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Form,

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No 1545-0047 2010 Open to Public

817-594-2704

X Yes

Form 990 (2019)

Phone no

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection For the 2010 calendar year, or tax year beginning and ending Medical Education Foundation of the Check if applicable **Employer identification number** C Name of organization Address change American College of Osteopathic Obs 38-3499619 Doing Business As Name change Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Initial return 817-377-0421 120 8851 Camp Bowie West Terminated City or town, state or country, and ZIP + 4 Amended return Fort Worth ТX 76116 185,170 G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Valerie Brennan, CAE, CEO Yes H(b) Are all affiliates included? 8851 Camp Bowie West, Suite 120 If "No," attach a list (see instructions) Fort Worth X 501(c)(3) 501(c) (4947(a)(1) or website: www.mefacoog.org H(c) Group exemption number ▶ Year of formation 1999 X Corporation Trust MI Form of organization M State of legal domicile Part 1 Summarv 1 Briefly describe the organization's mission or most significant activities See Schedule O Activities & Governance 2 Check this box ▶ I if the organization discontinued its operations or disposed of more than 25% of its net assets 10 3 Number of voting members of the governing body (Part VI, line 1a) 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 10 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 CCEI 7b 1RS-054 **Current Year** Pnor Year 147,531 125,145 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) -12,341 10 Investment income (Part VIII, column (A), lines 3, 4, and 74 9,114 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and TapEN 6,333 134,259 12 Total revenue - add lines 8 through 11 (must equal Part VIII, colore 141,523 20,500 1,000 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 4,910 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 157,233 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 183,604 204,104 158,233 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -23,974-62,58119 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 668,138 622,897 50,000 10,000 21 Total liabilities (Part X, line 26) 612,897 618,138 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, heclare 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 LO [⊏] Sign Signature of officer Date Valerie Brennan, **Executive Director** Here Type or print name and title Print/Type preparer's name Preparer's signature PTIN Date Check Paid Peter H. Morgan CPA Peter H. Morgan CPA 05/09/11 self-employed P00051428 Preparer MORGAN & SNEED, 75-1999675 GEORGE . Firm's EIN ▶ Firm's name **Use Only** 1849 WALL STREET

WEATHERFORD,

ТX

76086-6298

CHAMPICO OCCUPANTO

CLIMIANO

Form 990 (2010) Medical Education Foundation of the 38-3499619

Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 2 X Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, X 5 Part III 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," X 6 complete Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," X complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-X 10 endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D, Part VI 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes." complete Schedule D. Part VII 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete X Schedule D, Parts XI, XII, and XIII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if X the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule E. 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 X organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." complete Schedule G, Part III 19 X Did the organization operate one or more hospitals? If "Yes," complete Schedule H X 20a 20a b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) 20h

Form 990 (2010) Medical Education Foundation of the 38-3499619 Part IV Checklist of Required Schedules (continued)

	attive Checkist of Required Schedules (Continued)				-	
24	Did the expense to part more than \$5,000 of exerts and other applicance to applicaments and expenses to applications.				Yes	No
21	Did 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 1? If "Yes," complete Schedule I, Parts I and II			21	ł	x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		T	-	1	<u> </u>
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		Ī			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			- 1		
	employees? If "Yes," complete Schedule J		- 1	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		Ī			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		ļ	- 1	1	
	through 24d and complete Schedule K. If "No," go to line 25			24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year					
	to defease any tax-exempt bonds?			24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			1		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I		Ĺ	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			- 1		1
	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		Ļ	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		1			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		ŀ			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?		ĺ			l
	If "Yes," complete Schedule L, Part III		ļ	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					!
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		}	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		Ì			
	Schedule L, Part IV		ŀ	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		1			.
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		}	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		}	29		^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		1	20		x
31	conservation contributions? If "Yes," complete Schedule M			30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		Ì	31	 -	├ ^
J-2	complete Schedule N, Part II			32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		ļ		 	+*
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			33	l	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,				 -	†
	IV, and V, line 1			34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		X
а	Did the organization receive any payment from or engage in any transaction with a			-		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,					1
	Part V, line 2	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable					1
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,				1	1
	Part VI			37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		İ			
	19? Note. All Form 990 filers are required to complete Schedule O			38		<u> </u>
					004	^

Form'990 (2010) Medical Education Foundation of the 38-3499619

Part V Statements Regarding Other IRS Filings and Tax Compliance

T a	Check if Schedule O contains a response to any question in this P	art V				П
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	2			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	<u> </u>			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	d		1	:	
	reportable gaming (gambling) winnings to prize winners?			1c	X	
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	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax r			2b	<u> </u>	<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruc	tions)		1		. ,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	}	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or otherwise an executive account or otherwise account or oth	•				
	over, a financial account in a foreign country (such as a bank account, securities account, or othe	er financiai		40		x
	account)? If "Yes," enter the name of the foreign country			4a		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finan	ocal Accounts	•			I
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		•	5a	1	х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b	†	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	iouotion.		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and d	lid the		1-55	+	
	organization solicit any contributions that were not tax deductible?			6a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contril	butions or				
_	gifts were not tax deductible?			6ь	1	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for goods				I
	and services provided to the payor?			7a_		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	ıt was				
	required to file Form 8282?		•	7c	<u> </u>	ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	_7d				1
9	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	efit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of			7f	-	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file			7 <u>g</u>	┼	_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		a Form 1098-C?	7h	 	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support	_				1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor	oring		•		ŧ
_	organization, have excess business holdings at any time during the year?			8		-
9	Sponsoring organizations maintaining donor advised funds.			ļ	1	Ī
a	Did the organization make any taxable distributions under section 4966?			9a 9b	+	
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter			30	+	+
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	.1			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	106				I
11	Section 501(c)(12) organizations. Enter		<u>- 1</u>			1
а	Gross income from members or shareholders	11a	,			Ī
b	Gross income from other sources (Do not net amounts due or paid to other sources					1
	against amounts due or received from them)	111	<u>, </u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		- 1	12a	,	1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12t	.			T
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>				1
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	1	
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13t	o		1	
С	Enter the amount of reserves on hand	130	:			1
14a	Did the organization receive any payments for indoor tanning services during the tax year?			148	1 -	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schi	edule O		141	ə l	1

2

3

5

6

b

а

b

13

14

15

17

19

20

of the governing body?

the year by the following.

The governing body?

rise to conflicts?

Section C. Disclosure

The organization's CEO, Executive Director, or top management official

organization's exempt status with respect to such arrangements?

X Own website Another's website X Upon request

organization: ▶ Steve P. Buchanan, D.O.

and financial statements available to the public

List the states with which a copy of this Form 990 is required to be filed ▶

for public inspection. Indicate how you make these available. Check all that apply

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

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

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,

State the name, physical address, and telephone number of the person who possesses the books and records of the

Other officers or key employees of the organization

with a taxable entity during the year?

15a

15b

16a

16b

X

Fort Worth 817-377-0421 TX 76116 DAA Form 990 (2010)

MT

8851 Camp Bowie West, Suite 120

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

Check if Schedule O contains a response to any question in this Part VII

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

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

- 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, if any 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

(A) Name and Title	(B) Average	Posi	tion ((C checl		hat ap	nhv)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Tibe	hours per week (describe hours for related organizations in Schedule O)	Individual trustee		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Patricia Arnett,										_
Chair	1.00	X		X		<u> </u>		0	0	0
(2) Ernest Thompson									_ [_
Vice Chair	1.00	X		X				0	0	0
(3) Carolyn Quist, D										
Sec/Treas.	1.00	X		X				0	0	0
(4) Robert Debbs, D.										
Trustee	1.00	X						0	. 0	0
(5) Sue Leasure										
Trustee	1.00	X						0	0	0
(6) 2										
Trustee	1.00	X						0	0	0
(7) Rhonda Kobold, D	.0.								-	·
Century Member Trust	1.00	X				1		0	0	0
(8) Kathryn Saponaro	, D.O.									
Trustee/CPC	1.00	X				1		o	0	0
(9) Steve Buchanan,										
Executive VP	4.00	X		x				0	0	0
(10) Laura Dalton, D.										
Trustee	1.00	X			ľ	1		0	0	0
(11) Mark Barbee									-	
Trustee	1.00	X				}		o	0	0
	CAE, CEC									-
Executive Director	40.00			x				o	0	0
(13)	<u> </u>									
(14)										
(15)										
(16)							<u></u>			
	1	. 1			1	1			İ	i

rm 990 (2010)	Medical	Education	Foundation	of	the	38-3499619

	(A) Name and Title	(B) Average hours per	_	_		k all t	hat ap	_	(D) Reportable compensation	(E) Reportable compensation from	Est	(F) imate ount c		
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comp fro orga and	other ensate m the nizate relate nizate	on on ed	
(17)	·		-			_								
(18)									-				-	-
(19)									i	• • •			·· <u> </u>	
(20)														
(21)							 							
(22)		<u> </u>						-						
(23)								-						
(24)		 												
(25)											,			
(26)								-						
(27)	-			-										
(28)	± <u></u>		-				-							
1b	Sub-total		<u> </u>		1	<u>!</u>	I	>						_
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectic	n A				>			 			
2	Total number of individuals (increportable compensation from	•		to th	nose	liste	d abo	ove)	who received more than \$1	100,000 in				
3	Did the organization list any fo	rmer officer, dire	ctor	or tn	ustee	, ke	y em	ploy	ee, or highest compensated	l	Γ	-	Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line	1a, is the sum o	f rep	ortal	ble c	omp	ensa	tion				3		X
	organization and related organ individual	iizations greater t	han	\$150),000	17 It	Yes,	" co	mplete Schedule J for such			4		X
5	Did any person listed on line 1 for services rendered to the or									dividual	1	5	-	x
Sec	tion B. Independent Contract													
1	Complete this table for your five compensation from the organia	zation.	nsat	ed in	depe	ende	nt co	ntra		· 				
	Name and	(A) d business address						\vdash	Descri	(B) plion of services		Con	(C) npensati	on
			·			_		1						
														
			_		•			1						
2	Total number of independent or received more than \$100,000		-						e listed above) who	0				

Pa	rt V	II Staten	nent of Revenue	<u> </u>					
		•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
रे रे	1a	Federated carr	npaigns 1a					, , , , , , , , , , , , , , , , , , ,	
틸	b	Membership di	ues 1t		25,000	i i		1	
ağ,g	С	Fundraising ev	ents 1c		5,755			I	
	d	Related organi	zations 1c	1				I	
Simis,	0	Government grants ((contributions) 1e	<u> </u>		Į.		I	
흕븳	f	All other contribution	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			Į.	ļ		
흔힘		and similar amounts	<u></u>		94,390	I			
Contributions, gifts, grants and other similar amounts	9		ns included in lines 1a-1f	\$		105 145			
<u>.</u>	<u>h</u>	Total. Add line	<u>s 1a–1f</u>		Busn. Code	125,145			
ě	2a				Busn. Code	Ť		Ī	
Se	b								
<u>8</u>	c								
Še	d								
E	8								
Program Service Revenue	f	All other progra	am service revenue						· · · · · · · · · · · · · · · · · · ·
<u>-</u>	g				>				
	3		ome (including divide	ends, interes	st,				
		and other simil	· ·		. ▶	2,415			2,415
	4		ivestment of tax-exer	npt bond pr	oceeds P		• • • • • • • • • • • • • • • • • • • •		
	5	Royalties	(ı) Real	(1)	Personal				
	6a	Gross Rents	(i) iveal	("//	i ersonai	1			
		Less rental exps				1			
	c	Rental inc or (loss)				I			
		Net rental inco			•				
	7a	Gross amount from sales of assets	(i) Secunties	(11) Other				
		other than inventory	57,61	0					
	b	Less cost or other							
		basis & sales exps	50,91						
		Gain or (loss)	6,69	9			5 500		
	d	Net gain or (los	•		•	6,699	6,699		
en	8a		om fundraising events						
Other Reven		(not including \$	reported on line 1c)						
Re		See Part IV, line		a					
ther	ь	Less direct ex		ь					
Ŏ			(loss) from fundraisi	ng events	•				
	9a	Gross income fro	om gaming activities.						
		See Part IV, line	19	a					
		Less direct ex		ь					
			(loss) from gaming a	ctivities		-		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	10a	Gross sales of							
		returns and all		a					
		Less cost of g		b[
	<u> </u>		(loss) from sales of i	nventory	Busn. Code	,	,		
	11a					1			Ī
	b	•			-				
	c					,			
	d	All other reven	ue						
	е	Total. Add line	es 11a–11d						
	12	Total revenue	. See instructions		>	134,259	6,699	0	2,415

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	1,000	1,000		
2	Grants and other assistance to individuals in				
	the U S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	_			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)	·			
	and section 403(b) employer contributions)		}		
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	59,268		59,268	
b	Legal	204		204	
	Accounting	9,488		9,488	
d		,		,	
	Professional fundraising services See Part IV, line 17				
f	Investment management fees	2,374		2,374	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses			**	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,015		12,015	
20	Interest			, :	_
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,253		1,253	
24	Other expenses. Itemize expenses not covered			1,233	
-7	above (List miscellaneous expenses in line 24f If				1
	line 24f amount exceeds 10% of line 25, column				‡
	(A) amount, list line 24f expenses on Schedule O)				‡
а	Resident Reporter Program	41,694	41,694		T
b	Ortho Research Grant	7,154			-
c	Fundraising Expenses	4,910			4,910
d	Community Service Project	3,934			-,520
e	Lifelong Learning Program	3,000			
	All other expenses	11,939			-
	Total functional expenses. Add lines 1 through 24f	158,233		85,102	
26					-/
_5	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
DAA				•••	Form 990 (2010)

Form 990 (2010) Medical Education Foundation of the 38-3499619

Part	X Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest bearing	497,084	1	433,964
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	15,000	4	
5	Receivables from current and former officers, directors, trustees, key			
- 1	employees, and highest compensated employees. Complete Part II of		1	
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		1	
	employers and sponsoring organizations of section 501(c)(9) voluntary		1	
	employees' beneficiary organizations (see instructions)		6	
뚕 7	Notes and loans receivable, net		7	
Assets 8	Inventones for sale or use		8	
و 🎙 🏲	Prepaid expenses and deferred charges		9	
10:	a Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D 10a			
1	Less accumulated depreciation 10b		10c	
11	Investments—publicly traded securities	154,659	11	180,508
12	Investments—other secunties See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	1,395	15_	8,425
16	Total assets. Add lines 1 through 15 (must equal line 34)	668,138	16	622,897
17			17	
18	Grants payable		18	
19	Deferred revenue	50,000	19	10,000
20	Tax-exempt bond liabilities		20	
ပ္ထု 21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	Payables to current and former officers, directors, trustees, key			
<u> </u>	employees, highest compensated employees, and disqualified persons			
<u>.</u> 2:	Complete Part II of Schedule L	<u></u>	22	
23	Secured mortgages and notes payable to unrelated third parties		23	_
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	50,000	26	10,000
တ္သ	Organizations that follow SFAS 117, check here ▶ 🏻 and complete			
ဗို	lines 27 through 29, and lines 33 and 34.			
[편 27	Unrestricted net assets	493,437	27	484,111
മ്മ് 28	Temporanly restricted net assets	124,701	28	128,786
[29	· · · · · · · · · · · · · · · · · · ·		29	
<u>.</u>	Organizations that do not follow SFAS 117, check here ▶ ☐ and	Į.		
5	complete lines 30 through 34.			
<u>v</u> 30	Capital stock or trust principal, or current funds		30	·
8 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ÿ 32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets or Fund Balances 32 33 37 38 39 30 30 30 30 30 30 30 30 30 30 30 30 30	Total net assets or fund balances	618,138		612,897
Ž 34	Total liabilities and net assets/fund balances	668,138	34	622,897

от	990 (2010) Medical Education Foundation of the 38-3499619			Pag	e 12
Pa	rt XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1_1_	13	4,2	<u> 259</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	15	8,2	233
3	Revenue less expenses Subtract line 2 from line 1	3	-2	23,9) 74
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		.8,1	
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1	8,7	<u> 133</u>
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	61	.2,8	397
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990.			I	:
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in			ı	
	Schedule O			1	:
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1 1		ı
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				į
	Schedule O			1	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1	
	issued on a separate basis, consolidated basis, or both		1 1		į
	Separate basis Consolidated basis Both consolidated and separate basis				Ē
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			ļ	ì
	the Single Audit Act and OMB Circular A-133?		3a		X
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		L
			Form	990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

2010

Open to Public Inspection

Medical Education Foundation of the Name of the organization **Employer Identification number** American College of Osteopathic Obs 38-3499619 Part 1 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 t c Type III-Functionally integrated Type II 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). 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 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 Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(u) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in ganization in col support col (i) of your (i) organized in the above or IRC section governing document? support? US? (see instructions)) Yes No Yes Nο (A) (B) (C) (D) (E) Tota!

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	tion A. Public Support		•				
Calen	dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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				ļ		
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						
	tion B. Total Support					,	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4			ļ <u>.</u>	- 	ļ	
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	<u> </u>		<u></u>			
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first	, second, third, four	th, or fifth tax year	as a section 501(c)	(3)	
	organization, check this box and stop here						>
Sec	tion C. Computation of Public Su	pport Percen	itage				
14	Public support percentage for 2010 (line 6,	column (f) divided	d by line 11, column	(f))		14	%
15	Public support percentage from 2009 Sche					15	%
16a	33 1/3% support test—2010. If the organiz				3 1/3% or more, che	ck this	, r
	box and stop here. The organization qualif		•				▶ [_
b	33 1/3% support test—2009. If the organize check this box and stop here. The organize				is 33 1/3% or more),	▶ [
17a	10%-facts-and-circumstances test—2010 10% or more, and if the organization meets Part IV how the organization meets the "fac	the "facts-and-cir	rcumstances" test,	check this box and	l stop here. Explain	ıın	
b	organization 10%-facts-and-circumstances test—200	9. If the organizati	on did not check a	box on line 13-16:	a. 16b. or 17a. and l	line	▶ [
J	15 is 10% or more, and if the organization in Explain in Part IV how the organization med	meets the "facts-a	ind-circumstances"	test, check this bo	ox and stop here.		▶ [
40	supported organization	mat abadı a berri		470 or 47h obs	ak this have and are		
18	Private foundation. If the organization did instructions	not check a box (ווווופ ז3, ז6a, 16b	, 1/a, or 1/b, che	CK INIS DOX AND SEE		. •

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	<u> </u>					
Caler	dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	157,640	214,518	200,412	153,864	125,145	851,579
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				6,333	-	6,333
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	157,640	214,518	200,412	160,197	125,145	857,912
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						<u> </u>
8	Public support (Subtract line 7c from					,	
500	tion B. Total Support	<u> </u>	i	1	1		857,912
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	157,640	214,518	200,412	160,197	125,145	857,912
10a	Gross income from interest, dividends,	137,040	214,510		100,137	125,245	031,7322
iva	payments received on secunties loans, rents, royalties and income from similar sources		29,549	12,469	2,160	2,415	46,593
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		29,549	12,469	2,160	2,415	46,593
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
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,						
4.4	and 12.)	157,640	244,067	212,881	162,357	127,560	904,505
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	secona, tnira, fourth	ı, or ππη tax year as	s a section 501(c)(C))	▶ □
Sec	tion C. Computation of Public Su		age				
15	Public support percentage for 2010 (line 8,			f))		15	94.85%
16	Public support percentage from 2009 Sche		-	•••		16	95.65%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2010 (lin	ne 10c, column (f) d	ivided by line 13, co	olumn (f))		17	5 %
18	Investment income percentage from 2009					18	4 %
19a	33 1/3% support tests—2010. If the organ						. —
,	17 is not more than 33 1/3%, check this bo		-		_		• X
b	33 1/3% support tests—2009. If the organ						⊾ □
20	line 18 is not more than 33 1/3%, check this	-	-	-	· · · · · ·	nization	? -
20	Private foundation. If the organization did	HOL CHECK a DOX ON	ime 14, 19a, or 19	o, check this box ar	io see instructions		

Page 4

Schedule A (Form 990 or 990-EZ) 2010 Medical Education Foundation of the 38-3499619

Part IV . Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 2010 Open to Public Inspection

▶ Attach to Form 990. ▶ See separate instructions.

	of the organization edical Education Foundation of the				tion number
	merican College of Osteopathic Obs			9961	
Pa		nds or Other Similar Funds or Acc IV, line 6.	ounts.	Comp	lete if the
		(a) Donor advised funds	(b) i	unds and	other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				.=
5	Did the organization inform all donors and donor advisors in writing that t	he assets held in donor advised			
	funds are the organization's property, subject to the organization's exclusi	sive legal control?			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w	nting that grant funds can be used			
	only for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose			
	conferring impermissible private benefit?				Yes No
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" to Form 9	990, Pa	<u>irt IV, li</u>	ne 7.
1	Purpose(s) of conservation easements held by the organization (check a	<u> </u>			
	Preservation of land for public use (e g , recreation or education)	Preservation of an historically impor		area	
	Protection of natural habitat	Preservation of a certified historic st	ructure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conserv	ation contribution in the form of a conservation	n		
	easement on the last day of the tax year		£1		
				Held at th	e End of the Tax Yea
а	Total number of conservation easements		2a		
þ	Total acreage restricted by conservation easements		2b		
C	Number of conservation easements on a certified historic structure inclu-	• •	2c		
d	Number of conservation easements included in (c) acquired after 8/17/0	6, and not on a			
_	historic structure listed in the National Register	at the state of th	2d		
3	Number of conservation easements modified, transferred, released, exti	nguisned, or terminated by the organization of	uring the		
	tax year >	antad N			
4	Number of states where property subject to conservation easement is lo				
5	Does the organization have a written policy regarding the periodic monitor violations, and enforcement of the conservation easements it holds?	oring, inspection, handling of			Yes N
_	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ng conservation easements during the year			
6	Start and volunteer riodis devoted to monitoring, inspecting, and emoral	ing conservation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	onservation easements during the year			
•	▶ \$,			
8	Does each conservation easement reported on line 2(d) above satisfy th	ne requirements of section 170(h)(4)(B)			
	(i) and section 170(h)(4)(B)(ii)?				Yes N
9	In Part XIV, describe how the organization reports conservation easeme	ents in its revenue and expense statement, ar	ıd		
	balance sheet, and include, if applicable, the text of the footnote to the o	rganization's financial statements that describ	es the		
	organization's accounting for conservation easements				
Pa	Tt III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		milar A	ssets.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), no	t to report in its revenue statement and balan	ce sheet		
	works of art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furtherand	ce of		
	public service, provide, in Part XIV, the text of the footnote to its financia	Il statements that describes these items			
þ	If the organization elected, as permitted under SFAS 116 (ASC 958), to $$	report in its revenue statement and balance s	sheet		
	works of art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furtherand	ce of		
	public service, provide the following amounts relating to these items				
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$	
	(ii) Assets included in Form 990, Part X		•	\$	
2	If the organization received or held works of art, historical treasures, or o		the		
	following amounts required to be reported under SFAS 116 (ASC 958) r	elating to these items			
а	Revenues included in Form 990, Part VIII, line 1		•	\$	
b	Assets included in Form 990, Part X		•	\$	

che		<u>ucation Four</u>			3499619	Page 2
Pa	rt III Organizations Maintaining C	collections of Art,	Historical Treasu	ures, or Oth	<u>er Similar Asset</u>	s (continued)
3	Using the organization's acquisition, accession, a collection items (check all that apply)	and other records, check	k any of the following th	nat are a signific	ant use of its	
а	Public exhibition	d Loan	or exchange programs	6		
b	Scholarly research	e Othei				
c	Preservation for future generations	о <u>—</u> отно				
4	Provide a description of the organization's collect	tions and explain how th	nev further the organiza	ation's evenint n	urnose in Part	
7	XIV	aons and explain now a	icy further the organiza	nion o exempt p	urpood iii r urt	
_	During the year, did the organization solicit or rec	save denotions of art. h	etopoal transuras, or o	ther similar		
5						Yes No
Da	assets to be sold to raise funds rather than to be rt IV Escrow and Custodial Arran	maintained as part of the	te organization's collect	tion answer	ad "Ves" to Form	
ra	line 9, or reported an amount			tion answere	su les toloill	1000, 1 alt 14,
4.						
та	Is the organization an agent, trustee, custodian of	or other intermediary for	contributions or other	assets not		□ vaa □ Na
	included on Form 990, Part X?					☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XIV and	complete the following	table			A
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				10	
f	Ending balance				1f	
2a	Did the organization include an amount on Form	990, Part X, line 21?				Yes No
	If "Yes," explain the arrangement in Part XIV.					
Pa	rt V Endowment Funds. Comple	te if organization a	inswered "Yes" to	Form 990,	Part IV, line 10.	
		(a) Current year	(b) Pnor year	(c) Two years	back (d) Three years	back (e) Four years back
1a	Beginning of year balance					
b	Contributions		·			
C	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the year en	d balance held as			A	
	Board designated or quasi-endowment ▶	%				
	Permanent endowment ▶ %					
	Term endowment ▶ %					
_	Are there endowment funds not in the possession	on of the organization th	at are held and admini	stered for the		
	organization by.					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(ii)
h	If "Yes" to 3a(ii), are the related organizations lis	ted as required on Sch	edule R2			3b
4	Describe in Part XIV the intended uses of the or	·				
~	art VI Land, Buildings, and Equip			0		
	Description of investment	(a) Cost or other basis			c) Accumulated	(d) Book value
	Description of investment	(investment)	(other)	,	depreciation	(2) 200% 14.20
4-	Land	,	(/			
					1	
	Buildings			+	1	
	Leasehold improvements					
	Equipment					
	Other (Other)	15000 5 4 %	(0) 1- (0) 1	1		
ota	 Add lines 1a through 1e (Column (d) must equal 	aı ⊢orm 990, Part X, col	umn (B), line 10(c))		<u> </u>	

Schedule D (Fo	mm 990) 2010 Medical Education Foun	dation of the	38-3499619	Page 3
Part VII	Investments—Other Securities. See Form 990,			
	(a) Description of security or category	(b) Book value	(c) Method of v Cost or end-of-year	
	(including name of security)		Cost of end-of-year	market value
1) Financial d				
	d equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(E) (F)	•			
(· / (G)				
(H)				
(1)				
·_·	(b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII	Investments—Program Related. See Form 990), Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
			Cost of end-of-yea	i market value
(1)				
(2)	· · · · · · · · · · · · · · · · · · ·	-		
(3)				
(4)				
(5)	<u> </u>			
(6) (7)				
(8)				···
(9)		-		
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
<u></u>	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)		·····		
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 15)	<u> </u>		
Part X	Other Liabilities. See Form 990, Part X, line 25	(b) Amount		
1. Fadaral	(a) Description of liability	(b) Amount		
	income taxes	 		
(2)				
(3)		 		
(4)	·			
(5)		 		
(6)				
(7)				
(8)				
<u>(9)</u>		 	,	
(10)				
(11)	n (b) must equal Form 990, Part X, col. (B) line 25)	 	** *	,
	C 740) Footnote In Part XIV, provide the text of the footnote to	the organization's financial st	atements that reports the	
	, . comoto m ett. m., provido ale text of the foundt to			

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

DAA

che	dule D (Form 990) 2010 Medical Education Foundation of the 38-3499619)	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	134,259
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	158,233
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-23,974
4	Net unrealized gains (losses) on investments	4	18,733
5	Donated services and use of facilities	5	
6	Investment expenses	6	<u> </u>
7	Prior penod adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	18,733
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-5,241
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	rn_	
1	Total revenue, gains, and other support per audited financial statements	1	152,992
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a 18,733		
b	Donated services and use of facilities 2b		
С	Recovenes of prior year grants 2c		
d	Other (Describe in Part XIV)	1	
8	Add lines 2a through 2d	2e	18,733
3	Subtract line 2e from line 1	3	134,259
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	134,259
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	tur	1
1	Total expenses and losses per audited financial statements	1	158,233
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
C	Other losses 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	158,233
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	158,233

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIV Supplemental Information

Schedule D (Form 990) 2010 Medical Education Foundation of the 38-3499619

Part XIV Supplemental Information (continued)

Page 5

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Medical Education Foundation of the American College of Osteopathic Obs

Employer identification number 38-3499619

Form 990 - Organization's Mission or Most Significant Activities

To provide financial resources and fund raising activities to foster

continuing improvement in women's health care by supporting medical

education at the undergraduate, graduate and post graduate level, research

programs, faculty development and the development of educational networks

in women's healthcare.

Form 990, Part III, Line 4d - All Other Achievements

Gail Goldsmith Memorial Lectureship on Women's Health;

Scholarships; Lifelong Learning Program; Past Presidents Honorary Lecture;

Barbara Hawkes Honorary Lecture and Community Service Project.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The Form 990 is available at the organization's website in a pdf file. A secure log-in is required.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
MEFACOOG officers and members of the board of trustees annually sign a
conflict of interest disclosure. For each interest disclosed to the
President of the Board of Trustees, the President will determine whether
to:(a) take no action; (b) assure full disclosure to the Board of Trustees
and other individuals covered by this policy;(c) ask the person to recuse
from participation in related discussions or decisions within the MEFACOOG;
or (d) ask the person to resign from his or her position in the MEFACOOG
or, if the person refuses to resign, become subject to possible removal in

Name of the organization

Medical Education Foundation of the

Employer identification number 38-3499619

accordance with the MEFACOOG's removal procedures. The MEFACOOG's chief employed executive will monitor proposed or ongoing transactions for conflicts of interest and disclose them to the President in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred.

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

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	Related Organizations and Unrelated Partnerships	Unrelated F	Partnerships IV, line 33, 34, 35, 3	i6, or 37.		2010	.1
Department of the Treasury Internal Revenue Service	▶ Attach to	Attach to Form 990.	See separate instructions.	structions.			Open to Public Inspection	ان
Name of the organization	Medical Education Foundation of the American College of Osteopathic Obs					Employer Identifica 38-3499619	Employer Identification number 38–3499619	
Part I Identific	ntities (Complete if the	organization answered "Yes" to Form 990, Part IV, line 33.)	vered "Yes" to I	orm 990, Part	V, line 33.)			1
Z	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
(1)		;						
(2)			ļ					1
(3)								1
(4)								1
(5)								1
Part II Identific	Identification of Related Tax-Exempt Organizations (Conservations or more related tax-exempt organizations during the	Complete if the or	ganization ansv	vered "Yes" to F	orm 990, Part	Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had tax year.)	se it had	
ž	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes No	<u> </u>
(1) American College 8851 Camp Bowie W Fort Worth	college of Osteopathic Obs Bowie West, Suite 120 38-6094734 TX 76116	Education	MO	9		N/A	*	1
					;	:	:	}
(3)								
(4)								1
(5)								
For Paperwork Reduction	For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Sched	Schedule R (Form 990) 2010	10

75238 05/09/2011 2 08 PM

Page 2	(k) Percentage ownership				'		(h) Percentage ownership					190) 2010
34	General or managing partner?					t IV,	Perce owne					(Form
990, Part IV, line	Code V—UBI Gode V—UBI Gode V—UBI (Form 1065)					to Form 990, Par	(g) Share of end-of-year assets					Schedule R (Form 990) 2010
orm 9	(h) Disproportionate alloc ?					Yes"	96					
ered "Yes" to F	Share of end-of-year Day assets					ion answered " < year.)	(f) Share of total income					
anization answe x vear.)	(f) Share of total income Sha					if the organizati	(e) Type of entity (C corp. S corp. or trust)					
e org he tay	Share					plete or trus	<u> </u>					
9619 omplete if th ship during t	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)					Trust (Com	(d) Direct controlling entity					
the 38-3499619 Partnership (Comple ed as a partnership d	(d) Direct controlling entity					corporation or streated as a	(c) Legal domicile (state or foreign country)					
of is a P reate	(c) Legal domicale (state or foreign					is a C						1
Foundation ons Taxable a rganizations	(b) Primary activity					ons Taxable a	(b) Primary activity					
Schedule R (Form 990) 2010 Medical Education Foundation of the 38-3499619 Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	(a) Name, address, and EIN of related organization					Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization		·			
Schedule R (F		£	(2)	(3)	(4)	Part IV	ž	(3)	(2)	(3)	(4)	DAA

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Schedule R (Form 990) 2010 Medical Education Foundation of the 38-3499619

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s)
 - c Gift, grant, or capital contribution from other organization(s)
 - d Loans or loan guarantees to or for other organization(s)
 - - Loans or loan guarantees by other organization(s)
- Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- Lease of facilities, equipment, or other assets from other organization(s)
- Performance of services or membership or fundraising solicitations for other organization(s)
 - Performance of services or membership or fundraising solicitations by other organization(s)
 - m Shanng of facilities, equipment, mailing lists, or other assets
 - Shanng of paid employees
- Reimbursement paid to other organization for expenses 0
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

	(p)
resholds	
onships and transaction th	(c)
, including covered relation	(q)
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	

Method of determining amount involved					
Amount involved	1,000	3,915	41,728	13,625	
Transaction type (a-r)	Ħ	E .	ď	0	
(a) Name of other organization	American College of Osteopathic Obs	American College of Osteopathic Obs	American College of Osteopathic Obs	American College of Osteopathic Obs	
	3	(2)	(3)	(5)	

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Pâge 4

Schedule R (Form 990) 2010 Medical Education Foundation of the 38-3499619

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?	irtners in (3) ions?	(e) Share of end-of-year assets	Disprop	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	'(h) General or managing partner?	2 E C
			Yes	No		Yes	No	,	Yes	ş
(1)										
(2)										
(3)						_				}
(4)										
(5)										
(9)										
(1)										' <u></u>
(8)			_							1
(6)										
(10)										1
(11)										}
								Schedule R (Form 990) 2010	7 (066 m.	2010

Schedule R (Form 990) 2010 Medical Education Foundation of the 38-3499619

Page 5

Supplemental Information Part VII

Complete this part to provide additional information for responses to questions on Schedule R (see

instructions).

EIN: 38-3499619 Medical Education Foundation of the American College 4 Osteopatic Obstetricians and Gymcologists

Schedule D December 31, 2010

REALIZED CAPITAL GAIN AND LOSS SUMMARY

Gain or (Loss)	(109.05) LT (10.05) LT
Gair	
Cost Basis	466.95 161.47 161.47 161.47 135.40 135.40 135.93 1440.63 1440.
	00/00 = 0.
Sale Amount	357.90 119.30 119.30 119.31 119.31 119.31 119.31 119.31 119.31 119.31 119.31 119.31 119.31 12.19 13.19 13.19 13.19 13.19 13.10
u	
Date of Liquidation	01/11/10 01/11/10 01/11/10 01/11/10 01/11/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 02/10/10 02/11/10 03/24/10 03/24/10
Acquisition Dat	0000 0000 0000 0000 0000 0000 0000 0000 0000
Date of Acqu	01/07/09 01/23/09 02/12/09 02/12/09 02/12/09 02/12/09 09/13/09 09/13/09 09/13/09 09/13/09 09/13/09 01/13/09 01/13/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 02/02/09 04/03/09
	and Parish and Parish
ription	
Security Description	APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APPLE INC EBAY INC GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC COM EBAY INC COM EBAY INC COM EBAY INC COM EBAY INC COM EBAY INC COM EBAY INC COM EBAY INC COM COM EBAY INC COM COM EBAY INC COM COM COM COM COM COM COM COM COM CO
Quantity	6.0000 APO 2.0000 APO 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 GAP 1.0000 MYL 2.0000 MYL 2.0000 GBA 1.0000 EBA 1.0000 EBA 1.0000 GBA 1.0000 GBA 1.0000 GBA 1.0000 GBA 1.0000 GBA 1.0000 MOR 2.0000 MOR 2.0000 MOR 2.0000 MOR 2.0000 MOR 2.0000 MOR 2.0000 AMP 2.0000 AMP 2.0000 AMP 2.0000 AMP 3.0000 AMP 3.0000 AMP 2.0000 AMP 3.0000 AMP 3.0000 AMP 3.0000 AM
Qua	8.4.6.4.4.6.6.4.4.6.6.6.6.6.6.6.6.6.6.6.
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EIN: 38-3499619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

		REALIZED CAP	REALIZED CAPITAL GAIN AND LOSS SUMMARY	SUMMARY		
Quantity	Security Description	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
10.0000	CHESAPEAKE ENERGY OKLA	05/14/08	03/15/10	249.99	584.48	(334.49) LT
1.0000	ENERGY	80/60/90	03/15/10	25.00	60 75	_
9.0000		80/60/90	03/18/10	143.27	364.51	(221.24) LT
8.0000	CHESAPEAKE ENERGY OKLA	09/26/08	03/18/10	191.04	305.00	(113.96) L1
2 0000	CHESAPEAKE ENERGY OKLA	09/26/08	03/24/10	46.61	100.05	(29.64)
9.0000	CHESAPEAKE ENERGY OKLA	10/22/08	03/24/10	139.86	129.96	17 08.80 T. (80.80)
12.0000	CHESAPEAKE ENERGY OKLA	11/05/08	03/24/10	2/8/7	302.81	[23.09]
0000'9	CHESAPEAKE ENERGY OKLA	04/06/09	03/24/10	139.86	116.40	
2.0000	FREEPRT-MCMRAN CPR & GLD	03/13/09	03/26/10	158.98	73.32	
1.0000	FREEPRT-MCMRAN CPR & GLD	04/03/09	03/26/10	79.49	43.29	
2.0000	INTL GAME TECHNOLOGY	60/90/80	02/26/10	34.93	39 50	(4.57) SI
8.0000	INTL GAME TECHNOLOGY	08/12/09	02/26/10	139.74	153.69	
3.0000	INTL GAME TECHNOLOGY	08/12/09	03/03/10	53.67	57.64	
12.0000	INTL GAME TECHNOLOGY	11/09/09	03/03/10	214 72	245.16	_
16.0000	MARVELL TECHNOLOGY GROUP	60/60/20	03/08/10	324.63	127.77	
11.0000		60/60/60	03/15/10	218.54	87.51	131.03 L1
3.0000	MARVELL TECHNOLOGY GROUP	60/60/60	03/18/10	60.48	23.87	
5.0000	MARVELL TECHNOLOGY GROUP	03/13/09	03/18/10	100.82	44.32	
5.0000		06/12/09	03/31/10	210.79	167.68	
4.0000	AMPHENOL CORP CL A NEW	10/28/09	03/31/10	168.63	163.23	5.40 SI
5.0000	CORP CL A	12/03/09	03/31/10	210.80	219.26	
3.0000	AMPHENOL CORP CL A NEW	12/28/09	03/31/10	126.48	138.24	11.76)
2.0000		03/12/07	04/22/10	515.80	178.54	
4.0000	SNAPPLE	10/12/09	04/15/10	136.95	118.01	18.94 ST
5.0000	DR PEPPER SNAPPLE GROUP	10/12/09	04/16/10	170.88	147 52	23.36 SI
3.0000	SNAPPLE	10/13/09	04/16/10	102.53	* 87.32	15.21 SI
3.0000	DR PEPPER SNAPPLE GROUP	10/13/09	04/23/10	08.66	87 33	
2.0000	DR PEPPER SNAPPLE GROUP	10/19/09	04/23/10	66.54	58.00	
4.0000	FREEPRT-MCMRAN CPR & GLD	04/03/09	04/22/10	312.45	173.16	
3.0000		04/01/09	04/22/10	234.34	125 64	
5.0000	FREEPRT-MCMRAN CPR & GLD	04/21/09	04/22/10	390.56	200.04	190.52 51
4.0000		02/04/09	04/22/10	312.46	192 / 3	
2.0000	FREEPRT-MCMRAN CPR & GLD	06/10/09	04/22/10	156.23	119.18	
1.0000	SACHS GROUP	10/16/06	04/19/10	159.28	183.60	
1.0000	SACHS GROUP	08/02/07	04/19/10	159.28	188.60	(28.32) (104.34)
2.0000	SACHS	09/21/07	04/27/10	306.40	4-1-4	
1.0000	SACHS GROUP	04/23/08	04/2//10	153.20	12.181	
1.0000	SACHS	05/22/08	04/2//10	153 20	176.03	(22 82) LT (22 82) LT
1.0000	GROUP	09/07/08	04/27/10	153.21	165.74	(12.53) LT
	DI FASE SEE REVERSE SIDE					

PLEASE SEE REVERSE SIDE Page Statement Period 2 of & Year Ending 12/31/10



EIN; 38-3499619

EIN: 38 -3499 619		REALIZED CAP	ZED CAPITAL GAIN AND LOSS SUMMARY	SUMMARY		
Quantity	Security Description Da	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
1.0000	GOOGLE INC CL A	06/14/07	04/19/10	550 50	502 94	47 56 LT
1.0000	GOOGLE INC CL A	10/11/07	04/19/10	550.50	639.68	8
00006		10/30/09	04/16/10	464.66	432.45	
3.0000	LIFE TECHNOLOGIES CORP	11/04/09	04/16/10	154.89	145.53	
1.0000	LIFE TECHNOLOGIES CORP	11/06/09	04/16/10	51.64	49.42	
2.0000	LIFE TECHNOLOGIES CORP	11/06/09	04/20/10	106.09	98.87	7.22 ST
3.0000	CHNOLOGIES	12/03/09	04/20/10	159.15	152 64	
49.0000	NVIDIA	08/21/09	04/19/10	821.70	682.78	138.92 ST
0000.6	NVIDIA	08/31/09	04/19/10	150.93	130.32	
15.0000		10/15/09	04/19/10	251.55	202.85	
15.0000	UNITEDHEALTH GROUP INC	12/14/09	04/16/10	463.64	465.15	
7.0000	UNITEDHEALTH GROUP INC	12/16/09	04/16/10	216.36	223.86	
5.0000	UNITEDHEALTH GROUP INC	12/22/09	04/16/10	154.55	161.90	
5.0000	UNITEDHEALTH GROUP INC	01/06/10	04/16/10	154.54	159.72	
8.0000	UNITEDHEALTH GROUP INC	01/25/10	04/16/10	247.29	264.55	_
3.0000	DR PEPPER SNAPPLE GROUP	10/19/09	05/03/10	103.46	87 00	16.46 ST
00009	DR PEPPER SNAPPLE GROUP	10/28/09	05/03/10	206.95	165.82	
4.0000	HANSEN NATURAL CORP	05/11/09	05/10/10	152.64	138.03	14.61 LT
4.0000	NATURAL	02/19/09	05/10/10	152.64	140 65	
4.0000	NATURAL	05/25/09	05/10/10	152.64	132.56	
4.0000	MATURAL	03/06/09	05/10/10	152.65	139.88	12.77 LT
3.0000		03/26/09	05/10/10	114.48	107.69	6.79
3.0000	VATURAL	05/14/09	05/10/10	114.49	128.37	
3.0000	HANSEN NATURAL CORP	05/18/09	05/10/10	114.50	126.16	
1.0000	APPLE INC	07/23/07	06/01/10	263.70	142.20	
11.0000	MYLAN INC	03/26/09	06/09/10	197.16	149.83	47.33 L1
13.0000	MYLAN INC	04/03/09	01/60/90	233.01	183.39	
1.0000	MYLAN INC	04/0//09	01/60/90	17.93	14.10	
7.0000	MYLAN INC	04/0//09	01//1/90	125.79	402.02	
14.0000	MYLAN INC	00/17/00	06/1/10	80.162 37.65	192.02	39.3/ LI
4.0000	MYCANING	00/15/20	09/22/10	181.00	34 00 131 80	
0000		07/31/09	06/24/10	71.12	52.72	
0000.4	MYLAN INC	02/26/10	06/24/10	142,25	170.34	
1,0000	AMAZON COM INC COM	04/26/07	07/26/10	116.96	56.72	
3 0000		05/24/07	07/26/10	350 90	204 36	146.54 LT
3.0000	OM INC	06/29/07	07/26/10	350.91	206.31	
1.0000	APPLE INC	07/23/07	07/01/10	247 59	142 20	105 39 [1]
1 0000	GOOGLE INC CL A	05/05/08	07/19/10	462.43	592 75 581.78	(130 32) LT (119.35) LT
0000:1	GOOGLE INC CL A	00/67/00	5			(1)
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	Page Statement Period	710				
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FIN. 38-3499619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

	(Loss)	98.02 LT	20.47 LT	143,98 LT	67.63 LT	82.95 LT				_	114.04) ST				(21./3) L1					17.44		37.52 LI				(40.50) ST							(/0.83) L1	(27.77) [1]	30.37	11.69 []	(14.57) LT	(12.23) [1	144.40 LT 255.08 LT		
	Gain or (Loss)			•						•	_													3	_	•	•														
	3asis	106 37	23.19 28.46	263,20	135.97	501.26	153.72	204.16	254.00	197.28	927.33	198.96	879.85	184.04	222.55	320.52	197.70	169.98	142 27	28.46	180.02	84.88	145.63	288 64	695.54	216 20	175.68	136.31	183.40	212.44	104.71	15/06	371 91	156.81	273 28	313 65	296.53	00 66	138.97 367.46		
	Cost Basis																																								
_	mount	204.39	97.00 48.93	407,18	203.60	584.21	111.36	148.49	185.62	148.50	813.29	177.91	,044 24	160.65	200.82	240.99	551.52	290.36	221.84	45.90	275.40	122.40	198.90	244.81	562.23	175.70	456 02	138.81	185.08	182.16	91.08	129 03	301.08	129.04	303.65	325.34	281.96	86.77	283.37	16.33	
SOINIMAR	Sale Amount												_																												
AND LOSS	idation	/10	7.0	710	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	70	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	/10	710	2	
AL GAIN	Date of Liquidation	06/28/10	01/09/10	07/20/10	07/20/10	01/20/10	01/30/10	01/30/10	07/30/10	01/30/10	08/04/10	08/04/10	08/12/10	08/12/10	08/12/10	08/12/10	08/25/10	08/12/10	07/29/10	08/02/10	08/02/10	08/02/10	08/02/10	08/02/10	08/23/10	08/23/10	08/02/10	01/28/10	01/28/10	08/10/10	08/10/10	08/25/10	08/25/10	08/25/10	01/91/60	09/16/10	01/91/60	09/16/10	10/01/10	6.00	
IZED CAPITAL GAIN AND LOSS SUNINAR	Acquisition	03/13/09	03/13/09	05/03/07	05/14/07	03/20/08	01/25/10	01/27/10	02/04/10	02/08/10	11/13/09	05/12/10	90/80/50	08/20/02	01/25/08	04/28/10	11/01/06	62/01/08	03/26/09	03/26/09	04/03/09	04/27/09	05/18/09	12/07/09	12/03/09	12/10/09	02/26/09	03/02/07	03/12/07	04/30/07	05/08/07	05/08/07	05/11/07	70/01//0	08/10/06	08/16/06	09/19/06	10/16/06	09/17/07	00/17/00	Account No 617-04021
KEAL	Date of																																								Period 1 12/31/10
		SY GROUP	S GROOP	5											O DEL		SC	IC A	Y GROUP	3Y GROUP	Y GROUP	3Y GROUP	Y GROUP	Y GROUP	COM	COM		VTIFIC	SCIENTIFIC	SCIENTIFIC	SCIENTIFIC	SCIENTIFIC	SCIENTIFIC	SCIENTIFIC	COM	COM	COM	COM			RSE SIDE Statement Period Year Ending 12/3
	Security Description	MARVELL TECHNOLOGY	MARVELL IECHNOLOGY GROUP	ARD INC	ARD INC	CL A SHRS	PLC SHS	PLC SHS	PLC SHS	PLC SHS	AICAL CO	AICAL CO	HEWLETT PACKARD CO	PACKARD CO	HEWLETT PACKARD CO	PACKARD CO	NTUITIVE SURGICAL INC	LAUDER ESTEE COS INC A	MARVELL TECHNOLOGY GROUP	MARVELL TECHNOLOGY	MARVELL TECHNOLOGY	MARVELL TECHNOLOGY	MARVELL TECHNOLOGY	MARVELL TECHNOLOGY GROUP			COM INC							FISHER SCIEN		SYSTEMS INC	SYSTEMS INC	SYSTEMS INC			PLEASE SEE REVERSE SIDE Page Stateme
	Security I	MARVELL	MARVELL	MASTERCARD INC	MASTERCARD INC	VISA INC CL A SHRS	COVIDIEN PLC SHS	COVIDIEN	COVIDIEN	COVIDIEN	DOW CHEMICAL CO	DOW CHEMICAL CO	HEWLETT	HEWLETT	HEWLETT	HEWLETT	INTUITIVE	LAUDER E	MARVELL	MARVELL	MARVELL	MARVELL	MARVELL	MARVELL	MEDTRONIC INC	MEDTRONIC INC	PRICELINE COM INC	THERMO F						THERMO F		CISCO SYS	CISCO SYS	CISCO SYS		APPLE INC	PLEASE Page 4 of
	Quantity	12.0000	3.0000	2.0000	1.0000	8.0000	3.0000	4.0000	5.0000	4.0000	32.0000	7.0000	26.0000	4.0000	2.0000	0000.9	2.0000	2.0000	15.0000	3.0000	18.0000	8.0000	13.0000	16.0000	16.0000	5.0000	2.0000	3.0000	4.0000	4.0000	2.0000	3.0000	7 0000	3.0000	14.0000	15.0000	13,0000	4.0000	1.0000	2.0000	
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EIN: 38-3499 619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

Quantity	Security Description	Date of Acquisition D	Date of Liquidation	Sale Amount	Cost Basis	
46.0000	COMCAST CORP NEW CL A	01/29/10	10/07/10	827.72	874.59	(46.87) ST
8.0000	5	08/10/10	10/07/10	143.95	147 12	(3.17) SI
9,0000	COMCAST CORP NEW CL A	09/22/10	01//0/01	161.96	163.42	10E 07 1 T
8.0000	CAPITAL ONE FINE	05/14/09	10/18/10	296.90	190.93	103.97 L1
13.0000	CAPITAL ONE FINE	05/14/09	0/18/10	519.62	310.27	100 10 1
13 0000	CAPITAL ONE FINL	05/14/09	10/21/10	309.46	310.27	199.19 C1 66.86 1T
2 0000	CAPITAL ONE FINE	01/23/09	10/21/10	195.94	140.03	33.03
8.0000		60/90/80	10/21/10	313.52	252.55	60.97 LI
3.0000	SYSTEMS INC	07/30/10	10/07/10	178.73	165.23	
2.0000	SYSTEMS INC	07/30/10	10/26/10	433.44	385.55	47.89 51
5.0000	CISCO SYSTEMS INC COM	10/16/06	10/06/10	110.62	123.75	(13.13)
10.0000	CISCO SYSTEMS INC COM	01/16/07	10/06/10	221.24	283.90	(62.66)
7.0000	SYSTEMS INC	02/01/07	10/06/10	154.86	187.24	(32.38)
7.0000	SYSTEMS INC	03/22/07	10/06/10	154.87	185 43	(30.56)
8.0000	CISCO SYSTEMS INC COM	04/17/07	10/06/10	176.99	214.48	(37.49)
8.0000	SYSTEMS INC	08/01/07	10/06/10	176 99	231.28	(54.29) LT
10.0000	SYSTEMS INC	10/14/08	10/06/10	221.25	188.90	32.35 LT
00006	SYSTEMS INC	01/01/09	10/06/10	199.13	156 60	42.53 LT
4.0000	EOUINIX INC	12/14/09	10/07/10	297.19	417.11	(119.92) ST
2.0000	EOUINIX INC	02/11/10	10/07/10	148.60	190.81	(42.21) ST
3,0000	EOUINIX INC	03/08/10	10/07/10	222.90	311.46	(88.56) ST
2.0000	EQUINIX INC	09/22/10	10/07/10	148.60	197.75	(49 15) SI
24.0000	FORD MOTOR CO NEW	07/24/09	10/20/10	322.31	163.14	159.17
21.0000	FORD MOTOR CO NEW	07/24/09	10/21/10	291.89	142.75	
1.0000	INTUITIVE SURGICAL INC	01/16/07	10/14/10	273.95	93 99	179.96
7.0000	LAS VEGAS SANDS CORP	09/11/09	10/21/10	268.94	132.84	136.10 LT
7.0000	PEPSICO INC	04/21/09	10/08/10	458 64	343.63	115.01
1,0000	PEPSICO INC	04/23/09	10/08/10	65.52	48.02	17.50 LI
19,0000	ALLEGHENY TECH INC	04/22/10	11/19/10	947.87	1,043.01	(95.14) SI
10.0000	BOFING COMPANY	03/24/10	11/15/10	633.35	726 29	
3 0000	BOEING COMPANY	03/25/10	11/15/10	190.00	219.81	(29.81) 51
00008	ROFING COMPANY	04/22/10	11/15/10	506 70	602.31	_
5 0000	S	07/30/10	11/01/10	320 95	275.39	45.56 ST
0000 6	CITDIX OVOTEMS INC. COM	01/2/10	11/01/10	192.57	166.52	
3.000		04/16/10	11/03/10	654.77	786 78	
2.0000	GENERAL ELECTRIC	04/19/10	11/03/10	31.95	37.82	(5.87) ST
10.0000		04/19/10	11/04/10	163.35	189.10	(55.75) ST
16.0000		05/12/10	11/04/10	261 3 <i>7</i> 07 77¢	293 26	
17.0000	GENERAL ELECTRIC GENERAL ELECTRIC	07/22/10	11/04/10	196.03	181.89	
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Page Statement Period
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EIN: 38-3499619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

		REALIZED CAPILI	LED CAPITAL GAIN AND LOSS SUMMAN	MARI		
Quantity	Security Description	Date of Acquisition [Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
9.000	GENERAL ELECTRIC	01/28/10	11/04/10	147.035	143.98	3.05 ST
1.0000	INTUITIVE SURGICAL INC	01/16/07	11/22/10	253.42	93.98	
1.0000	INTUITIVE SURGICAL INC	80/11//0	11/22/10	253.43	279.80	(26.37) LT
1.0000	INTUITIVE SURGICAL INC	11/05/08	11/22/10	253.42	191.18	62.24 LT
1.0000	INTUITIVE SURGICAL INC	07/24/09	11/22/10	253.43	221 40	32.03 LT
1.0000	INTUITIVE SURGICAL INC	10/27/09	11/22/10	253.44	259.96	(6.52) LT
2.0000	≥	01/16/09	11/03/10	101.18	75 75	25.43 LT
3.0000	2	01/27/09	11/03/10	151.78	113.59	38.19 LT
0000'9	CORP WISC PV	05/06/09	11/03/10	303.58	232.43	71.15 LT
3.0000	KOHLS CORP WISC PV 1CT	02/17/09	11/03/10	151.79	106.60	45.19 LT
3.0000	≥	02/17/09	11/05/10	159.55	106.59	52.96 LT
3.0000	2	60/90/00	11/05/10	159.55	101.58	57.97 LT
4.0000	≥	04/06/09	11/05/10	212.74	178.16	34.58 LT
3.0000	KOHLS CORP WISC PV 1CT	06/10/09	11/05/10	159.55	140.97	18.58 LT
7.0000	KOHLS CORP WISC PV 1CT	60/10/80	11/05/10	372.30	367.52	4.78 LT
6.0000		09/11/09	11/01/10	283.26	113.87	169.39 LT
2.0000	SANDS	09/18/09	11/01/10	94.43	37.54	56.89
7.0000	LAS VEGAS SANDS CORP	09/18/09	11/08/10	368.48	131.39	237.09 LT
3.0000	SANDS (09/24/09	11/11/10	147.45	51.54	95.91 LT
19.0000	CO INC	01/15/10	11/15/10	662.05	743.81	
3.0000	CO INC	01/22/10	11/15/10	104.53	119.10	
5.0000	MERCK AND CO INC SHS	02/03/10	11/15/10	174.23	194.00	
0000'9	NETAPP INC	02/71/10	11/18/10	316.26	191.16	125.10 ST
1.0000	PRICELINE COM INC	02/21/09	11/11/10	417.58	84.49	333.09 LT
12.0000	BROADCOM CORP CALIF CL A	01/07/09	12/16/10	538.49	216 01	322.48 LT
12.0000	BEST BUY CO INC	01/07/09	12/15/10	414.78	358.72	56.06 LT
5.0000	BEST BUY CO INC	01/12/09	12/15/10	172.83	139.90	32.93 LT
7.0000	BEST BUY CO INC	01/27/09	12/15/10	241.96	201.01	40.95 LT
5.0000	BEST BUY CO INC	02/18/09	12/15/10	172.83	140.12	32.71 LT
4.0000	BEST BUY CO INC	60/90/60	12/15/10	138.26	97.56	40.70 L1
4.0000	BEST BUY CO INC	03/21/09	12/15/10	138.26	152.05	(13.79)
9 0000	BEST BUY CO INC	07/24/09	12/15/10	207.41	220 08	(12.67) [1
5.0000	<u>S</u>	04/09/09	12/16/10	240.21	153.24	86 97 LI
2.0000	F5 NETWORKS INC COM	03/04/10	12/22/10	271.69	121.39	150.30 51
0000'9	PEPSICO INC	04/23/09	12/22/10	391.53	288.12	103.41 LI
3.0000	PEPSICO INC	02/50/09	12/22/10	195.76	156 93	38.83 L1
4.0000	PEPSICO INC	60/03/00	12/22/10	261.03	216.64	44.39
			Total Gains	57,610	116'05	५५७,७
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			Schedule D - Short Term	24,872	24' 84 2	/07 >
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Medical Education Foundation of the American College 4 Osteopatic Obstetricians and Eymbologists EIN: 38-3499619

Schedule D December 31, 2010

REALIZED CAPITAL GAIN AND LOSS SUMMARY

Gain or (Loss)	(109.05) LT (48.62) ST (72.20) ST (42.17) ST (16.09) ST	(13.21) ST (24.51) ST (24.51) ST (24.51) ST (24.51) ST (24.51) ST (25.24) ST
Cost Basis	466.95 167.92 251.15 161.47	132.52 184.57 194.36 440.63 155.97 131.59 308.20 131.59 131.59 141.36 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 171.23 172.45 172.45 172.45 172.45 172.45 172.45 172.45 172.65 172.65 173.65 17
Sale Amount	357.90 119.30 178 95 119.30	119:31 427.69 260.69 406.12 142.14 263.99 142.15 254.45 458.87 211.80 345.04 177.22 35.97 155.19 177.22 155.19 177.22 155.19 177.22 166.82 166.82 166.82 166.82 166.82 177.22 177
Date of Liquidation	01/11/10 01/11/10 01/11/10 01/11/10 01/11/10	01/11/10 01/04/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/08/10 01/06/10 02/02/10 02/04/10 02/11/10 02/11/10 02/11/10 02/11/10 02/11/10 02/11/10 02/11/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/03/10 02/04/10 02/04/10 03/24/10 03/24/10
Date of Acquisition	01/07/09 01/23/09 02/09/09 02/12/09 07/23/09	07/27/09 11/30/06 06/12/09 09/18/09 09/23/09 10/09/09 10/09/09 10/12/09 03/26/09 03/26/09 03/26/09 06/12/09 06/12/09 06/12/09 06/12/09 06/12/09 01/13/09 01/13/09 02/02/09
Security Description	APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A APOLLO GROUP INC CL A	APOLLO GROUP INC CL A APPLE INC GAP INC COM GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC DELAWARE GAP INC CLAWARE MASTERCARD INC MYLAN INC VISA INC COM EBAY INC COM EBAY INC COM EBAY INC COM COM EBAY INC COM COM COM COM COM COM COM COM COM CO
Quantity	6 0000 2.0000 3.0000 2.0000 2.0000	2.0000 11.0000 20.0000 13.0000 1.0000 1.0000 12.0000 12.0000 13.0000 13.0000 14.0000 15.0000 15.0000 17.0000 17.0000 18.0000 18.0000 19.0000 1

PLEASE SEE REVERSE SIDE Page Statement Period 1 of & Year Ending 12/31/10



EIN: 38-3499619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

		REALIZED CAPI	ZED CAPITAL GAIN AND LOSS SUMMARY	SUMMARY		
Quantity	Security Description	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
10 0000		05/14/08	03/15/10	249.99	584 48	(334 49) LT
1.0000	ENERGY	80/60/90	03/15/10	25.00	60.75	(35 75) LT
00000	ENERGY	80/60/90	03/18/10	143.27	364.51	(221.24) L1
8.0000		09/26/08	03/18/10	191.04	305.00	(113.96) L1
2.0000	ENERGY	80/97/60	03/24/10	46.61	120.00	(29.64)
6.0000	ENERGY	10/22/08	03/24/10	139.86	129.96	17 08.8
12.0000	ENERGY	11/05/08	03/24/10	279 72	302 81	(23.09) LT
9.0000	CHESAPEAKE ENERGY OKLA	04/06/09	03/24/10	139.86	116.40	
2.0000		03/13/09	03/26/10	158.98	73.32	85.66 L1
1.0000	FREEPRT-MCMRAN CPR & GLD	04/03/09	03/26/10	79.49	43.29	
2.0000	INTL GAME TECHNOLOGY	60/90/80	02/26/10	34.93	39 50	
8.0000	INTL GAME TECHNOLOGY	08/12/09	02/26/10	139.74	153.69	
3.0000	INTL GAME TECHNOLOGY	08/12/09	03/03/10	53.67	57 64	
12.0000	INTL GAME TECHNOLOGY	11/09/09	03/03/10	214 72	245.16	_
16.0000	MARVELL TECHNOLOGY GROUP	03/09/09	03/08/10	324.63	127.27	
11 0000	MARVELL TECHNOLOGY GROUP	60/60/20	03/15/10	218.54	87.51	131.03 LI
3.0000		03/09/09	03/18/10	60.48	23.87	
2.0000	MARVELL TECHNOLOGY GROUP	03/13/09	03/18/10	100.82	44 32	
2.0000	AMPHENOL CORP CL A NEW	06/12/09	03/31/10	210.79	167.68	
4.0000	AMPHENOL CORP CL A NEW	10/28/09	03/31/10	168.63	163.23	5.40 51
5.0000	CORP	12/03/09	03/31/10	210.80	219.26	
3.0000	AMPHENOL CORP CL A NEW	12/28/09	03/31/10	126.48	138.24	
2.0000	APPLE INC	03/12/07	04/22/10	515.80	178.54	
4 0000	DR PEPPER SNAPPLE GROUP	10/12/09	04/15/10	136.95	118.01	
2.0000	SNAPPLE	10/12/09	04/16/10	170.88	147 52	
3.0000	DR PEPPER SNAPPLE GROUP	10/13/09	04/16/10	102.53	. 87.32	
3.0000	DR PEPPER SNAPPLE GROUP	10/13/09	04/23/10	08.80	8/33	12.47 51
2.0000	DR PEPPER SNAPPLE GROUP	10/19/09	04/23/10	66.54	58 00	
4.0000	FREEPRT-MCMRAN CPR & GLD	04/03/09	04/22/10	312.45	1/3.16	139.29 L1
3 0000	FREEPRT-MCMRAN CPR & GLD	04/01/09	04/22/10	234.34	125.64	
2.0000		04/27/09	04/22/10	390.56	200 04	130 32 31 110 73 ST
4 0000		05/04/09	04/22/10	312.46	132 / 3	37 05 ST
2 0000	I CPR &	06/10/09	04/22/10	156.23	183.60	
1.0000	GROUP	10/16/06	04/19/10	159.28	103.00	(24:32) [1
1.0000	GROUP	08/02/07	04/19/10	159.28	100 00	(104 74) 1 T
2.0000	SACHS GROUP	09/21/07	04/2//10	306 40	181 27	(78.07)
1.0000	SACHS GROUP	04/23/08	04/21/10	133.20	179.06	(25.86) LT
1.0000	SACHS GROUP	05/22/08	04/2//10	153 20	176 03	(22.82) LT
1.0000	GOLDMAN SACHS GROUP INC GOLDMAN SACHS GROUP INC	0//0//08	04/27/10	153.21	165.74	(12.53) LT
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PLEASE SEE REVERSE SIDE Page Statement Period 2 of & Year Ending 12/31/10



EIN 38-3499619

REALIZED CAPITAL GAIN AND LOSS SUMMARY

		KEALIZED CAPI	LED CAPITAL GAIN AND LOSS SUININAK	SUMMAKI		
Quantity	Security Description	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
1.0000	GOOGLE INC CL A	06/14/07	04/19/10	550.50	502 94	47.56 LT
1.0000	GOOGLE INC CL A	10/11/07	04/19/10	550 50	639 68	
0000.6	S	10/30/09	04/16/10	464.66	432.45	
3.0000	LIFE TECHNOLOGIES CORP	11/04/09	04/16/10	154.89	145.53	
1.0000	LIFE TECHNOLOGIES CORP	11/06/09	04/16/10	51.64	49.42	2 22 ST
2.0000	LIFE TECHNOLOGIES CORP	11/06/09	04/20/10	106.09	98.87	
3.0000	LIFE TECHNOLOGIES CORP	12/03/09	04/20/10	159.15	152 64	
49.0000	NVIDIA	08/21/09	04/19/10	821.70	682.78	138.92 ST
00006	NVIDIA	08/31/09	04/19/10	150.93	130.32	
15.0000	NVIDIA	10/15/09	04/19/10	251.55	202.85	
15.0000	UNITEDHEALTH GROUP INC	12/14/09	04/16/10	463.64	465 15	
7.0000	UNITEDHEALTH GROUP INC	12/16/09	04/16/10	216.36	223.86	(7.50) ST
5.0000	UNITEDHEALTH GROUP INC	12/22/09	04/16/10	154.55	161.90	
5.0000	UNITEDHEALTH GROUP INC	01/06/10	04/16/10	154.54	159.72	(5.18) SI
8.0000	UNITEDHEALTH GROUP INC	01/25/10	04/16/10	247.29	264.55	
3.0000	DR PEPPER SNAPPLE GROUP	10/19/09	05/03/10	103.46	87.00	
0000'9	DR PEPPER SNAPPLE GROUP	10/28/09	05/03/10	206.95	165.82	
4.0000	NATURAL	02/11/09	05/10/10	152.64	138.03	
4.0000		02/19/09	05/10/10	152.64	140.65	
4.0000		02/25/09	05/10/10	152.64	132.56	
4.0000		60/90/60	05/10/10	152.65	139.88	12.// [1
3.0000		03/26/09	05/10/10	114.48	107.69	
3.0000		05/14/09	05/10/10	114.49	128.37	(13.88) 51
3.0000	HANSEN NATURAL CORP	05/18/09	05/10/10	114.50	126 16	
1 0000	APPLE INC	07/23/07	06/01/10	263.70	142.20	
11.0000	MYLAN INC	03/26/09	06/09/10	197.16	149.83	
13.0000	MYLAN INC	04/03/09	06/09/10	233 01	183.39	49 62 LI
1.0000	MYLAN INC	04/01/09	06/09/10	17.93	14.16	3.77
7.0000	MYLAN INC	04/01/09	06/17/10	125.79	99.12	79.97 50.67
14.0000	MYLAN INC	06/12/09	06/17/10	251 59	20 261	
4.0000	MYLAN INC	06/12/09	06/22/10	12.75	121.85	
10.0000	MYLAN INC	07/31/09	06/22/10	181.90	131.80	
4.0000	MYLAN INC	07/31/09	06/24/10	71 17	2/ 26	16.04.0 TO (00.00)
8.0000	MYLAN INC	02/26/10	06/24/10	142.25	1/0.34	
1.0000		04/26/07	07/26/10	116.96	56 /2 204 26	
3.0000		05/24/07	07/26/10	350.90	204 38	144.60 LT
3.0000	AMAZON COM INC COM	06/29/07	01/59/10	330.31	142.20	105 39 LT
1.0000	APPLE INC	07/53/0/	01/10/10	462.43	592.75	(130.32) LT
1.0000	GOOGLE INC CL A GOOGLE INC CL A	05/20/08	07/19/10	462.43	581.78	(119.35) LT
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EIN 38-3499619

		REALIZED CAPIT	IZED CAPITAL GAIN AND LOSS SUMMARY	SUMMARY		
Quantity	Security Description Da	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
12.0000	MARVELL TECHNOLOGY GROUP	03/13/09	06/28/10	204.39	106.37	98.02 LT
0.0009	MARVELL TECHNOLOGY GROUP	03/13/09	07/09/10	97.86	53 19	44.67 LT
3.0000	MARVELL TECHNOLOGY GROUP	03/26/09	07/09/10	48.93	28.46	20.47 LT
2.0000	MASTERCARD INC	05/03/07	07/20/10	407.18	263.20	143,98 LT
0000.1	MASIERCARD INC	05/14/0/	01/02//0	203.60	135 97	
9,0000	VISA INC CL A SHKS	03/20/08	01/02//0	384.21	301.26	
0000	COVIDIENT FLC Sha	01/27/10	01/06/10	148 40	20.00	15 (05.34) TO (55.33)
4.000	COVIDIEN PLC SHS	01//7/10	0//30/10	101.00	204.16	15 (/0.55)
3.0000	COVIDIEN PLC SHS	02/04/10	01/30/10	183.62	107.28	(00.30) 31
32,0000	COVIDIEN PLC 3A3	11/13/09	0//20/10	146.30	197.28	
32.0000	DOW CHEMICAL CO	05/12/10	08/04/10	177 01	198 96	
26,0000	5	05/08/06	08/24/10	1.044.24	87985	
4.0000	88	08/20/07	08/12/10	160.65	184.04	
2.0000	HEWLETT PACKARD CO DEL	01/25/08	08/12/10	200.82	222 55	
0000'9		04/28/10	08/12/10	240.99	320,52	•
2.0000	INTUITIVE SURGICAL INC	11/01/06	08/25/10	551 52	197.70	353.82 L1
2 0000	LAUDER ESTEE COS INC A	02/02/08	08/12/10	290.36	142 24	
15.0000	MARVELL FECHNOLOGY GROUP	03/26/09	01/67/10	45.00	142 21	73.37 CI
3.0000	MARVELL IECHNOLOGY GROUP MADVELL TECHNOLOGY GROUP	03/26/09	08/02/10	45.30	180.02	95.38 LT
8,000	MARVELL IECHINOLOGI GROOF	04/27/09	08/05/10	122.40	84.88	37.52 LT
13.000	MARVELL TECHNOLOGY GROUP	05/18/09	08/02/10	198.90	145 63	53.27 LT
16.0000	MARVELL TECHNOLOGY GROUP	12/07/09	08/02/10	244 81	288 64	
16.0000	MEDTRONIC INC COM	12/03/09	08/23/10	562.23	695.54	(133.31) ST
5.0000	MEDTRONIC INC COM	12/10/09	08/23/10	175.70	216.20	
2 0000	PRICELINE COM INC	05/26/09	08/02/10	456.02	1/5.68	280.34 LI
3.0000	FISHER	03/02/07	07/28/10	138.81	135.31	2.30 LI 1.68 LT
4.0000	FISHER	03/12/0/	01/28/10	185 08	103 40	
4 0000	THERMO FISHER SCIENTIFIC	04/30/0/	08/10/10	91.08	104 71	(13.63) LT
2.0000	THEKIND FISHER SCIENTIFIC	02/08/07	08/10/10	129 03	157.06	(28.03) LT
3.0000	THERING FISHER SCIENTIFIC	03/09/07	08/25/10	301.08	371.91	(70 83) LT
0000 6	THEDWO FISHER SCIENTIFIC	70/11/70	08/25/10	129.04	156.81	(27.77) LT
3.000	CISCO SYSTEMS INC. COM	08/10/06	09/16/10	303.65	273.28	_
15,000		08/16/06	09/16/10	325.34	313.65	11.69 LT
13.0000	SYSTEMS INC	90/11/60	09/16/10	281.96	296.53	(14 5/) LI
4 0000	CISCO SYSTEMS INC COM	10/16/06	09/16/10	86 77	99 00	
1 0000 2.0000	APPLE INC APPLE INC	09/17/07 05/27/08	10/01/10 10/19/10	283.37 622.54	367 46	255.08 LT
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REALIZED CAPITAL GAIN AND LOSS SUMMARY

Quantity	Security Description	Date of Acquisition	AL CALIN AIND LOSS Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
						ш
46.0000	COMCAST CORP NEW CL A	01/59/10	10/07/10	827 72	874.59	(46 87) ST
8.0000	COMCAST CORP NEW CL A	08/10/10	10/07/10	143 95	147.12	(3.17) ST
0000'6	COMCAST CORP NEW CL A	09/22/10	10/07/10	161.96	163 42	(1.46) ST
8.0000	CAPITAL ONE FINL	05/14/09	10/18/10	296.90	190.93	105.97 LT
13.0000	CAPITAL ONE FINL	05/14/09	10/19/10	519.62	310.27	209.35 LT
13.0000	CAPITAL ONE FINL	05/14/09	10/21/10	509.46	310.27	199.19 LT
5.0000	CAPITAL ONE FINL	07/23/09	10/21/10	195.94	140 09	55.85 LT
8.0000	CAPITAL ONE FINL	60/90/80	10/21/10	313.52	252.55	E0.97 LT
3.0000	CITRIX SYSTEMS INC COM	07/30/10	10/07/10	178.73	165.23	13.50 ST
7.0000	S	01/30/10	10/26/10	433.44	385.55	47.89 ST
5.0000	CISCO SYSTEMS INC COM	10/16/06	10/06/10	110.62	123 75	(13.13) LT
10.0000	SYSTEMS INC	01/16/07	10/06/10	221.24	283.90	(62.66) LT
7.0000	CISCO SYSTEMS INC COM	02/01/07	10/06/10	154.86	187 24	(32.38) LT
7.0000	CISCO SYSTEMS INC COM	03/22/07	10/06/10	154.87	185.43	(30.56) LT
8.0000	SYSTEMS INC	04/17/07	10/06/10	176 99	214.48	(37 49) LT
8.0000	CISCO SYSTEMS INC COM	08/01/07	10/06/10	176.99	231 28	(54.29) LT
10.0000	SYSTEMS INC	10/14/08	10/06/10	221.25	188.90	32.35 LT
00006	CISCO SYSTEMS INC COM	01/01/09	10/06/10	199.13	156 60	42 53 LT
4.0000	EQUINIX INC	12/14/09	10/07/10	297.19	417.11	(119.92) ST
2.0000	EQUINIX INC	02/11/10	10/07/10	148.60	190.81	(42.21) ST
3.0000	EQUINIX INC	03/08/10	10/07/10	222.90	311.46	_
2.0000	EQUINIX INC	09/22/10	10/07/10	148.60	197 75	(49.15) SI
24.0000	FORD MOTOR CO NEW	07/24/09	10/20/10	322.31	163.14	159.17
21.0000	FORD MOTOR CO NEW	07/24/09	10/21/10	291.89	142.75	149.14 LI
1 0000	INTUITIVE SURGICAL INC	01/16/07	10/14/10	273.95	93 99	179.96 [1
7.0000	LAS VEGAS SANDS CORP	09/11/09	10/21/10	268.94	132.84	136.10 L1
7.0000	PEPSICO INC	04/21/09	10/08/10	458.64	343.63	11501 [1
1.0000	PEPSICO INC	04/23/09	10/08/10	65.52	48 02	17.50 L1
19 0000	ALLEGHENY TECH INC	04/22/10	11/19/10	947.87	1,043.01	(95.14) 51
10 0000	BOEING COMPANY	03/24/10	11/15/10	633.35	726.29	(92.94) 51
3.0000	BOEING COMPANY	03/25/10	11/15/10	190 00	719.81	15 (18.87) 15 (19.87)
8 0000		04/22/10	11/15/10	506.70	002.31	(33.01) 31 AF EF CT
5.0000		01/30/10	11/01/10	320 95	2/5.39	
3.0000	CITRIX SYSTEMS INC COM	08/12/10	11/01/10	192.57	76.001	
41.0000		04/16/10	01/03/10	934.77	7.00.70	(5 87) ST
2 0000		04/19/10	11/03/10	31 95	37.82	(25.75) TS (25.75)
10.0000		04/19/10	11/04/10	261 37	293.26	(31.89) ST
16.0000	GENERAL ELECTRIC	05/12/10	11/04/10	201.37	246 98	30.72 ST
12.0000		01/22/10	11/04/10	196.03	181 89	14.14 ST

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EIN: 38-3494619

	-	REALIZED CAPIT	ED CAPITAL GAIN AND LOSS SUMMARY	AMARY		
Quantity	Security Description	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
000006	ELECTRIC	01/28/10	11/04/10	147.03\$	143.98	3 05 ST
1.0000		01/16/07	11/22/10	253.42	93.98	159 44 LT
1.0000	INTUITIVE SURGICAL INC	0//1//08	11/22/10	253.43	191 18	(26.37) L1 62.24 T
1.0000		07/24/09	11/22/10	253.43	221.40	32.03 LT
1.0000	INTUITIVE SURGICAL INC	10/27/09	11/22/10	253.44	259.96	(6.52) LT
2 0000	CORP WISC PV	01/16/09	11/03/10	101.18	75.75	25.43 LT
3 0000	KOHLS CORP WISC PV 1CT	01/27/09	11/03/10	151 78	113 59	38.19 LT
6.0000	CORP WISC PV 1	05/06/09	11/03/10	303.58	232.43	/1.15 LI
3.0000	KOHLS CORP WISC PV 1C1	02/11/09	11/03/10	159.79	106.60	45.19 L1 52.96 1T
3.0000	CORP WISC PV	60/90/80	11/05/10	159.55	101.58	
4.0000	CORP WISC PV	04/06/09	11/05/10	212.74	178 16	34 58 LT
3.0000	KOHLS CORP WISC PV 1CT	06/10/09	11/05/10	159.55	140.97	
7.0000	KOHLS CORP WISC PV 1CT	60/0/80	11/05/10	372 30	367.52	
6.0000	LAS VEGAS SANDS CORP	09/17/09	11/01/10	283.26	1138/	169.39 L1
2.0000	LAS VEGAS SANDS CORP	09/18/08	11/01/10	34.43	121 20	
00007	LAS VEGAS SANDS CORP	09/18/09	11/11/10	300.40 147.45	51 54 51 54	23, 03 E1
3.0000	MEDON AND COMP	03/24/03	11/11/10	662.05	743.81	
3,0000	MERCY AND CO INC SHS	01/23/10	11/15/10	104.53	119.10	
3,000	MEDCK AND CO INC SHS	02/03/10	11/15/10	174.23	194.00	
00005	7	02/17/10	11/18/10	316.26	191 16	125 10 ST
1 0000	PRICELINE COM INC	02/27/09	11/11/10	417.58	84.49	_
12 0000	BROADCOM CORP CALIF CL A	01/01/09	12/16/10	538.49	216.01	
12.0000	BEST BUY CO INC	01/01/09	12/15/10	414 78	358.72	56.06 L1
5.0000	BEST BUY CO INC	01/12/09	12/15/10	172.83	139 90	32.93 L1
7.0000	BEST BUY CO INC	01/27/09	12/15/10	241.96	201.01	40.93 L1 32 71 LT
5.0000	BEST BUY CO INC	02/18/09	12/15/10	170.75	140.12	32.71 L1 40.70 LT
4.0000	BEST BUY CO INC	03/06/09	13/10	130.20	152.05	
4.0000	BEST BUY CO INC	03/2//09	12/15/10	207.41	220 08	_
9.0000	BEST BOT CO INC. BED BATH & BEYOND INC.	04/09/09	12/16/10	240.21	153.24	
20000	ES NETWORKS INC COM	03/04/10	12/22/10	271.69	121.39	•
6.0000)	04/23/09	12/22/10	391.53	288.12	103.41 LI 20.02 LT
3.0000	PEPSICO INC	02/50/09	12/22/10	195.76	156 93	30:03 L? 44 30 LT
4.0000	PEPSICO INC	60/03/08	12/22/10	261.03		17 65:44
			Total Guins	57,610	116'05	५७३'७
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