15/2009					53.63	430.78
General Journal	10/15/2009					50.70	481.48
General Journal	11/13/2009					50.64	532.12
General Journal	12/17/2009					50.66	582.78
Total Telephone (Telephone)							582.78
Utilities (Utilities)							
Gas and Electric (Gas and Electric)							0.00
							0.00

**Howard County Council On Aging
General Ledger
As of December 31, 2009**

Type	Date	Num	Name	Memo	Split	Amount	Balance
Total Gas and Electric (Gas and Electric)							0.00
Water (Water)							0.00
Total Water (Water)							0.00
Utilities (Utilities) - Other							0.00
Total Utilities (Utilities) - Other							0.00
Total Utilities (Utilities)							0.00
Interest Income (Interest Income)							0.00
Deposit	1/31/2009					-3.25	-3.25
Deposit	2/28/2009					-2.31	-5.56
Deposit	3/31/2009					-2.25	-7.81
Deposit	4/30/2009					-2.08	-9.89
Deposit	5/31/2009					-1.73	-11.62
Deposit	6/30/2009					-1.60	-13.22
Deposit	7/21/2009					-2,093.05	-2,106.27
Deposit	7/31/2009					-1.63	-2,107.90
Deposit	8/31/2009					-1.75	-2,109.65
Deposit	9/30/2009					-1.21	-2,110.86
Deposit	10/31/2009					-1.16	-2,112.02
Deposit	11/30/2009					-0.95	-2,112.97
Deposit	12/31/2009					-0.89	-2,113.86
Total Interest Income (Interest Income)						-2,113.86	-2,113.86
Other Income (Other Income)							0.00
Total Other Income (Other Income)							0.00
Other Expenses (Other Expenses)							0.00
Total Other Expenses (Other Expenses)							0.00
No acct							0.00
Total no acct							0.00
TOTAL						0.00	0.00