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Form **990**

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)

2010

OMB No 1545-0047

প্রক্রা তে Public hepedion

Department of the Treasury Internal Revenue Service

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

<u>A</u>	For the 2	010 calen	dar year, or tax year beginning , 2010, and ending			,		
В	Check if app	licable			D Employ	er Identifica	ation Number	
	Address	s change	ASSOCIATION OF SURGICAL TECHNOLOGISTS	- 1	84-0	060130)5	
	Name o	hange	6 WEST DRY CREEK CIRCLE	Ī	E Telepho			
	Initial re	eturn	LITTLETON, CO 80120		303-	-694-9	9130	
	Termin				303	0,74 ,	7130	
	\vdash	ed return			G Gross re	countr C	1 297	,502.
	H	tion pending	F Name and address of principal officer	(a) Is this a	group return			1
		tion perioning	1 ·		affiliates incl		Yes	
ī	Tax-exem	int status	501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527	If 'No,' a	attach a list	(see instruc		
÷	Website		T: 100 000	(-)				
<u>K</u>		rganization			exemption nu		C(
È		Summa		1969	, IMIS	tate of lega	I domicile C	'
UC			be the organization's mission or most significant activities. <u>TO_ENSURE</u>	יי גוויי	CUDCT	CAT DI	ECUNOT OF	TORC
	ם ג	ENY GESCH	ATIONALLY PREPARED TO ADMINISTER OUALITY PATIEN	THAT	_2nket	LAL II	FCHNOTO	17272
Activities & Governance		בי דיים הל	<u>ᢦ᠇᠇ᠵᠬᡑᠬ᠇᠇᠆᠊᠊ᢧᢛᡄᡦᡅᡄᠮ᠆ᠮᡳ᠆ᡏᠩᡢᠮ᠓ᡏᠫ᠋ᠮᡦᠮ᠆ᡯᠺᡯᡟᠮᠮᠮᠮ᠆ᠮᢡᠮᢇᠮᢊ</u>	T CWK	<u></u>			
Ε								
λ	2 Che	eck this bo	ox If the organization discontinued its operations or disposed of more	 e than 25	5% of its	net acce		
ŏ	3 Nur	nber of vo	oting members of the governing body (Part VI, line 1a)	. (11011 2.		3	ıs	11
ص ھ			dependent voting members of the governing body (Part VI, line 1b)			4		11
ŧ	5 Tota	al number	of individuals employed in calendar year 2010 (Part V, line 2a)			5		22
ŧ			of volunteers (estimate if necessary)			6		35
•			ed business revenue from Part VIII, column (C), line 12			7a		,445.
	b Net	unrelated	business taxable income from Form 990-T, line 34			7b		,141.
	. .			Pr	rior Year		Current Y	<u>'ear</u>
9			and grants (Part VIII, line 1h)		000 0		2 100	250
eur			vice revenue (Part VIII, line 2g)		<u>, 993, 3</u>			358.
Revenue			ncome (Part VIII, column (A), lines 3, 4, and 7d): ((). le (Part VIII, column (A), lines 5, 6d, 8c/9c, 1.0c, and 11e)		42,1			744.
_			e (Fart VIII, column (A), lines 5, 6d, 8c/9c, luc, and fre) e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2	603,6 ,639,0			799.
			imilar amounts paid (Part IX, column (A), lines \\ \ \ \ 3) \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>	11,5			,901. ,000.
	ľ		to or for members (Part IX, column (A), line 4)		11,3	88.	12	,000.
			er compensation, employee benefits (Part IX; column (A), lines 5-10)	1	,281,4	72	1 260	,642.
69					, 201, 4	12.	1,209	,042.
Expenses			fundraising fees (Part IX, column (A), line 11e).					
Ä			sing expenses (Part IX, column (D), line 25)					
_			ses (Part IX, column (A), lines 11a-11d, 11f-24n		<u>,071,5</u>			,274.
			es Add lines 13-17 (must equal Part IX, column (A), line 25)	3	<u>,364,6</u>	22.	3,289	,916.
		enue less	expenses. Subtract line 18 from line 12 V		274,4	60.		<u>, 985.</u>
800					g of Curren		End of Y	
A E			(Part X, line 16)		<u>,681,0</u>			,607.
Net Assets Fund Balanc	21 Tota	al liabilitie	s (Part X, line 26)	1	<u>,116,8</u>	93.	1,183	,654.
			fund balances. Subtract line 21 from line 20	5	,564,1	64.	6,275	, 953.
1126	iî (I) îi	Signatu	re Block					
Und	er penalties o	of perjury, I d	eclare that I have examined this return, including accompanying schedules and statements, and to the are (other than officer) speased on all information of which preparer has any knowledge	e best of m	y knowledge	and belief,	it is true, corre	ct, and
<u>-</u>				-	7	21	1200	
· •:-		Signatu	10 Of Miles			<u> </u>	2011	
Siç He	iu			Date				
пе	re		LIAM J. TEUTSCH print name and title	EXECU	TIVE I	DIRECT	OR	
						, PTI	INI	
_			Preparer's name Preparer's signature Date	/ //	Check	」"		
Pai			P. GRACEY, CPA DAMES P. GRACEY, CPA 7/13/	7	self employe	d PC	00171080	<u> </u>
	eparer e Only	Firm's name						
US	e Only	Firm's addre			Firm's EIN		101616	
			ARVADA, CO 80002-1340		Phone no	<u>(303)</u>	736-66	_
May	the IRS of	discuss th	is return with the preparer shown above? (see instructions)			[X Yes	No

Form 990 (2010)

Form 990 (2010) ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305	Page 2
Statement of Program Service Accomplishments		
Check if Schedule O contains a response to any question in this Part I	II	
Briefly describe the organization's mission.		
TO ENSURE THAT SURGICAL TECHNOLOGISTS ARE EDUCAT	IONALLY PREPARED TO ADMINISTER	
QUALITY PATIENT CARE		
2 Did the organization undertake any significant program services during the year	ar which were not listed on the prior	
Form 990 or 990-EZ?	Yes	X No
If 'Yes,' describe these new services on Schedule O.		
3 Did the organization cease conducting, or make significant changes in how it	conducts, any program services? Yes	X No
If 'Yes,' describe these changes on Schedule O	conducts, any program services.	<u> </u>
· • • • • • • • • • • • • • • • • • • •	na largant program convenes by expenses. Section	501(6)(3)
4 Describe the exempt purpose achievements for each of the organization's thr and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report to the contract of the contr	ort the amount of grants and allocations to others.	the total
expenses, and revenue, if any, for each program service reported		
4a (Code including grants of	\$) (Revenue \$)
MEMBERSHIP:	· — — — — — — — — — — — — — — — — — — —	
INCLUDES ALL ACTIVITIES REGARDING SERVICE AND MA	INTENANCE OF MEMBERSHIP OPERATI	ONS
		-
4b (Code) (Expenses \$ including grants of	\$) (Revenue \$)
PUBLICATIONS:		
INCLUDES ACTIVITY RELATING TO "THE SURGICAL TECH	NOLOGIST" A MONTHLY JOURNAL PUR	BLISHED
BY THE ASSOCIATION AND OTHER PUBLICATION ACTIVIT	IES	
		- -
· · · · · · · · · · · · · · · · · · ·	 	
4c (Code) (Expenses \$ including grants of	\$) (Revenue \$)
CONFERENCE:		
AN ANNUAL EVENT WHERE THE HOUSE OF DELEGATES MEE		
ASSOCIATION AS WELL AS PROVIDING A WIDE VARIETY	OF EDUCATION SESSIONS	
Ad Other present control (Describer of Cabadala Ca)		
4d Other program services. (Describe in Schedule O)) (Pavenus È	,
(Expenses \$ including grants of \$ 4e Total program service expenses ►		/
4e i otai program service expenses ►		

84-0601305 Form **990** (2010) ASSOCIATION OF SURGICAL TECHNOLOGISTS Page 3 Part IV | 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,' complete Х 1 Schedule A 2 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates X for public office? If 'Yes,' complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 4 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, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Х Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 X complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete 9 Х Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I Х 10 '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, 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,' complete Schedule Х D, Part VI 11 a b Did the organization report an amount for investments- other securities in Part X, line 12 that is 5% or more of its total Х 11_b assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11e Х f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 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 Х 12b if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. Х 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Х 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, business, and program service activities outside the United States? *If 'Yes,' complete Schedule F, Parts I and IV* 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV 15 Х 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

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

complete Schedule G, Part III

20 a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

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)

16

17

18

19

20

20 b

X

X

X

Х

X

17

Page 4

Checklist of Required Schedules (continued) Yes No 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 X 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a disqualified person during the year? If 'Yes,' complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Х 27 Schedule L, Part III 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): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b X Schedule L. Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х 29 Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If 'Yes,' complete Schedule M X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 Х 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? a 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, Part V, line 2 X Yes No Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O

Page 5

<u>@</u>	Statements Regarding Other IRS Filings and Tax Compliance Check of Schedule O contains a response to any question in this Part V				
				Yes	No
1 8		l a 36		ŀ	
ŀ	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>о</u>			
•	c Did the organization comply with backup withholding rules for reportable payments to vendors a (gambling) winnings to prize winners?	and reportable gaming	1c	Х	
28	a 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 22			
	b If at least one is reported on line 2a, did the organization file all required federal employment ta	ax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instri	ructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Х	
ı	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	L	3b	Х	
4:	a At any time during the calendar year, did the organization have an interest in, or a signature or financial account in a foreign country (such as a bank account, securities account, or other financial	other authority over, a ncial account)?	4a		Х
ı	b If 'Yes,' enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Fina	ancial Accounts.			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye		5a		X
ı	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter to	transaction?	5b	\rightarrow	X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u></u>	5c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and solicit any contributions that were not tax deductible?	did the organization	6a		Х
1	b If 'Yes,' did the organization include with every solicitation an express statement that such continot tax deductible?	ributions or gifts were	6ь		
7	Organizations that may receive deductible contributions under section 170(c).				
•	a Did the organization receive a payment in excess of \$75 made partly as a contribution and part services provided to the payor?	lly for goods and	7a		
ı	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which Form 8282?	th it was required to file	7с		
(d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be		7e		
1	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	t contract?	<u>7f</u>		
•	${\bf g}$ If the organization received a contribution of qualified intellectual property, did the organization as required?	file Form 8899	7g		
l	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the or Form 1098-C?	rganization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, have holdings at any time during the year?	organizations. Did the excess business	8		
9	Sponsoring organizations maintaining donor advised funds.				
1	a Did the organization make any taxable distributions under section 4966?	L	_9a		
ļ	b Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter		1		
		0a			
		0 b			
	Section 501(c)(12) organizations. Enter	. 1			
		1a			
		16	10.		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		12a		
		2b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		13a		
	a is the organization licensed to issue qualified health plans in more than one state?	_	138		
	Note. See the instructions for additional information the organization must report on Schedule (O .			
1	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	3Ы			
		3c			
	a Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sci	hedule Q	14b		

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a 1a Enter the number of voting members of the governing body at the end of the tax year **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors or trustees, or key employees to a management company or other person? X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH O 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? SEE SCHEDULE O governing body? 7 b Х b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? X 8b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O* 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Does the organization have local chapters, branches, or affiliates? 10 a Х **b** If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12h to conflicts' c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this is done 12c X 13 13 Does the organization have a written whistleblower policy? X 14 14 Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a a The organization's CEO, Executive Director, or top management official 15b Х **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16 a b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEÉ SCHEDUĽE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►WILLIAM J. TEUTSCH , SAME 303-694-9130

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Form 990 (2010)	ASSOCIATION	OF.	SURGICAL	TECHNOLOGISTS

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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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- 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

Check this box if neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	fficer, director, or trus	tee
(A)	(B)			((;)			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	ndividual trustee or director	Institutional trustee		Key employee	Highest compensated a employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
(1) CHRIS KEEGAN, CST, FAST, DIRECTOR	1	х						0.	0.	0.
(2) BILL HAMMER, CST, MED DIRECTOR	1	Х						0.	0.	0.
(3) MARANDA MAZYCK, CST, LPN DIRECTOR	1	Х						0.	0.	0.
(4) KATHLEEN M. DEMITRAS CS DIRECTOR	1	х						0.	0.	0.
(5) REBECCA HALL, CST, CSA, DIRECTOR	1	х						0.	0.	0.
(6) ROY ZACHARIAS, CST, BS SECRETARY	1	х						0.	0.	0.
O CHRISTOPHER LEE, CST DIRECTOR	1	х						0.	0.	0.
(8) GEORGIA CARTER, CST, CFA TREASURER	2			Х				0.	0.	0.
(9) JOHN RATLIFF, CST, FAST, DIRECTOR	2			х				0.	0.	0.
(10) SHERRI ALEXANDER, CST PRESIDENT	8			Х				0.	0.	0.
(11) MARGARET RODRIGUEZ CST, VICE PRESIDENT	2			х				0.	0.	0.
(12) WILLIAM J. TEUTSCH EXECUTIVE DIREC	44				х			205,897.	0.	41,818.
(13)										
(14)										
(15)								,		
(16)										
<u>(17)</u>										
BAA	1	Щ.	TEFA	01071	12	2/21/10		<u> </u>	<u> </u>	Form 990 (2010)

Part VIII Section A. Officers, Directors, Trus	tees, K	(ey	Em	ıplo	ye	es,	an	d Highest Con	pensated Emp	loyees (cont)
· (A)	(B)			•	c)			(D)	(E)	(F)
Name and title	Average hours							Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week (describe hours for related organi- zations in Sch O)	Indiv or di	Institutional trustee	Officer	ę	Highest compensated employee	Form	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	hours for related	idua recto	utior	역	en p	est c	er '	(2	,	organization and related
	organı- zations	15.5	nal tr		l oye	omp				organizations
	Sch O)	stee	uste		"	ensa				
			rt !			ted		!		
(18)	<u> </u>		H	\vdash	├	Н				
710/					ŀ					
(19)			Н							_
392										
(20)					_					
226			ł							
(21)										-
(22)										
(23)										
(24)										
_(25)					1					
			ļ	ļ	_					<u> </u>
_(26)										
			<u> </u>	ļ	ļ					
(27)										
(00)		<u> </u>	_	-		H				
(28)										:
(20)	-	⊢	_	-	⊢	\vdash				
_(29)	-									
1 b Sub-total	1			l .	<u> </u>	<u>. </u>	▶	205,897.	0.	41,818.
c Total from continuation sheets to Part VII, Section	Δ						•	0.	0.	0.
d Total (add lines 1b and 1c)	^						•	205,897.	0.	41,818.
2 Total number of individuals (including but not limite	d to tho	se li	ster	1 ah	ove,) wh	o re		L	
from the organization 1	u 10 1110	30 11	3101	<i>1</i> ab	040,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 10	cerved more than	ψ100,000 iii 10poi 1	able compensation
Troff the organization										Yes No
3 Did the organization list any former officer, director	or trust	00	kov	omr	alov	، مم	or b	ighest compensat	ed employee	
on line 1a? If 'Yes,' complete Schedule J for such it	ndıvıduz	al.	псу	Citif	JiOy	CC, 1	01 11	ignest compensat	ca cripioyee	3 X
4 For any individual listed on line 1a, is the sum of re	nortable	100	mne	nsa	tion	and	l oth	er compensation	from	
the organization and related organizations greater t	han \$15	0,00	007	If 'Y	'es'	com	plet	e Schedule J for		4 7
such individual										4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	ompens	atio e Sc	n fra bea	om a	any I fo	unre	elate ch n	ed organization or verson	ındıvıdual	5 X
Section B. Independent Contractors	<i>Jonnpiet</i>		,,,,,,	u.c	<u> </u>	, 54	<u> </u>			
1 Complete this table for your five highest compensation	ed inde	pend	dent	cor	ntra	ctors	tha	at received more t	han \$100,000 of	
compensation from the organization								Т	 	
(A) Name and business addres	.c							Description) of services	(C) Compensation
Traine and business addies								2000.1011011		20
									+	
									 	
								<u> </u>		
-										
										
2 Total number of independent contractors (including	but not	lımı	ted	to th	1056	e list	ed a	above) who receive	red more than	

\$100,000 in compensation from the organization ► 0

Par	t VIII Statement of Revenue				
	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
8 10	1a Federated campaigns 1a				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1 b	1			
윤릴	c Fundraising events.	1			
R A	d Related organizations 1d				
ਰੂ≦	e Government grants (contributions)	†			
SS	* ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	†			
55	f All other contributions, gifts, grants, and similar amounts not included above 1f				
풀	g Noncash contributions included in lns 1a-1f: \$	1			
N N	,				Į
"	h Total. Add lines 1a-1f Business Code			·····	
N.		1,815,231.	1,815,231.		
₫	2a MEMBERSHIP DUES & ASSESSMENTS				
8	b WORKSHOPS/SEMINARS/ED	715, 951.	715, 951.		
Ž	c CONFERENCE/EXHIBITS	454,912.	454,912.	100 445	
SE	d_ADVERTISING511120	100,445.	20.010	100,445.	
Ž	e PUBLICATIONS	39,819.	39,819.		
PROGRAM SERVICE REVENUE	f All other program service revenue	2 125 252			
	g Total. Add lines 2a-2f	3,126,358.			
	3 Investment income (including dividends, interest and	00 040			86,649.
	other similar amounts)	86,649.			80,049.
	4 Income from investment of tax-exempt bond proceeds	110 070			110 072
	5 Royalties	119,072.		-	119,072.
	(i) Real (ii) Personal	4			
	6a Gross Rents 123, 224.	4			
	b Less: rental expenses	_			
	c Rental income or (loss) 123, 224.				102.004
	d Net rental income or (loss)	123,224.			123,224.
	7a Gross amount from sales of (i) Securities (ii) Other	4			
	assets other than inventory 403, 339.	4			}
	b Less: cost or other basis				
	and sales expenses 392, 244.	_			
	c Gain or (loss) 11,095.	ļ			
	d Net gain or (loss)	11,095.	11,095.		ļ
NUE	8a Gross income from fundraising events (not including \$				
ᆲ	of contributions reported on line 1c).		1		}
OTHER REVEN	See Part IV, line 18	1			1
Ĕ	b Less: direct expenses b		ŀ	- 	
١	c Net income or (loss) from fundraising events	•			
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities	•			
	10a Gross sales of inventory, less returns and allowances 415, 257.				
	b Less cost of goods sold b 98,357.		1		
	c Net income or (loss) from sales of inventory	316,900.	316,900.		
	Miscellaneous Revenue Business Code				
	11a MISCELLANEOUS	23,603.			23,603.
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	23,603.			
	12 Total revenue. See instructions	3,806,901.	3,353,908.	100,445.	352,548.

Page 10

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

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	12,000.			
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	247,715.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages.	808,708.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	62,564.			
9	Other employee benefits	70,729.			
	Payroll taxes	79,926.			
	Fees for services (non-employees):				-
	n Management				
	D Legal	1,264.			
(Accounting	13,930.			
c	Lobbying	65,783.	· · · · · · · · · · · · · · · · · · ·		
•	Professional fundraising services. See Part IV, line 17	1	·		
f	Investment management fees	25,417.			
ç	g Other	36,985.			
12	Advertising and promotion				
13	Office expenses	19,533.			
14	Information technology				
15	Royalties				
16	Occupancy	117,770.	·		
17	Travel	227,058.	·		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	522,071.			
20	Interest				
21	-,	110 774	<u>.</u>		
22	Depreciation, depletion, and amortization	119,774.			
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	17,756.			
ā	PRINTING AND PUBLICATIONS	389,199.			
ŀ	POSTAGE AND SHIPPING	197,805.			
(BANK/MERCHANT FEES	75,458.			
(CONTRACT LABOR	39,439.			
•	TELEPHONE	39,158.			
f	All other expenses	99,874.			
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	3,289,916.			
26	Joint costs. Check here ► ☐ If following 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				

		(2010) ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-	<u>060130</u>	5 Page
ar	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
Т	1	Cash – non-interest-bearing	1,356,720.	1	1,917,05
		Savings and temporary cash investments	525,784.	2	456,582
ŀ	3	Pledges and grants receivable, net	020,1321	3	
ŀ	4	Accounts receivable, net	175,111.	4	180,00
	-				
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	,	6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	48,260.	8	66,04
	-	Prepaid expenses and deferred charges	62,542.	9	95,37
			02,342.	-	
'	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 2,577,167			
	h	Less: accumulated depreciation 10b 594,751		10 c	1,982,41
		Investments – publicly traded securities.	2,403,743.	11	2,739,86
1		Investments – publicly traded securities. Investments – other securities. See Part IV, line 11	2,403,713.	12	27.03700
1		Investments – other securities. See Part IV, line 11		13	
1	14	Intangible assets	26,550.	14	21,26
1		Other assets. See Part IV, line 11	835.	15	1,00
1	16	Total assets. Add lines 1 through 15 (must equal line 34).	6,681,057.	16	7,459,60
+	17	Accounts payable and accrued expenses	209,914.	17	300,99
1	18	Grants payable	205,514.	18	
1	19	Deferred revenue	896, 367.	19	872,04
1	20		050,507.	20	072,04
1		Tax-exempt bond liabilities	<u> </u>	21	
1	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	,,,,
	23	Secured mortgages and notes payable to unrelated third parties		23	
		Unsecured notes and loans payable to unrelated third parties		24	
-		Other liabilities Complete Part X of Schedule D	10,612.	25	10,61
		Total liabilities. Add lines 17 through 25	1,116,893.	26	1,183,65
۲		Organizations that follow SFAS 117, check here X and complete lines	1,110,033.		1,100,00
		27 through 29 and lines 33 and 34.			
	27	Unrestricted net assets	5,564,164.	27	6,275,95
	28	Temporarily restricted net assets	3,301,1011	28	0/2/0/50
1	29	Permanently restricted net assets		29	
ı		Organizations that do not follow SFAS 117, check here ► and complete			
1		lines 30 through 34.		1 i	
	30	Capital stock or trust principal, or current funds		30	
	30 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
1	31 32	Retained earnings, endowment, accumulated income, or other funds		32	
1	32 33	Total net assets or fund balances.	5,564,164.	33	6,275,95
:1	33 34	Total liabilities and net assets/fund balances.	6,681,057.	34	7,459,60

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Form 990 (2010) ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305	Pa	ge 12
Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI	<u></u>		X
•	1 1		
1 Total revenue (must equal Part VIII, column (A), line 12)	1	3,806,9	
2 Total expenses (must equal Part IX, column (A), line 25)	2	3,289,9	
3 Revenue less expenses Subtract line 2 from line 1	3	516,9	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, co	` ''	5,564,1	
5 Other changes in net assets or fund balances (explain in Schedule O) SEE S	SCHEDULE O 5	194,8	04.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must eq column (B))	qual Part X, line 33,	6,275,9	53.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII	l		\Box
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual	Other		
If the organization changed its method of accounting from a prior year or check in Schedule O.	ked 'Other,' explain		
2a Were the organization's financial statements compiled or reviewed by an independent	endent accountant?	2a	X
b Were the organization's financial statements audited by an independent account	ntant?	2b X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes review, or compilation of its financial statements and selection of an independe	responsibility for oversight of the audit, ent accountant?	2c	Х
If the organization changed either its oversight process or selection process durin Schedule O.	ring the tax year, explain		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial sta separate basis, consolidated basis, or both.	tements for the year were issued on a		
X Separate basis Consolidated basis Both consolidated and	d separate basis		
3a As a result of a federal award, was the organization required to undergo an aud Audit Act and OMB Circular A-133?	dit or audits as set forth in the Single	3a	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization or audits, explain why in Schedule O and describe any steps taken to undergo		3b	
BAA	•	Form 990 (2010)

BAA

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2010

Open to Publicate Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part 1-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

		, to Form 990, Part IV, line 5 (Proxy Tax) o rganizations: Complete Part III	r Form 990-EZ, Part	v, line 35a (Proxy Tax)	, tnen
	of organization			Employer identific	cation number
ASS	SOCIATION OF SURGIC	AL TECHNOLOGISTS		84-060130	05
Pai	Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organ	ization.
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV SE	E PART IV
2	Political expenditures			▶;	\$65, <u>783</u> .
3	Volunteer hours				
Pai	後間 Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	<u> </u>	\$
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶;	\$
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
t	If 'Yes,' describe in Part IV				
Pâf	Complete if the or	rganization is exempt under section	on 501(c), except	t section 501(c)(3)	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt functio	n activities	\$
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►	\$
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	▶;	\$
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	organization made payments amount of political contributi	and employer identification number (EIN) For each organization listed, enter the arons received that were promptly and direct action committee (PAC) If additional spa	mount paid from the filly delivered to a sepa	filing organization's fui arate political organiza	nds. Also enter the ition, such as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)			-		
(3)					
(4)					
(5)					
(6)			-		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

section 501(h	**				
, H		ngs to an affiliated group	trall provinces apply		
B Check ► In the ming		ked box A and 'limited con	iroi provisioris apply	(a) Filing	(b) Affiliated
(The term 'e	Limits on Lobbyii expenditures' mean	s amounts paid or incurre	d.)	(a) Filing organization's totals	group totals
1 a Total lobbying expenditui	*	• • •			
b Total lobbying expenditui		- :	/ing).		
c Total lobbying expenditur	·	d 1b)			
d Other exempt purpose ex	•				
e Total exempt purpose ex	penditures (add line	es ic and id)			·
f Lobbying nontaxable ame both columns.	ount Enter the amo	ount from the following tabl	le in		
If the amount on line 1e, colu	mn (a) or (b) is: T	he lobbying nontaxable an	nount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0		100,000 plus 15% of the excess of			
Over \$1,000,000 but not over \$1		175,000 plus 10% of the excess of			
Over \$1,500,000 but not over \$1		\$225,000 plus 5% of the excess ov	er \$1,500,000.		
Over \$17,000,000		51,000,000			
g Grassroots nontaxable at h Subtract line 1g from line					·
in Subtract line by from line					
i Subtract line 1f from line j If there is an amount oth	1c. If zero or less, er than zero on eith	enter -0-	e organization file Fo	rm 4720 reporting	Yes
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this	1c. If zero or less, er than zero on eith year?	enter -0-			Yes
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th	nder Section 501(h) ction do not have to ns for lines 2a throug	complete all of the five h 2f.)	Yes
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele s below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug	complete all of the five h 2f.)	Yes (e) Total
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this (Some	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug 4-Year Averaging Per	complete all of the five the 2f.)	
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this (Some Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug 4-Year Averaging Per	complete all of the five the 2f.)	
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this (Some Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug 4-Year Averaging Per	complete all of the five the 2f.)	
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this (Some Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug 4-Year Averaging Per	complete all of the five the 2f.)	
i Subtract line 1f from line j If there is an amount oth section 4911 tax for this (Some Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	e 1c. If zero or less, per than zero on eith year? organizations that columns	enter -0- ner line 1h or line 1i, did th -Year Averaging Period Ui made a section 501(h) ele below. See the instructio	nder Section 501(h) ction do not have to ns for lines 2a throug 4-Year Averaging Per	complete all of the five the 2f.)	

Schedule C (Form 990 or 990-EZ) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS 84-0601305 Page 3 Part III-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) No **Amount** Yes During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If 'Yes.' describe in Part IV j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Parelle A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). No Yes 1 Х 1 Were substantially all (90% or more) dues received nondeductible by members? X 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Partill B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1,815,231. Dues, assessments and similar amounts from members. 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 65,783. a Current year 2b **b** Carryover from last year 65,783. 2 c c Total 3 276,156. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political 0. 4 expenditure next year? 0. 5 5 Taxable amount of lobbying and political expenditures (see instructions) Part V Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information _ _ PART I-A. LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES _ LOBBYING VARIOUS STATE LEGISLATURES ON BEHALF OF ASSOCIATION MEMBERSHIP

Schedule C (Form 990 or 990-EZ) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305	Page 4
Part W Supplemental Information (continued)		
		_
		_

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. 2010

Open to Public Inspection

Employer identification number

AS:	SOCIATION OF SURGICAL TECHNOLO	GISTS	84-0601305
Pa	rt I Organizations Maintaining Dono	Advised Funds or Other Similar Fu	
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds 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 dor funds are the organization's property, subject	nor advisors in writing that the assets held in to the organization's exclusive legal control?	donor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor advisor, or f	nds can be or any other Yes No
Pa	rt II Conservation Easements. Compl	ete if the organization answered 'Yes	s' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (e.g., r	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizati last day of the tax year	on held a qualified conservation contribution	n the form of a conservation easement on the
	•		Held at the End of the Tax Year
	a Total number of conservation easements.		2a
	b Total acreage restricted by conservation ease	ments	2b
	c Number of conservation easements on a certi	fied historic structure included in (a)	2c
(d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a his	oric 2d
3	Number of conservation easements modified,	transferred, released, extinguished, or termin	
4	Number of states where property subject to ex	onconvation eacoment is located >	
Ċ	Number of states where property subject to co		
5	Does the organization have a written policy re and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, if	nspecting, and enforcing conservation easem	ents during the year
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	section Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	s conservation easements in its revenue and exp to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
Pa	rt III Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, line	or Other Similar Assets. e 8.
 1:	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	s held for public exhibition, education, or rese	renue statement and balance sheet works of earch in furtherance of public service, provide,
I	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its revenu ld for public exhibition, education, or research	e statement and balance sheet works of art, n in furtherance of public service, provide the
	(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 a amounts required to be reported under SFAS	irt, historical treasures, or other similar assets 116 (ASC 958) relating to these items	for financial gain, provide the following
;	a Revenues included in Form 990, Part VIII, line		> \$
١	b Assets included in Form 990, Part X		▶ \$

chedule D (Form 990) 2010 ASSOC				84-060		Pag
antill Organizations Mainta	ining Collectio	ns of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (continu	ued)
3 Using the organization's acquisition items (check all that apply):	ion, accession, and	d other records, ch	neck any of the following	g that are a significant ι	use of its collec	ction
a Public exhibition		d □ Loan	or exchange programs			
b Scholarly research		e Other	0.0			
c Preservation for future gener	rations					
4 Provide a description of the orga		ns and explain ho	w they further the organ	nization's exempt purpor	se in	
Part XIV						
5 During the year, did the organiza assets to be sold to raise funds r	ation solicit or rece rather than to be n	ive donations of a naintained as part	rt, historical treasures, of the organization's co	or other similar ollection?	Yes	N
Escrow and Custodia 9, or reported an amo	I <mark>l Arrangement</mark> ount on Form 99	s. Complete if 90, Part X, line	organization answe 21.	ered 'Yes' to Form 9	990, Part IV	, lin
1a Is the organization an agent, trus included on Form 990, Part X?				her assets not	Yes	N
b If 'Yes,' explain the arrangement	t in Part XIV and c	omplete the follow	ing table			
_					Amount	
c Beginning balance				1c	_	
d Additions during the year				1d	-	
e Distributions during the year				1e		
f Ending balance	O	00 Dark V. I.ma 01:	2		T _{Vac}	٦.
2a Did the organization include an a b If 'Yes,' explain the arrangement		ou, Part X, line 21	•		Yes	
and Endowment Funds. Co		rganization an	swered 'Yes' to For	rm 990 Part IV line	<u>= 10</u>	
enteron Endownient unds. Ot	(a) Current year	(b) Prior yea			(e) Four yea	rs ba
1 a Beginning of year balance.	(a) Guitein year	(b) Filor yea	i (c) iwo years bac	(u) Three years pack	(c) rour yea	
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentag	e of the year end	balance held as				
a Board designated or quasi-endov	wment ►	%				
b Permanent endowment ▶	%					
c Term endowment ►	8					
3a Are there endowment funds not	in the possession	of the organization	that are held and adm	inistered for the	V.	1
organization by.					Yes	╀
(i) unrelated organizations					3a(i)	+
(ii) related organizations b If 'Yes' to 3a(ii), are the related of	organizationa lista	d ac required as S	shodulo D2		3a(ii) 3b	+
4 Describe in Part XIV the intender	•	•			30	
Land, Buildings, and				-		
Description of investment		Cost or other basis (investment)		(c) Accumulated depreciation	(d) Book v	/alue
1 a Land			309,856.		309	, 8
b Buildings.			1,871,387.	280,954.	1,590	, 4
c Leasehold improvements						
d Equipment			316,871.	238,826.		3,0
e Other			70 053	74 071		, 0
			79,053.	74,971.	3	, ,

TEEA3302L 12/20/10

Page 3

		0001303	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)		<u>,806,901.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25).	3	,289,916.
3	Excess or (deficit) for the year Subtract line 2 from line 1	<u> </u>	516,985.
4	Net unrealized gains (losses) on investments		194,804.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		194,804.
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		<u>711,789.</u>
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu		
1	Total revenue, gains, and other support per audited financial statements	1 4	<u>,100,062.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
á	Net unrealized gains on investments 2a 194,804.		
ı	Donated services and use of facilities 2b		
•	Recoveries of prior year grants		
•	d Other (Describe in Part XIV) SEE PART XIV 2d 98,357.		
•	Add lines 2a through 2d	2e	<u> 293,161.</u>
3	Subtract line 2e from line 1	3 3	,806,901.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investments expenses not included on Form 990, Part VIII, line 7b.		
ı	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5 3	,806,901.
	Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturn	
1	Total expenses and losses per audited financial statements		3,388,273.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities		
ı	Prior year adjustments 2b		
	Other losses 2c		
	d Other (Describe in Part XIV) SEE PART XIV 2d 98, 357.		
	e Add lines 2a through 2d	2e	98,357.
3	Subtract line 2e from line 1		3,289,916.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		, = = = , = = = =
_	a Investments expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 3	3,289,916.
Pa	₹XIV Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, 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 tadditional information.	ines 1b and this part to p	2b, provide
			_
			-
			- -

TEEA3304L 02/11/11

Schedule **D** (Form 990) 2010

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-	Schedule D (Form 990) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305	Page 5
	Part XIV Supplemental information (continued)		
	•		
		-	
		-	. -
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			.
			- -

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545-0047 2010

Open to Public Inspection

Employer identification number

84-0601305

ASSOCIATION OF SURGICAL TECHNOLOGISTS

Part | General Information on Grants and Assistance Department of the Treasury Internal Revenue Service Name of the organization

	to substantiate the grants or assistanc	<u>ب</u>	the grants or assistance, the grantees' eligibility for the grants or assistance, and	rantees' eligibility for the	le grants or assistanc	e, and	☐ Yes X No
2 Describe in Part IV the organization's procedures for monitoring the Part II Grants and Other Assistance to Governments and	rocedures for monit		use or grant funds in the United States. Organizations in the United States. Complete if the organization answered 'Yes' to	states ed States. Complet	e if the organizati	ion answered 'Ye	s, to
	or any recipient	that received m	ore than \$5,000. C	heck this box if no	one recipient rec	eived more than	\$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FOUNDATION FOR SURGICAL 6 WEST DRY CREEK CIRCLE LITTLEON, CO 80120	84-1400872		10,000.	.0			SCHOLARSHIPS /OPERATIONS
(2)							
(3 <u>)</u>							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
(5)							
							:
(9)							
ω							
(8)							
	-						
1	and government or	ganizations				A 4	Н
3 Enter total number of other organizations	ns	1					
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instructions	s for Form 990.		TEEA3901L 10/29/10	10/29/10	Sched	Schedule I (Form 990) 2010

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 84-0601305 ASSOCIATION OF SURGICAL TECHNOLOGISTS Schedule I (Form 990) 2010 Part III

(f) Description of non-cash assistance								other additional information.								
(e) Method of valuation (book, FMV, appraisal, other)								, line 2, and any			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 		 	 	
(d) Amount of non-cash assistance								provide the information required in Part I		 	 	! 1 ! ! ! !				
(c) Amount of cash grant					,		-	rovide the inform	, , , , , , , , , , , , , , , , , , ,	 	 	 			 	
(b) Number of recipients								olete this part to g		 						
(a) Type of grant or assistance	-	2	n	4	5	9	7	Part IV Supplem								

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Schedule I (Form 990) 2010

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 84-0601305

ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305			
Part I Questions Regarding Compensation				
			Yes	No
1 a Check the appropriate box(es) if the organization provided an VII, Section A, line 1a. Complete Part III to provide any	ny of the following to or for a person listed in Form 990, Part relevant information regarding these items			
First-class or charter travel	Housing allowance or residence for personal use			
Travel for companions	Payments for business use of personal residence	ll		
Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
h If any of the house on him to an electrical add the assessment				
b If any of the boxes on line 1a are checked, did the orgal reimbursement or provision of all of the expenses descr	nization follow a written policy regarding payment or ibed above? If 'No,' complete Part III to explain	1ь		
2 Did the organization require substantiation prior to reimb trustees, and the CEO/Executive Director, regarding the	oursing or allowing expenses incurred by all officers, directors, items checked in line 1a?	2		
3 Indicate which, if any, of the following the organization to CEO/Executive Director Check all that apply	uses to establish the compensation of the organization's			
Compensation committee	Written employment contract			1
Independent compensation consultant	Compensation survey or study			
Form 990 of other organizations	Approval by the board or compensation committee			1
4 During the year, did any person listed in Form 990, Part or a related organization:	VII, Section A, line 1a with respect to the filing organization		,	
a Receive a severance payment or change-of-control payr	ment from the organization or a related organization?	4a		\mathbf{x}
b Participate in, or receive payment from, a supplemental		4b		Х
c Participate in, or receive payment from, an equity-based	·	4c		X
If 'Yes' to any of lines 4a-c, list the persons and provide	,			
	•			
Only section 501(c)(3) and 501(c)(4) organizations must	t complete lines 5-9.			
5 For persons listed in Form 990, Part VII, Section A, line contingent on the revenues of	1a, did the organization pay or accrue any compensation			
a The organization?		5 a		<u> </u>
b Any related organization?		5Ь		<u> </u>
If 'Yes' to line 5a or 5b, describe in Part III				
6 For persons listed in Form 990, Part VII, Section A, line contingent on the net earnings of	1a, did the organization pay or accrue any compensation			
a The organization?		6a		-
b Any related organization?		6b		
If 'Yes' to line 6a or 6b, describe in Part III.				
	1 - did the community of the community and			Ì
described in lines 5 and 6? If 'Yes,' describe in Part III	1a, did the organization provide any non-fixed payments not	7		
8 Were any amounts reported in Form 990, Part VII, paid	or accrued pursuant to a contract that was subject to the initial 4958-4(a)(3)? If 'Yes,' describe in Part III	8		
		 		\vdash
9 If 'Yes' to line 8, did the organization also follow the reb section 53.4958-6(c)?	outtable presumption procedure described in Regulations	9		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Page 2

Schedule J (Form 990) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
WILLIAM J. TEU	(1) 190,897.	15,00	0	25, 737.	16,081.	247,715.	231,049.
	0		0.	0.	0.	0	
	<u>-</u>]()						
2							
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3							
		 				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1
4	(3)						
	(6)	 	 	 		 	1 1 1 1 1 1
5							
	()		 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9							
	()	 	 	 	1 1 1 1 1 1 1	1 	
7							
	(i)		 	 	1 1 1 1 1	 	1 1 1 1 1
8							
	()	 	 	1 1 1	1 1 1 1 1 1 1 1	 	1 1 1 1
6	(E)						
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10	(ii)						
	()	1 1 1	 	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1	
11	<u> </u>						
		1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	!!!!!!!!!!!	1 1 1 1 1 1 1 1
12	(ii)						
		1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1	
13	(ii)						
		 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1	
14							
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1	1 1 1 1 1 1
15	(i)						
	0			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
BAA			TEEA4102L 11/	11/15/10		Sched	Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization	Employer identification number
ASSOCIATION OF SURGICAL TECHNOLOGISTS	84-0601305
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL D	OCUMENTS
SEE ATTACHED COPY OF AMENDED BY-LAWS	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE	RNING BODY
HOUSE OF DELEGATES ELECTS BOARD MEMBERS AT THE ANNUAL CONVENTION	<u>DN.</u>
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
FORM 990 IS REVIEWED BY THE ACCOUNTING MANAGER PRIOR TO FILING	, BUT NO REVIEW WAS
OR WILL BE CONDUCTED WITH THE BOARD	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
UPON WRITTEN REQUEST THE ORGANIZATION WILL PROVIDE COPIES OF THE	HE REQUESTED DOCUMENTS
OR, THE DOCUMENTS ARE AVAILABLE DURING NORMAL BUSINESS HOURS W	ITH ADVANCED
NOTIFICATION OF NO LESS THAN 30 DAYS	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990.

OMB No 1545 0047

(g) Sec 512(b)(13) controlled entity? (f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes **Employer identification number** (f) Direct controlling entity 84-0601305 N/A (e) End-of-year assets Public charity status (if section 501(c)(3)) Parting Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) <u>e</u> σ (d) Total income (**d)** Exempt Code section 501 (C) (3) (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country) ပ္ပ છ (b) Primary activity Q. RE-CERTIFICATION TO DIRECT THE CERTIFICATION ACCREDITATION (b)
Primary activity TECHNOLOGY EDUCATION SURGICAL PROGRAMS SURGICAL TECHNOLOGISTS ı (a) Name, address, and EIN of disregarded entity ACCREDITATION REVIEW COUNCIL FOR I (a) (a) Name, address, and EIN of related organization SA (4) NATIONAL BOARD OF ST AND 6 WEST DRY CREEK CIRCLE (2) 6 WEST DRY CREEK CIRCLE LITTLETON, CO 80120 (5) <u>LITILETON, CO 80120</u> 84-1209865 ASSOCIATION OF (3) 74-3139687 Parkill

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SCHOLARSHIPS

FOUNDATION FOR SURGICAL TECHNOLOGY

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Schedule R (Form 990) 2010

TEEA5001L 12/22/10

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule R (Form 990) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a partnership during the tax year.)

(k) Percentage ownership General or managing partner? Ŷ Yes Code V-UBI amount in box 20 of Schedule F-(Form 1065) (h)
Disproportionate
allocations? ŝ Yes (g) Share of end-of-year assets (f) Share of total income (e)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (d) Direct controlling entity (c) Legal domicile (state or foreign country) (b) Primary activity **(a)** Name, address, and EIN of related organization | | | 5 8 ଫ୍ଲ

Parative I Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, Ine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Coled or designations	rporation or Trust (Co	mplete if the	he organizaduring the	ation answered 'Ye tax year.)	es' to Form 990, Pa	ıt IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile Direct Type of entity (Share of total income assets country) (C corp, S corp, country)	ect Typing entity (C of	(e) be of entity orp, S corp, or trust)	Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
<u>√1)</u>							
(2)							
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Schedule **R** (Form 990) 2010

TEEA5002L 12/07/10

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

	acces in any of the following transcotions with one or more related expensations listed in Darts 11 11/2
Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	1 Diving the tax year did the organization energy is any of the following transaction

- During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a Receipt of (i) interest (ii) annuities (iii) royalties (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)
 - e Loans or loan guarantees by other organization(s)
- f 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)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
 - I Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets

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- n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- 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)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

E II (TIC ATSWELL) OF THE ADOVE 13 1.53, SEC THE HISTORIAN OF THIS COMPLETE THIS THIS THIS CONTROLLED TO THE THIS CONTROLLED THIS THIS CONTROLLED TO THE THIS CO	ig covered relations		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(c) (d) Amount involved amount involved
(1) ACCREDITATION REVIEW COUNCIL FOR STSA	В		2,000. ACTUAL
(2) ACCREDITATION REVIEW COUNCIL FOR STSA	I	34,176. ACTUAL	ACTUAL
(3) NATIONAL BOARD OF ST AND SA	I	45, 168. ACTUAL	ACTUAL
(4) NATIONAL BOARD OF ST AND SA	Ъ	3, 013.	3,013. ACTUAL
(5) FOUNDATION FOR SURGICAL TECHNOLOGY	B		10,000. ACTUAL

Schedule R (Form 990) 2010

TEEA5003L 12/23/10

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

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 Prima	(b) Primary activity	(b) (c) (d) Re all part ry activity Legal domicile section (state or foreign 501(c)(3 country) organizatio	(d) Are all partners section 501(c)(3) organizations?	(e) Share of end-of-year assets	(f) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	· (h) General or managing partner?	al or ging er?
			Yes No		Yes No		Yes	S N
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ВАА		TEEA5004L 12/23/10				Schedule R (Form 990) 2010	orm 990	2010

Pail VII	Supplemental Information
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
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Schedule R (Form 990) 2010

Page 5

Schedule R Cont (Form 990) 2010 ASSOCIATION OF SURGICAL TECHNOLOGISTS

84-0601305

Continuation Page 1 of 1

[配置]] Continuation of Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity	(G) Sec 512(b)(13) controlled entity?	b)(13) entity?
						Yes	ş
6 WEST DRY CREEK CIRCLE LITTLETON, CO 80120	SURGICAL TECHNOLOGY						
84-1400872	STUDENTS	8	501 (C) (3)	7	N/A		×
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SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

ASSOCIATION OF SURGICAL TECHNOLOGISTS

84-0601305

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL \$ 194,804.

2010

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION PAGE 6

ASSOCIATION OF SURGICAL TECHNOLOGISTS

84-0601305

SCHEDULE D, PART XII, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

COST OF INVENTORY SOLD

TOTAL \$ 98,357. \$ 98,357.

SCHEDULE D, PART XIII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S

COST OF INVENTORY SOLD

TOTAL \$ 98,357. 98,357.



AST BYLAWS ADOPTED BY THE HOUSE OF DELEGATES JUNE 1969 • LAST AMENDED IN MAY 2010*

ARTICLE I

Name

Section 1. The name of this organization is the Association of Surgical Technologists, Inc., hereinafter referred to as "AST."

ARTICLE II

Purposes

Section 1. The purposes of AST are the following:

- A. To study, discuss, and exchange professional knowledge, expertise, and ideas in the field of surgical technology.
- B. To promote a high standard of surgical technology performance for quality patient care.
- C. To stimulate interest in continuing education for surgical technologists.
- D. To encourage employment of certified surgical technologists through cooperative efforts with other professional health care organizations and individuals.
- E. To promote and maintain communication and cooperative relationships with other professional health care organizations.
- F. To explore and encourage the diversified roles of the certified surgical technologist, hereinafter referred to as the "CST."

ARTICLE III

Constituent Divisions

Section 1. State assemblies

- A. Upon approval of the Board of Directors and following the established procedure, all states shall form, either individually or as a geographically adjacent group of states, an assembly that shall be known as [Name of State or State Group] State Assembly of AST and charters issued for their formation. Members overseas shall belong to the state assembly of their choice. Active duty military personnel shall belong to the "Active Duty Military State Assembly".
- B. State assemblies of AST shall not adopt bylaws in opposition with AST bylaws and shall sign and comply with the State Assembly Agreement. Meetings shall be determined by each state. A state assembly must remain in good standing, as defined in the AST Policy Manual, in order to retain its charter.
- C. State assembly dues allocated to those state assemblies not yet chartered or those that have had their charter revoked by the Board of Directors shall be held for the state assembly until it is chartered or reinstated.

- D. A state assembly of AST may be disciplined (censured, suspended, or disbanded) or have its charter revoked by the Board of Directors by a two-thirds vote when actions of the state assembly are deemed to be in opposition with AST bylaws or the State Assembly Agreement, or in the event the state assembly fails to comply with all requirements of the AST bylaws or AST Policy Manual, or with any lawful requirement of AST.
- E. Disbandment of a state assembly shall follow the procedure as stated in the AST Policy Manual.
- F. When a question of ethical standards exists, a state assembly may follow the grievance procedure as stated in the AST Policy Manual.

ARTICLE IV

Membership

Section 1. Definition. A surgical technologist is an allied health professional who possesses expertise in the theory and application of sterile and aseptic techniques and who combines knowledge of human anatomy, surgical procedures, and the implementation tools and technologies to facilitate a physician's performance of invasive therapeutic and diagnostic procedures.

Section 2. Classification

A. Active Member

- 1. One who has passed the National Board of Surgical Technology and Surgical Assisting (hereinafter referred to as the NBSTSA) national certifying examination in surgical technology and maintains certification currency as defined by the NBSTSA.
- 2. One who has passed the national certification examination and not maintained certification currency as defined by the NBSTSA but who is retired or disabled. However, eligibility for elected office and delegate status will continue to require certification currency.
- 3. Active members have voice and vote.

B. Associate Member

- 1. One who has passed the national certifying examination and not maintained certification currency as defined by the NBSTSA.
- 2. One who has proof of either having completed or being currently enrolled as a student in a Commission on Accreditation of Allied Health Education Programs (hereinafter referred to as "CAAHEP")-accredited surgical technology program or its equivalent.
- 3. One who can provide notarized documentation from her/his employer that she/he is employed as a surgical technologist.

- 4. One whose primary source of employment is teaching in a CAAHEP-accredited surgical technology program or its equivalent.
- 5. Associate members (numbers 1 through 4) have voice but no vote.

C. Affiliate Member

- 1. Any individual or organization that wishes to affiliate with AST and is approved by the Board of Directors as defined in the AST Policy Manual.
- 2. Affiliate members have voice but no vote.

D. Retired Member

- 1. One who provides proof of reaching the social security retirement age or provides proof of permanent disability resulting in an inability to work.
- 2. Voice and/or vote for a retired member will be based on the criteria in subsections A, B, or C of this section.

E. Honorary Member

- 1. One who has served as a President of AST.
- 2. One who has rendered notable service to AST and is approved by the House of Delegates upon recommendation of the Board of Directors.
- 3. Voice and/or vote for an honorary member shall be based on the criteria in subsections A, B, or C of this section.

Section 3. Disciplinary Procedures

- A. The procedure followed to discipline a member (censure, suspend, or expel) shall be that stated in *Robert's Rules of Order Newly Revised* under "Disciplinary Procedures" and shall require a two-thirds ballot vote of the Board of Directors.
- B. A member who wishes to file a grievance shall follow the grievance procedure as stated in the AST Policy Manual.
- C. A member censured, suspended, or expelled may be reinstated by a two-thirds ballot vote of the entire Board of Directors.

Section 4. Dues

- A. A combined dues amount for national and state assembly dues ("unified dues") shall be established by the House of Delegates, paid according to established procedure, and maintained by the national treasury.
- B. National and state assembly dues may not be collected by any other entity other than the national headquarters.

- C. Membership benefits shall begin upon receipt of national and state assembly dues at the national headquarters.
- D. A member whose national and state assembly dues are not received at the national headquarters within thirty days from the renewal date shall be delinquent and forfeit all membership privileges. Reinstatement shall be effective upon payment of dues.
- E. Dues for student members and retired members shall be fifty percent of the established annual dues.
- F. Annual dues shall be waived for honorary members.

ARTICLE V

Finance

Section 1. Fiscal Year. The fiscal year shall be the calendar year.

Section 2. Budget. With the recommendation of the Budget and Finance Committee, the Board of Directors shall adopt an annual operating budget covering all activities of AST. The Treasurer shall be the Chairperson of the Budget and Finance Committee.

Section 3. Audit

A. The accounts of AST shall be audited annually, or as directed by the Board of Directors, by professional auditors who shall provide a report to the Board of Directors.

- B. Within sixty days following completion of the audit, a financial report for the fiscal year just concluded shall be published in a national publication.
- **Section 4. Bonding**. Trust or surety bonds may be furnished for the officers, Directors, or employees of AST as directed by and in an amount determined by the Board of Directors.
- **Section 5. Liability Insurance**. Liability insurance may be furnished for the officers, Directors, or employees of AST as directed by and in an amount determined by the Board of Directors.

Section 6. Check Signing. Authorization for signing checks and the amount shall be defined in the *AST Policy Manual*.

ARTICLE VI

Nominations and Elections

Section 1. Nominations

A. At least ninety days prior to the national conference, the Credentials Committee shall present a list of candidates for each office to be filled at the national conference accompanied by a curriculum vitae and a written consent of the nominees to serve if elected. All nominees who meet the qualifications for office shall be placed on that list.

- B. Nominations may be made from the floor provided written consent of the nominees has been obtained in advance and their credentials have been verified by the Credentials Committee.
- C. A member holding an elective position may not be nominated for another position for which the term would begin before expiration of the term of the current position unless the member resigns from her/his current elective position.
- D. A member employed at national headquarters shall not be nominated for a national elected position.

Section 2. Elections

- A. Elections shall be by ballot at the national conference, the date and hours to be determined by the Board of Directors.
- B. Election of officers shall be by a majority vote. In the event a second ballot is needed to establish a majority, the two candidates receiving the highest number of votes shall be placed on the second ballot.
- C. Election of Directors shall be by plurality vote. In the case of a tie, a decision shall be by ballot of the tied candidates and plurality shall elect. In the event of a second tie, a decision shall be by lot.
- D. A Tellers Committee shall be appointed by the President with due regard to representation and geographic distribution.
- E. Before the polls open, the Credentials Committee, as defined in the AST Policy Manual, shall provide the Tellers Committee with a list of all delegates eligible to vote.
- F. The President, Vice President, Treasurer, and three Directors shall be elected in odd-numbered years. The Secretary and four Directors shall be elected in even numbered years.

ARTICLE VII

Officers

Section 1. The officers of AST shall be the following: President, Vice President, Secretary, and Treasurer.

Section 2. Eligibility of Officers

- A. A candidate shall have been an active member for three years immediately preceding nomination and, if elected, shall maintain that active status.
- B. A candidate shall have served at least one full term during the previous six years on the Board of Directors.

Section 3. Term of Office of Officers

- A. The Vice President shall serve for a term of two years or until a successor has been elected. The President shall serve for a term of two years or until a successor is elected.
- B. The Secretary and Treasurer shall serve for a term of two years or until their successors have been elected.
- C. All newly elected officers shall assume office at the close of the final business session at the national conference.
- D. No officer may serve more than two full terms in the same office.
- E. Any amount of time served that equals more than half a term shall be considered a full term of office.

Section 4. Duties of Officers

- A. The President or her/his designee shall be the official representative of AST at all times and places.
- B. The officers shall perform the duties prescribed by these bylaws, the AST Policy Manual, and the parliamentary authority adopted by AST.

Section 5. Vacancies of Officers

- A. A vacancy occurring in the office of President shall be automatically filled by the Vice President.
- B. A vacancy occurring in the office of Vice President shall be filled at the next annual conference.
- C. In the event there is a vacancy in both the offices of President and Vice President, the office of President shall be filled by the Board of Directors from among the Board members, with the office of Vice President remaining vacant. Both offices shall then be elected at the next annual conference.
- D. A vacancy occurring in the office of Secretary or Treasurer between conferences shall be filled for the unexpired term by the Board of Directors with an individual meeting the eligibility requirements for the office.

ARTICLE VIII

Meetings

Section 1. AST shall meet annually and that meeting shall be known as the national conference, the date and place of which shall be determined by the Board of Directors.

Section 2. The voting body of the national conference shall be the House of Delegates. Voting by delegates shall be in person and each delegate will be entitled to one vote.

Section 3. All officers and members of the Board of Directors and past presidents who maintain active membership status shall be entitled to all privileges of a delegate at the time they assume office. This delegate category shall not affect state assembly delegate representation.

Section 4. Delegate representation

A. State Assemblies

- 1. Each state, the District of Columbia, and the active duty military, whether a single-state or as part of a multi-state assembly, shall be entitled to six delegates and six alternates, provided the assembly is in good standing as defined in the AST Policy Manual.
- 2. Delegates and alternates shall be active members elected by their state assembly.
- 3. The names shall be submitted to national headquarters at least sixty days prior to the national conference. Any forms received after that deadline must be presented during designated hours at the national conference.

Section 5. Business Meetings

- A. There shall be a minimum of two business meetings at each national conference.
- B. Business meetings shall be open. Every member shall have voice, but only delegates may make motions and vote.
- C. Twenty percent of the total possible delegates in AST, and at least ten percent of the total number of state assemblies in AST, shall constitute a quorum for a meeting of the House of Delegates.

D. Special Meetings

- 1. During the national conference, special meetings of the House of Delegates may be called by the President or upon written request of five members of the Board of Directors or by one-third of the total number of members of the House of Delegates.
- 2. Between conferences, special meetings of the House of Delegates may be called by two-thirds of the Board of Directors or by two-thirds of the delegates credentialed for the previous conference. Thirty days' written notice of the time, place, and business to be considered at the special meeting shall be given to all members.

Section 6. There shall be educational sessions provided at each national conference.

ARTICLE IX
Board of Directors

Section 1. The Board of Directors shall consist of the officers and seven other elected Directors.

Section 2. Eligibility of Directors

- A. A candidate for the Board of Directors shall have been an active member for three years immediately preceding nomination and, if elected, shall maintain that active status.
- B. A candidate for the Board of Directors shall have served at least one complete term on a national committee, whether standing or special (ad hoc), the NBSTSA, the ARC/STSA, or a complete two-year term as an officer in a current or previous constituent division within the last 10 years.

Section 3. Term of Office of Directors

- A. Directors shall serve for a term of two years or until their successors have been elected.
- B. All newly elected Directors shall assume office at the close of the final business session at the national conference.
- C. No Director may serve more than two full terms in the same office.
- D. Any amount of time served that equals more than half a term shall be considered a full term of office.

Section 4. Vacancies of Directors

A. Vacancies for Directors occurring between conferences shall be filled for the unexpired term by the Board of Directors.

Section 5. Duties of the Board of Directors

- A. Shall have the authority to transact business between meetings of the House of Delegates.
- B. Shall formulate policies and procedures to be included in the AST Policy Manual.
- C. Shall foster the growth and development of AST.
- D. Shall have the authority to establish Board of Directors standing committees, the composition and duties of which shall be stated in the AST Policy Manual.
- E. Shall review all committee reports and determine action to be taken.
- F. Shall submit a written report to the House of Delegates for all Board of Directors activities.
- G. Shall authorize the awarding of all contracts.

- H. Shall contract for the services of an Executive Director and establish conditions for employment and termination.
- I. Shall authorize the sale and exclusive use of the official insignia of AST.
- J. Shall fulfill any other duties as specified in these bylaws.

Section 6. Meetings of the Board of Directors

- A. The Board of Directors shall hold at least two meetings per year.
- B. Special meetings may be called by the President or upon written or electronic request of three members of the Board of Directors. Written or electronic notice of such a special meeting shall be sent at least thirty days prior to the meeting unless waived by a majority vote of the Board of Directors.
- C. Six members of the Board of Directors, at least two of whom are officers, shall constitute a quorum of the Board of Directors.
- D. Minutes of all Board of Directors' meetings shall be distributed and maintained as prescribed in the AST Policy Manual.
- **Section 7.** Voting by the Board of Directors shall be vote by either voice, mail ballot, telephone conference call, fax, or any other form of electronic transmission.

ARTICLE X

Committees

Section 1. Standing Committees

- A. The standing committees shall be Bylaws, Resolutions, and Parliamentary Procedure; Education and Standards of Practice; and State Assembly Leadership and shall be appointed by the President with the approval of the Board of Directors.
- B. With the approval of the President, standing committees may appoint special committees.
- C. Committee term
- 1. Committee members may serve for a term of two years, with a maximum of three terms on the same committee.
- 2. All newly appointed committee members shall assume their appointed positions at the close of the final business session at the national conference.
- 3. Any amount of time served that equals more than half a term shall be considered a full committee term.

D. Duties. The duties and composition of these committees shall be as stated in the AST Policy Manual.

Section 2. Special Committees

- A. A special committee may be appointed by the President, as the need arises, to carry out a specified task, at the completion of which it ceases to exist.
- B. Guidelines for such committees shall be as stated in the AST Policy Manual.

Section 3. Eligibility of Committee Members

- A. Members of the Bylaws, Resolutions, and Parliamentary Procedure, Education and Professional Standards, and State Assembly Leadership Committees shall have active membership status in AST.
- B. Special committees may include active, associate, or affiliate members of AST or nonmembers.
- D. Committee members may be removed by the Board of Directors based on failure to perform, as defined in the AST Policy Manual.
- **Section 4.** The President shall be an ex-officio member of all committees.

ARTICLE XI

Official Publication

Section 1. The official publication of AST shall be *The Surgical Technologist* and it shall be available to each member of AST.

ARTICLE XII

Parliamentary Authority

Section 1. The latest edition of *Robert's Rules of Order Newly Revised* shall govern AST in all cases not covered by these bylaws.

ARTICLE XIII

Amendments

Section 1. The House of Delegates may amend the bylaws at the national conference annually by a two-thirds vote of the delegates present and voting.

- A. All proposed amendments shall be submitted to the Bylaws, Resolutions, and Parliamentary Procedures Committee by the end of the preceding year and to all AST members via the official publication at least ninety days prior to the national conference at which time they will be voted upon.
- B. The Board of Directors and/or the Bylaws, Resolutions, and Parliamentary Procedures Committee may declare an extraordinary need and present a previously unpublished amendment for consideration at one business session, provided that such amendment shall be voted upon at a following business session and gain approval by a three-fourths affirmative vote of the House of Delegates.

Section 2. Amendments to the national AST bylaws shall be reflected in state assembly bylaws.

* Adopted by the House of Delegates in 1969 with amendments in 1970, 1971, 1972, 1973, 1974, 1975,1976, 1977, 1978, 1979, 1980, 1981, 1982, 1983,1984, 1986, 1987, 1989, 1991, 1996, 1998, 1999,2001,2003, 2004, 2005, 2007, 2008, and 2010.

Form **8868** (Rev January 2011)

Department of the Treasury Internal Revenue Service Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you ar	re filing for an Automatic 3-Month Extension, co	mplete only	Part I and check this box		► X
If you ar	e filing for an Additional (Not Automatic) 3-Mon	th Extension	n, complete only Part II (on page 2 of th	ıs form)	
Do not com	p lete Part II unless you have already been grante	ed an autom	natic 3-month extension on a previously	filed Form 8868	
corporation request an easier Associated	iling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which no ling of this form, visit www.irs.gov/efile and click	ot automatic) n Part I or Pa nust be sent) 3-month extension of time You can ele art II with the exception of Form 8870, Ir to the IRS in paper format (see instruct	ectronically file Form nformation Return fo	n 8868 to or Transfers
Part I A	Automatic 3-Month Extension of Time.	Only subm	nit original (no copies needed).		
	on required to file Form 990-T and requesting an			complete Part I only	<i>,</i> ► □
All other co	rporations (including 1120-C filers), partnerships, returns.	, REMICS, a	nd trusts must use Form 7004 to reques	t an extension of tin	ne to file
	Name of exempt organization			Employer identification	number
Type or print File by the due date for filing your return See instructions					
	ASSOCIATION OF SURGICAL TECHNOLOGISTS 84-06			84-0601305	
	Number, street, and room or suite number. If a P.O. box, see instructions				
	6 WEST DRY CREEK CIRCLE				
	City, town or post office, state, and ZIP code. For a foreign address, see instructions				
	LITTLETON, CO 80120				
Enter the Re	eturn code for the return that this application is f	or (file a ser	parate application for each return)		01
Application Is For		Return Code	Application Is For	Reti Co	
Form 990		01	Form 990-T (corporation)		
Form 990-BL		02	Form 1041-A		08
Form 990-EZ		03	Form 4720		09
Form 990-PF		04	Form 5227		10
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		11
Form 990-T (trust other than above)		06	Form 8870		12
Telephor If the or If this is check the external	the No 303-694-9130 ganization does not have an office or place of but for a Group Return, enter the organization's four box If it is for part of the group, checkers an automatic 3-month (6 months for a corporate strain automatic 3-month)	FAX Now Susiness in the ridigit Group ck this box	e United States, check this box Exemption Number (GEN) If and attach a list with the names a		
until _ The e: ► X ► If the	8/15, 2011, to file the exempt or xtension is for the organization's return for. calendar year 2010 or $\frac{10}{100}$ tax year beginning, 20, 20, 20, ange in accounting period	ganization r _ , and endii	eturn for the organization named above	nal return	
3a If this nonre	application is for Form 990-BL, 990-PF, 990-T, 4 fundable credits. See instructions	1720, or 6069	9, enter the tentative tax, less any	3a \$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)

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