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

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

OMB No 1545 0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
REIARSON TRUST STANLEY COMM HOSPITAL ASSOC	45 0361647

FORM 990 PART VI SECTION B LINE 11

THE 990 REPORT IS PRESENTED TO THE BOARD MEMBERS BEFORE BEING FILED

FORM 990 PART VI SECTION B LINE 19

THE RECORDS ARE AVAILABLE UPON REQUEST