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FORM 990-EZ 2009

SCANNED JAN 14 2011

Form **990-EZ**

# 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)

- ▶ 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

OMB No 1545-1150

**2009**

**Open to Public Inspection**

<b>A</b> For the 2009 calendar year, or tax year beginning <b>9/1/2009</b> , and ending <b>8/31/2010</b>	
<b>B</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	<b>C</b> Name of organization <b>Indiana Farm Bureau</b> <b>Hendricks County Farm Bureau, Inc</b> Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <b>P.O. Box 367</b> City, town, or country State ZIP + 4 <b>Danville IN 46122-0367</b>
<b>D</b> Employer identification number <b>35-0887134</b>	<b>E</b> Telephone number <b>(317) 692-7851</b>
<b>F</b> Group Exemption Number <b>0963</b>	
<b>G</b> Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	
<b>H</b> Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	

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

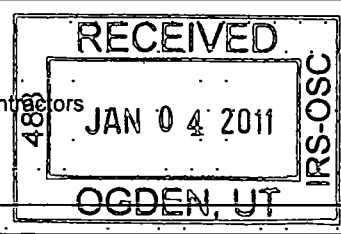
**I** Website: ▶ **n/a**

**J** Tax-exempt status (check only one)— ☒ 501(c) ( 5 ) ◀ (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 ▶ \$ **100,684**

<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (See the instructions for Part I.)			
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	<b>0</b>
	<b>2</b> Program service revenue including government fees and contracts . . . . .	<b>2</b>	<b>0</b>
	<b>3</b> Membership dues and assessments . . . . .	<b>3</b>	<b>30,397</b>
	<b>4</b> Investment income . . . . .	<b>4</b>	<b>70,287</b>
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	<b>0</b>
	<b>5b</b> Less cost or other basis and sales expenses . . . . .	<b>5b</b>	<b>0</b>
	<b>5c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	<b>0</b>
	<b>6</b> Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/> . . . . .		
	<b>6a</b> Gross revenue (not including \$ 0 of contributions reported on line 1) . . . . .	<b>6a</b>	<b>0</b>
<b>Expenses</b>	<b>6b</b> Less direct expenses other than fundraising expenses . . . . .	<b>6b</b>	<b>0</b>
	<b>6c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	<b>6c</b>	<b>0</b>
	<b>7a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>	
	<b>7b</b> Less cost of goods sold . . . . .	<b>7b</b>	
	<b>7c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>	<b>0</b>
	<b>8</b> Other revenue (describe ▶ ) . . . . .	<b>8</b>	<b>0</b>
	<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	<b>9</b>	<b>100,684</b>
	<b>10</b> Grants and similar amounts paid (attach schedule) . . . . .	<b>10</b>	<b>15,114</b>
	<b>11</b> Benefits paid to or for members . . . . .	<b>11</b>	
<b>Net Assets</b>	<b>12</b> Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	<b>6,963</b>
	<b>13</b> Professional fees and other payments to independent contractors . . . . .	<b>13</b>	<b>2,240</b>
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	<b>44,661</b>
	<b>15</b> Printing, publications, postage, and shipping . . . . .	<b>15</b>	<b>658</b>
	<b>16</b> Other expenses (describe ▶ See Attached Statement ) . . . . .	<b>16</b>	<b>35,067</b>
	<b>17</b> Total expenses. Add lines 10 through 16 . . . . .	<b>17</b>	<b>104,703</b>
	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	<b>-4,019</b>
<b>19</b> 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) . . . . .	<b>19</b>	<b>206,371</b>	
<b>20</b> Other changes in net assets or fund balances (attach explanation) . . . . .	<b>20</b>	<b>0</b>	
<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	<b>21</b>	<b>202,352</b>	



<b>Part II Balance Sheets.</b> 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.)		
	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	<b>100,680</b>	<b>104,515</b>
<b>23</b> Land and buildings . . . . .	<b>105,691</b>	<b>97,837</b>
<b>24</b> Other assets (describe ▶ See Attached Statement ) . . . . .	<b>0</b>	<b>0</b>
<b>25</b> Total assets . . . . .	<b>206,371</b>	<b>202,352</b>
<b>26</b> Total liabilities (describe ▶ See Attached Statement ) . . . . .	<b>0</b>	<b>0</b>
<b>27</b> Net assets or fund balances (line 27 of column (B) must agree with line 21) . . . . .	<b>206,371</b>	<b>202,352</b>

P 23

**Part III Statement of Program Service Accomplishments** (See the instructions for Part III.)What is the organization's primary exempt purpose? See statement 1 attached

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

<b>28</b>	see statement 2		
	(Grants \$ 0 ) If this amount includes foreign grants, check here . <input type="checkbox"/>	<b>28a</b>	0
<b>29</b>			
	(Grants \$ 0 ) If this amount includes foreign grants, check here . <input type="checkbox"/>	<b>29a</b>	0
<b>30</b>			
	(Grants \$ 0 ) If this amount includes foreign grants, check here . <input type="checkbox"/>	<b>30a</b>	0
<b>31</b>	Other program services (attach schedule)		
	(Grants \$ 0 ) If this amount includes foreign grants, check here . <input type="checkbox"/>	<b>31a</b>	0
<b>32</b>	<b>Total program service expenses.</b> (add lines 28a through 31a)	<b>32</b>	0

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
James Loughmiller PO Box 367 Danville IN 46122-0367	Title President Hr/WK 5 00	1,490	0	0
Ginny Edwards PO Box 367 Danville IN 46122-0367	Title Secretary Hr/WK 4 00	1,240	0	0
Joan Truax PO Box 367 Danville IN 46122-0367	Title Women's Leader Hr/WK 4 00	960	0	0
Jerry Chandler PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 4 00	-	0	0
Dale Gladden PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1.00	210	0	0
George Gladden PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	-	0	0
Phyllis Gladden PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1.00	90	0	0
Duane Hugel PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	120	0	0
Fallon Jackson PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	150	0	0
Meredith Kincaid PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	150	0	0
Meeda Lentz PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	30	0	0
Margaret McCutcheon-Gladden PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	310	0	0
Larry Pullam PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	460	0	0
William Rawlings PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	240	0	0
Ross Riggs PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	-	0	0
Jason Summers PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	120	0	0
Roberta Thomas PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1.00	210	0	0
Susie Truax PO Box 367 Danville IN 46122-0367	Title Director Hr/WK 1 00	120	0	0

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

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.		X
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
<b>35</b> 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		
<b>a</b> 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?		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>36</b> 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		X
<b>37 a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. <b>37a</b> 0		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?		X
<b>38 a</b> 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?		X
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved. <b>38b</b> 0		
<b>39</b> Section 501(c)(7) organizations Enter		
<b>a</b> Initiation fees and capital contributions included on line 9 <b>39a</b>		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities. <b>39b</b>		
<b>40 a</b> Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <b>0</b> , section 4912 <b>0</b> , section 4955 <b>0</b>		
<b>b</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 <b>40b</b> n/a		
<b>c</b> 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		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		
<b>e</b> 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 <b>40e</b>		X
<b>41</b> List the states with which a copy of this return is filed <b>INDIANA</b>		
<b>42 a</b> The organization's books are in care of <b>Indiana Farm Bureau</b> Telephone no <b>(317) 692-7851</b> Located at <b>225 S. East Street</b> City <b>Indianapolis</b> ST <b>IN</b> ZIP + 4 <b>46202</b>		
<b>b</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)? <b>42b</b>		X
If "Yes," enter the name of the foreign country		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? <b>42c</b>		X
If "Yes," enter the name of the foreign country		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <b>43</b> N/A		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ <b>44</b>		X
<b>45</b> 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 <b>45</b>		X

**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. **Not applicable**

- 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. **Yes** **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. **46** n/a
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. **47** n/a
- 49 a** Did the organization make any transfers to an exempt non-charitable related organization? **48** n/a
- b** If "Yes," was the related organization a section 527 organization? **49a** n/a
- 49b** n/a
- 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."

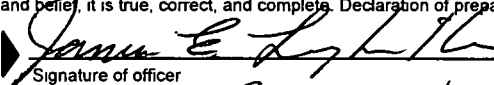
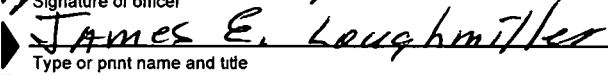
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Name None Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0
Name Str City ST ZIP	Title Hr/WK 00	0	0	0

**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
Name None Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		

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

<b>Sign Here</b>	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.			
	 Signature of officer		Date <u>12/21/10</u>	
<b>Paid Preparer's Use Only</b>	 Type or print name and title		Date <u>12</u>	
	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4	Date 12/8/2010	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions) EIN <u>▶</u> Phone no <u>▶ (317) 692-7851</u>

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

Explanations (990-EZ)

Reasonable Cause

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

General Explanation

	Part	Line	Explanation
1	III		Represent the farmer's voice on issues related to agriculture, educate the consumer and promote
2			farm products, keep members abreast of policies and new developments
3			
4			
5			
6			
7			
8			
9			
10			

## 11,500

[illegible]

**Part I, Line 16 (990-EZ) - Other Expenses**

35,067

1	Travel	1	937
2	Meals and entertainment	2	0
3	Fundraising	3	
4	Amortization	4	0
5	Conferences, conventions, and meetings	5	5,542
6	Depreciation	6	0
7	Depletion	7	
8	Equipment rental and maintenance	8	
9	Interest	9	
10	Supplies	10	
11	Telephone	11	
12	Unrelated business income taxes	12	140
13	Membership services	13	0
14	Ag Promotion	14	17,627
15	District Dues	15	734
16	Miscellaneous Expenses	16	479
17	Building Expenses for leased space	17	9,608
18	Unrelated Business Income Taxes, State	18	0
19	Political Contributions	19	0
20		20	
21		21	
22		22	
23		23	
24		24	
25		25	
26		26	
27		27	
28		28	



#### **Part IV (990-EZ) - List of Officers, Directors, Trustees, and Key Employees**

[illegible]

Hendricks County Farm Bureau, Inc.  
35-0887134

8/31/2010      year end

Statement 2

**Form 990-EZ, Page 2, Part III – Organization's Program Achievement or Accomplishments**

**Line 28** – Hendricks County Farm Bureau, Inc. sponsored a legislative breakfast. Hendricks County Farm Bureau co-sponsors this event while the General Assembly is in session. This gives Hendricks County residents the opportunity to meet their State Legislators. Breakfast is served free of charge for attendees, a brief report on legislative happenings is given, and a question and answer session follows.

Four Hendricks County Farm Bureau Board Members contributed their time to carryout this event. Three separate meetings were held; one on each of the last Mondays for the months of January, February, and March. Each of the three meetings lasted approximately 1 ½ hours, with an average attendance of 160 people at each meeting.

The objective of this activity is to inform the public about state legislative activities during the legislative session.

Hendricks County Farm Bureau paid \$3,031 for breakfast and building rental.

Total contributed to achievement #1      \$3,031

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Hendricks County Farm Bureau, Inc.  
35-0887134

8/31/2010 year end

Statement 2

**Line 29** – Hendricks County Farm Bureau, Inc. co-sponsors the Read, Taste, and Touch program for preschool children. The program encourages reading books, tasting nutritious food, and touching agriculture to help preschool children build a better foundation in science. Children had the opportunity to participate in story time, craft time, snack time, and barn time.

This program was held each month from September to June at local libraries and the Hendricks County Extension Office and for 5 days at the Hendricks County Fair in July. More than 1,000 people were involved in this program, including volunteers from the Hendricks County Farm Bureau and Extension Office, the preschool children who participated in the program, and their parents.

15 volunteers contributed 7.5 hours to carryout the program activities during the five days at the fair. Approximately 30 volunteers contributed their time to the program throughout the year.

The objective of this program is to teach preschool children about animal care and food agriculture.

Hendricks County contributed a total of \$6,500 to Purdue University for further research in this field.

Total contributed to achievement #2                      \$6,500

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Hendricks County Farm Bureau, Inc.  
35-0887134

8/31/2010      year end

Statement 2

**Line 30** - Hendricks County Farm Bureau, Inc. conducts an "Ag in the Classroom" program, in which a volunteer visits K-12 students throughout the year at their respective public, private, and home school locations with the purpose of bringing a farmer and farm products into the classroom to teach students how agriculture affects them. As another part of this program, Hendricks County Farm Bureau hosts all the fourth grade students in the county at an agricultural fair on Ag Day. The students come to the Hendricks County Fairgrounds and meet with farmers to learn how agriculture affects their lives. There are animals to pet and products to taste. Teachers receive packets that they can use in the classroom to further explain the importance of agriculture in Indiana. 1,290 fourth grade students attended the agricultural fair.

One volunteer works at coordinating these events year-round, with approximately 30 other volunteers contributing throughout the year.

The objective of this program is to teach children about farmers and the work they do in Hendricks County and about the Indiana agricultural industry.

Hendricks County contributed a total of \$1,751 to send a volunteer to the National "Ag in the Classroom" Conference and for supplies and insurance for Ag Day.

Total contributed to achievement #3      \$1,751

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**ASSET DEPRECIATION SHORT REPORT**  
**HENDRICKS COUNTY FARM BUREAU Aug. 31, 2010**

Sorted ASSET A/C#  
 Method 1-FEDERAL-Std Conv Applied

Range 1600-00 - 1610-00  
 Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 1600-00 - BUILDING								
08/31/85	Building	SL/35 00	204,650 57	0 00	204,650 57	149,541 57	5,847 00	155,388 57
05/19/94	Lights	MSL/10 00	1,085 06	0 00	1,085 06	1,085 06	0 00	1,085 06
10/31/98	Wallpaper office	MSL/ 5 00	2,627 57	0 00	2,627 57	2,627 57	0 00	2,627 57
11/16/98	Carpet	MSL/ 5 00	9,655 90	0 00	9,655 90	9,655 90	0 00	9,655 90
11/16/98	Private offices	MSL/15 00	24,121 28	0 00	24,121 28	17,353 28	1,608 00	18,961 28
11/14/99	Accoustical tile (board room)	MSL/10 00	5,024 21	0 00	5,024 21	4,916 21	108 00	5,024 21
08/09/00	Roof	MSL/20 00	5,819 30	0 00	5,819 30	2,631 30	291 00	2,922 30
Grand totals	1600-00 - BUILDING (7 assets)		252,983 89	0 00	252,983 89	187,810 89	7,854 00	195,664 89
ASSET A/C#: 1610-00 - FURNITURE & EQUIPMENT								
01/25/84	COAT RACK W/ HANGERS (1)	MA200/ 7 00	237 56	0 00	237 56	237 56	0 00	237 56
02/06/84	GE ELECTRIC OVEN (1)	MA200/ 7 00	410 00	0 00	410 00	410 00	0 00	410 00
02/06/84	GE REFRIGERATOR (1)	MA200/ 7 00	610 00	0 00	610 00	610 00	0 00	610 00
02/09/84	FOLDING TABLES, TEAK TOP (6)	MA200/ 7 00	815 22	0 00	815 22	815 22	0 00	815 22
02/09/84	STACK CHAIRS (50)	MA200/ 7 00	861 00	0 00	861 00	861 00	0 00	861 00
02/05/91	ZENITH MDL SG5740 27" TELEVISION S	MA200/ 7 00	364 99	0 00	364 99	364 99	0 00	364 99
02/05/91	RCA MDL VR300 VHS VIDEO CASSETTE R	MA200/ 7 00	74 99	0 00	74 99	74 99	0 00	74 99
Grand totals	1610-00 - FURNITURE & EQUIPMENT (7 assets)		3,373 76	0 00	3,373 76	3,373 76	0 00	3,373 76
Grand totals for all accounts: (14 assets)			256,357 65	0 00	256,357 65	191,184 65	7,854 00	199,038 65

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr 179	Prior Yr 179	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	256,357 65	0 00	0 00	256,357 65	191,184 65	7,854 00	199,038 65	57,319 00
Less Inactive Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Disposed Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Traded Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Net Totals (Active Assets)	256,357 65	0 00	0 00	256,357 65	191,184 65	7,854 00	199,038 65	57,319 00
Total Additional First Year Depreciation Taken at 30% Rate:				0.00				
Total Additional First Year Depreciation Taken at 50% Rate:				0.00				
Total Additional First Year Depreciation Taken:				0.00				