			CHANGE OF ACCOUNTING PERIC	ענ	
	0	00	OMB No. 1545-0047		
For	m <b>9</b>	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C	ode (except black lung	
Dep	artment o	of the Treasury	benefit trust or private foundation)		Open to Public
		nue Service	The organization may have to use a copy of this return to satisfy state	te reporting requirements.	Inspection
Α	For the	e 2009 cal	endar year, or tax year beginning ${\tt SEP}$ 1, ${\tt 2009}$ and ending	MAY 31, 2010	
В	Check if applicabl	use IRS	C Name of organization	D Employer identific	ation number
	Addre 	ess label or print or	AMERICAN ACCOUNTING ASSOCIATION		
	Name chang	type	Doing Business As	39-6	030166
	Initial return		Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite E Telephone number	
	Termii ated	n- Specific Instruc-	5717 BESSIE DR		921-7747
	Amen	ded tions.	City or town, state or country, and ZIP + 4	G Gross receipts \$	4,072,811.
	Applic distance		SARASOTA, FL 34233	H(a) Is this a group re	turn
	pendi	<sup>ng</sup> <b>F</b> Nan	ne and address of principal officer: TRACEY E. SUTHERLAND	for affiliates?	Yes X No
			7 BESSIE DRIVE, SARASOTA, FL 34233	H(b) Are all affiliates incl	uded? Yes No
1	Tax-ex		us: X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527	- ` '	list. (see instructions)
-			AHQ.ORG	H(c) Group exemption	
				ar of formation: 1916 M	
	art I	Summa			
_	1	Briefly des	scribe the organization's mission or most significant activities: THE AMER	ICAN ACCOUNTI	NG
Ű		ASSOC	IATION PROMOTES WORLDWIDE EXCELLENCE IN	ACCOUNTING E	DUCATION,
Activities & Governance	2	Check this	s box 🕨 📖 if the organization discontinued its operations or disposed of m	ore than 25% of its net as	sets.
ove			f voting members of the governing body (Part VI, line 1a)	1 1	11
Ğ			f independent voting members of the governing body (Part VI, line 1b)		11
ŝ			ber of employees (Part V, line 2a)		24
vitie			ber of volunteers (estimate if necessary)		C
\cti			s unrelated business revenue from Part VIII, column (C), line 12		83,351.
٩			ated business taxable income from Form 990-T, line 34		21,731.
				Prior Year	Current Year
Ð	8	Contributi	ons and grants (Part VIII, line 1h)	852,107.	584,044.
Revenue	9		service revenue (Part VIII, line 2g)	5,661,643.	3,462,768.
eve	10	Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	56,387.	25,999.
œ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,570,137.	4,072,811.
	13	Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits p	paid to or for members (Part IX, column (A), line 4)		
ŝ	1		other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,530,915.	1,283,124.
nse	16a	Profession	nal fundraising fees (Part IX, column (A), line 11e)		
Expenses	b	Total fund	Iraising expenses (Part IX, column (D), line 25)		
ш	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,195,483.	3,402,020.
	18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,726,398.	4,685,144.
		Revenue I	ess expenses. Subtract line 18 from line 12	-156,261.	-612,333.
Net Assets or Fund Balances	8			Beginning of Current Year	End of Year
sets	20	Total asse	ets (Part X, line 16)	8,949,672.	8,051,070.
tAs	21	Total liabil	ities (Part X, line 26)	2,456,210.	2,169,941.
			s or fund balances. Subtract line 21 from line 20	6,493,462.	5,881,129.
P	art II		ture Block		
		Under penal and comple	Ities of perjury, I declare that I have examined this return, including accompanying schedules and statemer te. Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ts, and to the best of my knowledg Ige.	e and belief, it is true, correct,
Sig	In			Data	
He	re	, v	ature of officer	Date	
			ACEY E. SUTHERLAND, EXECUTIVE DIRECTOR		
		Гуре	e or print name and title		
Pai	d	Preparer's		self- (see ins	r's identifying number tructions)
	- parer's	signature		employed 🕨 🛄	
	e Only	Firm's name yours if	CFA ADDOCIATED	EIN 🕨	
_		self-employ address, an			
		ZIP + 4	BRADENTON, FL 34205-7440	Phone no. 🕨 (	941)747-4483
Ma	y the I				X Yes No
9320	001 02-0	04-10 LH	A For Privacy Act and Paperwork Reduction Act Notice, see the separate i	nstructions.	Form <b>990</b> (2009)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

4d	Other program se
	(Expenses \$
4e	Total program se
93200 02-04-	

Form 990 (2009)

2

4a

4b 1

4c

(Code:

code: ) (Expenses \$ 139,732. including grants of \$ ) (Revenue \$
OMMITTEE MEETINGS AND PROGRAMS TO RESEARCH VARIOUS ACCOUNTING-RELATED
OPICS, TO EDUCATE ACCOUNTING PROF. AND TO RECOGNIZE OUTSTANDING
DUCATORS
ode: ) (Expenses \$ 1,062,471. including grants of \$ ) (Revenue \$ 907,433.
HE ASSOCIATION PUBLISHES 9 JOURNALS, 15 NEWSLETTERS, AND OTHER
UBLICATIONS, INCLUDING A WEB SITE FOR DISSEMINATION OF INFORMATION TO
EMBERS/SUBSCRIBERS
EMBERS/SOBSCRIBERS
her program services. (Describe in Schedule O.)
xpenses \$ 172,120. including grants of \$ ) (Revenue \$ 2,009,876.)
otal program service expenses <b>&gt;</b> \$ 3,318,447.
Form <b>990</b> (2009)

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.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Section $501(c)(2)$ and $501(c)(4)$ examinations and section $4047(c)(1)$ tructs are required to report the amount of grants and	

ANNUAL MEETING FOR MEMBERS, CONFERENCES & CONSORTIA RELATING TO VARIOUS

the prior Form 990 or 990-EZ?

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
allocations to others, the total expenses, and revenue, if any, for each program service reported.

) (Expenses \$ 1,944,124. including grants of \$

AMERICAN ACCOUNTING ASSOCIATION

Did the organization undertake any significant program services during the year which were not listed on

If "Yes," describe these new services on Schedule O.

ACCOUNTING EDUCATION TOPICS

Pa	art III	Statement	of Pro	gram Servic	e Accomplishmen	ts			
1	Brief	ly describe the c	organiza	tion's mission:					
	то	PROVIDE	AND	PROMOTE	EDUCATIONAL	SUPPORT	IN	ACCOUNTING	EDUCATION,
	RES	SEARCH AI	ND PI	RACTICE.					

) (Revenue \$

Page 2

Yes X No

462,108.)

19

20

	990 (2009) AMERICAN ACCOUNTING ASSOCIATION 39-6030	166	Р
Fai			N <sub>2</sub>
	Is the experimetion described in section $E(1/2)(2)$ or $40.47(2)(1)$ (at the section of windows)		Yes
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x
2	If "Yes," complete Schedule A	2	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		
Ŭ	public office? If "Yes," complete Schedule C, Part I	3	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	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, Part I	6	
7	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	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8	
9	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 Schedule D, Part IV	9	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?		
	If "Yes," complete Schedule D, Part V	10	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X		
		11	X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		
•	Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
•	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.		
•	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.		
٠	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
٠	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? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete		
	Schedule D, Parts XI, XII, and XIII.	12	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	146	
15	and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	
15	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	<u> </u>	
	located outside the United States? If "Yes," complete Schedule F, Part III	16	
17	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	17	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	

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

Page 3

No

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Form 990 (2009)

complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 20

Form 990 (2009)			ASSOCIATION
Part IV Checl	klist of Required Scheo	dules (continued)	

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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			37
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
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		x
23	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			
	Schedule J	23		<u> </u>
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, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete Schedule K. If</i> "No", <i>go to line 25</i>	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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			
	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	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? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		x
33	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	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
36	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		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			¯
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	x	
	Note. All Form 990 filers are required to complete Schedule O.	38	~~	

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21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>
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
23	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? <i>If "Yes," complete Schedule J</i>
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, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete Schedule K. If</i> "No", <i>go to line 25</i>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

. ui	t V Statements Regarding Other IRS Filings and Tax Compliance		l v	
1-	Enter the number reported in Day 2 of Form 1006. Appual Summary and Transmittel of		Yes	No
Id	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 59			
Ŀ.	U.S. Information Returns. Enter -0- if not applicable1a59Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable1b0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		x	
~	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 24			
			v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)		37	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
а	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X	
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	79 7h	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
•	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
		8		
9	at any time during the year? Sponsoring organizations maintaining donor advised funds.	0		
		00		
a h	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
b n		90		
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			

**b** Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12a

Form 990 (2009)

12b

AMERICAN	ACCOUNTING	ASSOCIATION	
e, Management,	and Disclosure Fo	or each "Yes" response to i	lir

NTING ASSOCIATION	39-6030166	Page <b>6</b>
losure For each "Yes" response to lines 2 throug	h 7b below, and for a "No" res	oonse

Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body	1a	11						
b	Enter the number of voting members that are independent	1b	11						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other						
	officer, director, trustee, or key employee?			2		X			
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision						
	of officers, directors or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990	) was filed?	4		Х			
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5		Х			
6	Does the organization have members or stockholders?			6	Х				
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers	of the						
	governing body?			7a	Х				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?		7b	Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year						
	by the following:								
а	The governing body?			8a	Х				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	e Code.)						
					Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?			10a	Х				
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapte	ers, affiliates,						
	and branches to ensure their operations are consistent with those of the organization?			10b	X X				
11									
11A	<b>1A</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	uld give	e rise						
	to conflicts?			12b	Х				
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe						
	in Schedule O how this is done			12c		X			
13	Does the organization have a written whistleblower policy?			13	Х				
14	Does the organization have a written document retention and destruction policy?			14	Х				
15	Did the process for determining compensation of the following persons include a review and approva	al by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15a	Х				
b	Other officers or key employees of the organization			15b	Х				
	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 arranger	nent w	/ith a						
	taxable entity during the year?			16a		X			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate it	s participation						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the orga	anizati	on's						
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed NONE								
18	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 X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	onflict	of interest policy, ar	nd fina	ncial				
	statements available to the public.								

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  DIANE LEGER - 941-921-7747
	5717 BESSIE DR, SARASOTA, FL 34233-2399

Form **990** (2009)

# TOTONN ACCOUNTRY ACCOUTANTON

Form 990 (2009) Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" re	esp
to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	

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

#### 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. Use Schedule J-2 if additional space is needed.

• 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. 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 the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours	(cl	neck	all t	that	app	ly)	compensation	compensation	amount of
	per week	sctor						from the	from related organizations	other compensation
	Week	or dire	e			ated		organization	(W-2/1099-MISC)	from the
		ustee	truste		æ	ipens		(W-2/1099-MISC)	,	organization
		ual tr	tional		) ploye	st com				and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
SUSAN HAKA										
PAST PRESIDENT	5.00	x		х				0.	Ο.	0.
NANCY BAGRANOFF										
PRESIDENT	5.00	X		Х				0.	0.	Ο.
KEVIN STOCKS										
PRESIDENT - ELECT	5.00	Х		Х				0.	0.	0.
KAZUO HIRAMATSU										
VP - INTERNATIONAL	5.00	Х		Х				0.	0.	0.
ROBERT COLSON										
VP - PROF RELATIONS	5.00	х		Х				0.	0.	0.
JEAN BEDARD										
VP - PUBLICATIONS	5.00	Х		Х				0.	0.	0.
CHRISTOPHER J. WOLFE										
VICE PRESIDENT - FINANCE	5.00	X		X				0.	0.	0.
GREG WAYMIRE	F 00	37		37				0	0	0
VICE PRESIDENT - RESEARC BRUCE BEHN	5.00	X		X				0.	0.	0.
VP - SECTIONS & REGIONS	5.00	x		x				0.	0.	0.
BELVERD NEEDLES	5.00	<u>^</u>		<u> </u>				0.	0.	0.
VICE PRESIDENT - EDUCATI	5.00	x		x				0.	0.	0.
IRA SOLOMON	5.00			~				0.	0.	0.
VICE PRESIDENT	5.00	x		x				0.	0.	0.
STACY KOVAR	5.00	11		- 11				0.	••	
VP - FINANCE ELECT	5.00	x		x				0.	0.	0.
TRACEY E SUTHERLAND								•••		
EXECUTIVE DIRECTOR	40.00			x		x		118,875.	0.	20,643.
DIANE LEGER										
DIRECTOR OF FINANCE	40.00			х				51,000.	0.	18,147.
								-		
						$\vdash$				

AMERICAN ACCOUNTING ASSOCIATION	
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Par	t VII Section A. Officers, Directors, Tru	istees, Key Ei	nplo	byee	s, a	nd l	High	est	Compensated Employ	ees (continued)		-		
	(A)	(B)	(C)				(D)	(E)	ĺ		(F)			
	Name and title	Average	5				Reportable	Reportable			stimate			
			hours (check all that apply)			iy) I	compensation from	compensation from related		ar	nount other	of		
		per week	rector						the	organization		com	npensa	tion
			ndividual trustee or director	ee			sated		organization	(W-2/1099-MI			rom the	
			rustee	nstitutional trustee		/ee	mpen		(W-2/1099-MISC)		ſ	~	ganizat	
			id ual 1	utiona	5	Key employee	est co oyee	e			ſ		id relati anizatio	
			Indiv	Instit	Officer	Key (	Highest compensated employee	Former			ĺ	org	anzati	0115
							Ļ		160.075			2	0 7	0.0
	Total					<u></u>			169,875.		0.	3	8,7	90.
2	Total number of individuals (including but n	ot limited to tr	lose	liste	ed al	bov	e) wr	no r	eceived more than \$100	,000 in reportab	le			1
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director or tru	stee	. ke	vem	olar	vee.	ort	highest compensated er	mplovee on	ľ			
-	line 1a? If "Yes," complete Schedule J for s								ingricer componicated of		ĺ	3		х
4	For any individual listed on line 1a, is the su	um of reportab												
	and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J i	for such individual			4		Х
5	Did any person listed on line 1a receive or a	•				any	/ unr	elat	ted organization for serv	ices rendered to				
	the organization? If "Yes," complete Sched	ule J for such	pers	on .							<u></u>	5		Х
	tion B. Independent Contractors				<u> </u>	<u> </u>				<u></u>				
1	Complete this table for your five highest co the organization.	mpensated in	aepe	enae	ent c	ont	racto	ors 1	that received more than	\$100,000 of cor	npens	ation	rrom	
	(A) Name and business	address							<b>(B)</b> Description of s	ervices	с		<b>C)</b> ensatio	n
	DEE STRAHAN ENTERPRISES, INC. 1223 OXBOW LANE, WINTER SPRINGS, FL 32708 MEETING PLANNER							15	0,5	50.				
			<u>, -</u>		<u> </u>		<u> </u>							
2	Total number of independent contractors (i	ncluding but a	ot li	mite	d + 2	the		otor	d abovo) who received ~	oro than				
~	\$100,000 in compensation from the organic			e	u 10		se ii: 1	3180						

Form 990 (2009)

Form 990 (20	09)
Part VIII	(

AMERICAN ACCOUNTING ASSOCIATION

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Pa	rt VII	I Statement of Rever	nue					
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
our	b	Membership dues	1b					
am, c	с	Fundraising events	1c					
ar	d		1d					
s, juli	е	Government grants (contribut	ions) <b>1e</b>					
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, gran	ts, and					
		similar amounts not included abo	ve 1f	584,044.				
d t	g	Noncash contributions included in lines	i 1a- 1f: \$					
ខ្លួត	h	Total. Add lines 1a-1f			584,044.			
				Business Code				
é	2 a	MEMBERSHIP DUES	5	611710	1174531.	1174531.		
e rci	b	PUBLICATIONS		511120	907,433.	907,433.		
San	с	SUBSCRIPTIONS		511120	746,192.	746,192.		
eve eve	d	OTHER PROGRAMS		611710	462,108.	462,108.		
Program Service Revenue	е	FASB CODIFICATI	ON	611710	89,153.	89,153.		
2	f	All other program service reve	enue	541800	83,351.		83,351.	
	g	Total. Add lines 2a-2f			3462768.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		►	25,999.			25,999.
	4	Income from investment of tax	x-exempt bond p	proceeds				
	5	Royalties		►				
			(i) Real	(ii) Personal				
	6 a	Gross Rents						
	b	Less: rental expenses						
	С	( )						
	d	Net rental income or (loss)		<b>&gt;</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		····· •				
ne	8 a	Gross income from fundraising						
Other Revenue		including \$						
Re		contributions reported on line	,					
Jer		Part IV, line 18						
đ		Less: direct expenses						
		Net income or (loss) from fund	-	····· ►				
	9 a	Gross income from gaming ac						
	_	Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam		····· <b>&gt;</b>				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
	c	Net income or (loss) from sale		Business Code				
	11 a	Miscellaneous Revenu		DUSITIESS CODE				
	li a b							
	с С							
		All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			4072811.	3379417.	83,351.	25,999.

# AMERICAN ACCOUNTING ASSOCIATION

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the U.S. See Part IV, line 21									
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,	200 665		200 665						
	trustees, and key employees	208,665.		208,665.						
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
_	persons described in section 4958(c)(3)(B)	708,328.	E42 0E1	165 277						
7	Other salaries and wages	100,320.	542,951.	165,377.						
8	Pension plan contributions (include section 401(k)	283,153.	167,654.	115,499.						
^	and section 403(b) employer contributions)	202,133.	107,004.	,4)).						
9	Other employee benefits	82,978.	49,131.	33,847.						
0	Payroll taxes	02,970.	49,1310	55,047.						
1	Fees for services (non-employees):									
a	F									
b										
с 2	9 F									
d	Destantional fundations and inc. One Dest IV/ line 47									
e	Investment management fees									
f	F	662,170.	362,193.	299,977.						
g 2	Other Advertising and promotion	002,170.	502,155.	255,5770						
3	Office expenses	22,424.	12,116.	10,308.						
3 4	Information technology	22,1210	12,1100	10,0001						
5	Royalties									
6		37,826.	21,876.	15,950.						
7		392,664.	224,897.	167,767.						
B	Travel Payments of travel or entertainment expenses	002,0010		20171011						
5	for any federal, state, or local public officials									
9	Conferences, conventions, and meetings	1,043,865.	967,782.	76,083.						
5		2,010,0001	5077020	, , , , , , , , , , , , , , , , , , , ,						
1	Payments to affiliates									
י 2	Depreciation, depletion, and amortization	74,202.	40,092.	34,110.						
3	Insurance	29,287.	10,565.	18,722.						
4	Other expenses. Itemize expenses not covered									
•	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)									
а	UBTI TAXES	1,910.		1,910.						
b	PRINTING AND PUBLICATIO	564,593.	515,791.	48,802.						
č	POSTAGE	164,129.	155,072.	9,057.						
d	WEB SERVICES / WEB HOST	130,508.	48,176.	82,332.						
e	SUPPLIES	66,438.	54,309.	12,129.						
f	All other expenses	212,004.	145,842.	66,162.						
5	Total functional expenses. Add lines 1 through 24f	4,685,144.	3,318,447.	1,366,697.	(					
6	Joint costs. Check here 🕨 🛄 if following	· ·		<u> </u>						
	SOP 98-2. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation									

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Form 990 (2009)	AMERICAN	ACCOUNTING	ASSOCIATION
Part X Balance Sheet			

					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			425,811.	1	,
	2	Savings and temporary cash investments	6,537,200.	2	6,255,955.		
	3	Pledges and grants receivable, net	858,869.	3	560,090.		
	4	Accounts receivable, net	332,734.	4	259,268.		
	5	Receivables from current and former officers, di					
		employees, and highest compensated employee		· · ·			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 495					
		Part II of Schedule L				6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			7,403.	8	4,876.
As	9				47,657.	9	80,683.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,905,180.			
	ь	Less: accumulated depreciation	10b		738,708.	10c	889,128.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			1,290.	15	1,070.
	16	Total assets. Add lines 1 through 15 (must equa			8,949,672.	16	8,051,070.
	17	Accounts payable and accrued expenses			1,087,364.	17	349,984.
	18	Grants payable				18	
	19	Deferred revenue			1,368,846.	19	1,819,957.
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete F				21	
iliti	22	Payables to current and former officers, director					
Liabilities		highest compensated employees, and disqualified	ed pers	sons. Complete Part II			
-		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities. Complete Part X of Schedule D			2,456,210.	25 26	2,169,941.
	26	Total liabilities. Add lines 17 through 25		X and complete	2,430,210.	26	2,109,941.
<i>(</i> 0		Organizations that follow SFAS 117, check he lines 27 through 29, and lines 33 and 34.	ere 🗩				
čě	27				5,636,535.	27	5,182,230.
alan	27	Unrestricted net assets Temporarily restricted net assets	856,927.	27	698,899.		
B	29				29		
un	25	Organizations that do not follow SFAS 117, cl		ere 🕨 🛄 and		23	
г		complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or eq				31	
ťΑ	32	Retained earnings, endowment, accumulated in				32	
Ř	33	Total net assets or fund balances			6,493,462.	33	5,881,129.
	34	Total liabilities and net assets/fund balances			8,949,672.	34	8,051,070.

Form **990** (2009)

# Form 990 (2009)

Form 990 (2009)			ASSOCIATION							
Part XI Financial State	Part XI Financial Statements and Reporting									

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			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 checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		_	000	

Form **990** (2009)

Form 990 (2009)
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SCHEDULE A (Form 990 or 990-EZ)						1.12	<b>^</b>			ONB NO.	1545-00	47	
		y Public Charity Status and Public Support								2000			
		Complet	Complete if the organization is a section 501(c)(3) organization or a section									,	
	of the Treasury		4947(a)(1) nonexempt charitable trust.							Open to Public			
Internal Rever			tach to Form 990 or Fo	990 or Form 990-EZ. ► See separate instructions.						Inspection			
Name of t	the organizati				~~~~~	~~~		1	Employer i				
David	Deces		N ACCOUNTING							9-6030	166		
Part I			i <b>ty Status</b> (All organiz					tructions					
The organ		•	because it is: (For lines 1	•		•	,						
1			s, or association of churc			ection 170	(b)(1)(A)(i)	•					
2			0(b)(1)(A)(ii). (Attach Sc										
3	•		tal service organization of										
4 📖			operated in conjunction	with a hos	pital desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(	iii). Enter th	he hospital	's nam	ıe,	
	city, and stat	-											
5 📖			benefit of a college or ur	niversity ov	wned or op	perated by	a governr	mental ur	nit describe	ed in			
		( <b>b)(1)(A)(iv).</b> (Comple	-										
6	-		ent or governmental unit										
7 📖			eives a substantial part o	of its supp	ort from a	governme	ental unit o	or from th	e general p	oublic desc	ribed	n	
	-	b)(1)(A)(vi). (Complet											
8			ection 170(b)(1)(A)(vi).										
9 X	•		eives: (1) more than 33 1				-		•	•	•		
		•	nctions - subject to certa	•	, ,	,				0			
			axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the org	anization a	after June 3	80, 197	′5.	
		509(a)(2). (Complete											
			perated exclusively to te										
11 📖	•	•	erated exclusively for th		· ·							or	
			tions described in section				2). See <b>sec</b>	tion 509	(a)(3). Che	ck the box	that		
			organization and comple						. —				
	a Type I		,,	• •	e III - Func	•	-		d 📖	Type III - (			
e 📖			t the organization is not										
			han one or more publicly						)9(a)(1) or s	section 509	(a)(2).		
f	•		ten determination from t					e III					
		ganization, check th										. ட	
g	-		rganization accepted ar			-							
			irectly controls, either al								Yes	No	
			upported organization?										
	(ii) A family	member of a person	described in (i) above?										
			person described in (i) o							. <b>11g(iii)</b>			
h	Provide the f	ollowing information	about the supported org	ganization	(S).								
			(iii) Type of	(		( .) D'al		(1/1)	s the				
	of supported	(ii) EIN	organization		organization sted in your		ion in col.	organizat	ion in col.	(vii) An		f	
orga	anization		(described on lines 1-9		document?		support?	(i) organ	ized in the S.?	sup	port		
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No				
				162		165		185					
-									+				
									+				
									+				

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

Schedule A (Form 990 or 990-EZ) 2009

OMB No. 1545-0047

Total

SCHEDULE A

I

	edule A (Form 990 or 990-EZ) 2009	Organization	o Doooribad ir	Sections 17	$\Omega(h)(1)(\Lambda)(h)$	d 170/b/(1)/(0)/0	Page 2
Pa	ITT II Support Schedule for (Complete only if you checke	-			U(D)(T)(A)(IV) ar	10 170(D)(1)(A)(	VI)
Sa	ction A. Public Support		5, 7, 01 8 01 Fait 1.	)			
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d</b> ) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	(a) 2003	(b) 2000	(0) 2007	(u) 2008	(e) 2009	
•	membership fees received. (Do not						
	include any "unusual grants.")						
0	Tax revenues levied for the organ-						
2	ization's benefit and either paid to						
	en en en ele el en ite le ele elf						
2	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
_	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support	() 0007	(1) 0000	() 000-	( 1) 0000	( ) 0000	(0
	endar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$				_		
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	etc. (see instruc	tions)			12	
13	First five years. If the Form 990 is for	•					
0-	organization, check this box and stor	here					<b>&gt;</b> L_
	ction C. Computation of Publ						
	Public support percentage for 2009 (						ç
	Public support percentage from 2008						
16a	<b>33 1/3% support test - 2009.</b> If the o						
	stop here. The organization qualifies						
k	<b>33 1/3% support test - 2008.</b> If the o						
47.	and <b>stop here.</b> The organization qual						
1/8	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
L	meets the "facts-and-circumstances"						
Ľ	10% -facts-and-circumstances tes more and if the organization mosts the second seco						
	more, and if the organization meets the organization meets the "facts-and-cire						
12	<b>-</b> • • • • • • • • •						
18	rivate iounuation. It the organizatio	IT UIU HUL CHECK à		Ja, 100, 17a, 01 1		and see instruction	IS I

Schedule A (Form 990 or 990-EZ) 2009

# Schedule A (Form 990 or 990 EZ) 2009 AMERICAN ACCOUNTING ASSOCIATION Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

39-6030166 Page 3

	ction A. Public Support endar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	( <b>u</b> ) 2000	(6) 2000	(0) 2001	(4) 2000	(0)2000	(i) rotar
•	membership fees received. (Do not						
	include any "unusual grants.")	2,358,120.	2,177,458.	1 836 816	852,107.	584 044.	7,808,545
0		1,000,110.	2,177,100.	1,000,010.	052,107.	501,011.	,,000,010
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the	2 642 477	2 770 755	4 947 574	E E42 001	2 270 417	10 102 114
	organization's tax-exempt purpose	2,642,477.	2,779,755.	4,847,574.	5,543,891.	3,3/9,41/.	19,193,114
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	5,000,597.	4,957,213.	6,684,390.	6,395,998.	3,963,461.	27,001,659
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	550,349.	569,163.	1,721,990.	639,084.	569,722.	4,050,308
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
c	Add lines 7a and 7b	550,349.	569,163.	1,721,990.	639,084.	569,722.	4,050,308
8	Public support (Subtract line 7c from line 6.)						22,951,351
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	5,000,597.	4,957,213.	6,684,390.	6,395,998.	3,963,461.	27,001,659
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources	138,019.	204,670.	136,440.	56,387.	25,999.	561,515.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	138,019.	204,670.	136,440.	56,387.	25,999.	561,515.
	Net income from unrelated business		-	-	-	-	
	activities not included in line 10b,						
	whether or not the business is regularly carried on	26,868.	39,532.	70,085.	44,506.	22.731.	203,722.
12	Other income. Do not include gain				,	,	
	or loss from the sale of capital						
13	assets (Explain in Part IV.)	5,165,484.	5,201,415.	6,890,915.	6,496,891.	4,012,191.	27,766,896
	First five years. If the Form 990 is for	, ,					, ,
14	check this box and stop here	the organization s			2		
Sec	ction C. Computation of Public	ic Support Pe					
	Public support percentage for 2009 (I		<u> </u>	olumn (f))		15	82.66 %
	Public support percentage from 2008		•			16	83.25 %
	tion D. Computation of Invest						000120 /
			0	0 13 column (f))		17	2.02 %
17	Investment income percentage for 20 Investment income percentage from 2					18	2.09 %
198	<b>33 1/3% support tests - 2009.</b> If the						I7 is not ►X
	more than 33 1/3%, check this box at						·····
b	<b>33 1/3% support tests - 2008.</b> If the						
	line 18 is not more than 33 1/3%, che						🟲 💾
20	Private foundation. If the organizatio	n ald not check a	box on line 14, 19	a, or 19b, check th		structions	🏲 📖

Schedule A (Form 990 or 990-EZ) 2009

# Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Employer identification number

#### Name of the organization

	AMERICAN ACCOUNTING ASSOCIATION	39-6030166							
Organization type (che	rganization type (check one):								
Filers of:	Section:								
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization								
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation								
	527 political organization								
Form 990-PF 501(c)(3) exempt private foundation									
	4947(a)(1) nonexempt charitable trust treated as a private foundation								

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

501(c)(3) taxable private foundation

# **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

#### **Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA	For Privacy Act and Paperwork Re	duction Act Notice,	see the	nstructions
	for Form 990, 990-EZ, or 990-PF.			

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

# (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

► Attach to Form 990. ► See separate instructions.



Namo	of the	organization
Name	or the	organization

- Cann	AMERICAN ACCOUNTING ASSOCIATION	39-6030166				
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Sin	nilar Funds or A	ccounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line 6.					
	(a) Donor advised fu	unds (I	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 donor advisors in writing that the assets held					
	are the organization's property, subject to the organization's exclusive legal control? $\ldots$					
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant					
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any o					
<b>D</b>	impermissible private benefit?					
	rt II Conservation Easements. Complete if the organization answered "Yes" t	o Form 990, Part IV,	line 7.			
1	Purpose(s) of conservation easements held by the organization (check all that apply).					
			ly important land area			
		ation of a certified his	istoric structure			
•	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form of a co	onservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
~	Total number of concernation economicate		2a			
	Total number of conservation easements Total acreage restricted by conservation easements		2a 2b			
b C			20 2c			
d			2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terr					
U	year	initiated by the organ				
4	Number of states where property subject to conservation easement is located					
5	Does the organization have a written policy regarding the periodic monitoring, inspectior	n, handling of				
		, c	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease	ements during the ye	ear <b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements	of section 170(h)(4)(E	B)(i)			
	and section 170(h)(4)(B)(ii)?					
9	In Part XIV, describe how the organization reports conservation easements in its revenue	e and expense stater	ment, and balance sheet, and			
	include, if applicable, the text of the footnote to the organization's financial statements t	hat describes the orç	ganization's accounting for			
_	conservation easements.					
Pa	rt III Organizations Maintaining Collections of Art, Historical Treas	sures, or Other S	Similar Assets.			
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.					
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue sta					
	treasures, or other similar assets held for public exhibition, education, or research in furt	herance of public ser	rvice, provide, in Part XIV, the text of			
	the footnote to its financial statements that describes these items.					
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statem					
	or other similar assets held for public exhibition, education, or research in furtherance of	public service, provi	ide the following amounts relating to			
	these items:		► ¢			
	(i) Revenues included in Form 990, Part VIII, line 1					
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar asse					
2	the following amounts required to be reported under SFAS 116 relating to these items:	no for financial gain,	provide			
а			► \$			
	Assets included in Form 990, Part X					
5			. 🕨 Ψ			

Sche		N ACCOUNTI								6 Page <b>2</b>
Pa	t III Organizations Maintaining C	Collections of A	rt, Histo	rical Tr	easures, o	or Other	<sup>·</sup> Simila	ar Asse	<b>ts</b> (conti	nued)
3	Using the organization's acquisition, access	ion, and other record	ds, check a	any of the	following tha	t are a sig	nificant u	use of its	collectio	n items
	(check all that apply):									
а	Public exhibition	c			hange progra					
b	Scholarly research	e	• 🗌 Ot	her						
с	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	in how the	y further tl	he organizati	on's exem	pt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, hist	orical trea	sures, or oth	er similar a	assets			
	to be sold to raise funds rather than to be m	aintained as part of	the organiz	zation's co	ollection?				Yes	🗌 No
Pa	t IV Escrow and Custodial Arran	gements. Compl	ete if orgar	nization ar	nswered "Yes	s" to Form	990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa		-							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for co	ontribution	is or other as	sets not ir	ncluded			
	on Form 990, Part X?								Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIV									
			U						Amount	
с	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on F								Yes	No
	If "Yes," explain the arrangement in Part XIV							······ <u> </u>	163	
	t V Endowment Funds. Complete		nswered "Y	/es" to Fo	rm 990 Part	IV line 10				
		(a) Current year	(b) Pric		(c) Two year			ears back	(a) Four	years back
10	Beginning of year balance	(a) Current year		Ji yeai			<b>ij</b> 111100 y		(e) i oui	yours buok
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	ar end balance held a	as:							
	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
С	Term endowment	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are held a	nd administe	red for the	e organiz	ation		
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Schedu	le R?					3b	
	Describe in Part XIV the intended uses of the									
Pa	t VI Investments - Land, Building	gs, and Equipm	ent. See	Form 990	, Part X, line	10.				
	Description of investment	(a) Cost or c basis (investr		<b>(b)</b> Cost basis		• •	cumulate eciation	d	(d) Bool	k value
<b>1</b> a	Land		i	21	5,068.				21	5,068.
	Buildings				1,543.	3	30,55	50.		0,993.
	Leasehold improvements									
	Equipment			94	8,569.	6	85,50	02.	26	3,067.
	Other				,		.,	-		
	Add lines 1a through 1e. (Column (d) must e		X. column	(B), line 1	0(c).)				88	9,128.
			.,	<u>, _,,</u> ,	- 1-/-/			-		, =

Schedule D (Form 990) 2009

Schedule D	(Form 990) 2009
Dort VII	Investment

**Oth** 

# AMERICAN ACCOUNTING ASSOCIATION

Part vii investments - Other Securities. Sec	e Form 990, Part X, line	12.						
(a) Description of security or category	(b) Book value		<b>(c)</b> Method of valuation: Cost or end-of-year market value					
(including name of security)	. ,	Co	st or end-of-year mar	ket value				
Financial derivatives								
Closely-held equity interests								
Other								
		_						
		_						
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)								
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line	13.						
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mar					
		_						
		_						
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line	4.5							
	Description			(b) Book value				
(a)	Description			(b) BOOK value				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		<b>&gt;</b>					
Part X Other Liabilities. See Form 990, Part X,			·····					
1.         (a) Description of liability		(b) Amount						
Federal income taxes		. ,	1					
			1					
			1					
			1					
			1					
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.) ►							

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

Sche	dule D (Form 990) 2009 AMERICAN ACCOUNTING ASSO	CIATION		39-0	6030166 Page <b>4</b>
Pa	rt XI Reconciliation of Change in Net Assets from Form 99	0 to Audited Fir	nancial Sta		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		4,072,811.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		4,685,144.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				-612,333.
4	Net unrealized gains (losses) on investments				
5	Donated services and use of facilities		5		
6	Investment expenses				
7	Prior period adjustments				
8	Other (Describe in Part XIV.)				
9	Total adjustments (net). Add lines 4 through 8				0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10		-612,333.
Par	t XII Reconciliation of Revenue per Audited Financial State	ements With Re	evenue per	Return	
1	Total revenue, gains, and other support per audited financial statements			. 1	4,072,811.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIV.)				
е	Add lines 2a through 2d			. 2e	0.
3	Subtract line 2e from line 1			3	4,072,811.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
с	Add lines <b>4a</b> and <b>4b</b>			4c	0.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )			. 5	4,072,811.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stat	ements With E	xpenses p	er Retu	
1	Total expenses and losses per audited financial statements			. 1	4,685,144.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			_
е	Add lines 2a through 2d			. 2e	0.
3	Subtract line 2e from line 1			. 3	4,685,144.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
с	Add lines <b>4a</b> and <b>4b</b>			. 4c	0.
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			. 5	4,685,144.
Pa	rt XIV Supplemental Information				

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

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990. OMB No. 1545-0047

Name of the organization

AMERICAN ACCOUNTING ASSOCIATION

Employer identification number 39-6030166

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESEARCH AND PRACTICE. THE ASSOCIATION HOSTS MEETINGS, CONFERENCES AND

CONSORTIA RELATING TO VARIOUS ACCOUNTING EDUCATION TOPICS. THE

ASSOCIATION ALSO PUBLISHES A COLLECTION OF PEER-REVIEWED

WIDELY-RECOGNIZED WORLD CLASS JOURNALS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MISC. MEMBER AND SUBSCRIBER SUPPORT SERVICES

EXPENSES \$ 172120. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2009876.

FORM 990, PART VI, SECTION A, LINE 6: THE BY-LAWS OF THE ORGANIZATION IN

SECTION III MEMBERSHIP - "ACCOUNTING TEACHERS, PUBLIC ACCOUNTANTS,

ACCOUNTANTS FROM BUSINESS AND GOVERNMENT AND OTHER PERSONS INTERESTED IN

THE ASSOCIATION'S PURPOSES AND OBJECTIVES ARE ELIBIGLE FOR MEMBERSHIP IN

THE ASSOCIATION. MEMBERS ARE ELIGIBLE TO VOTE, HOLD OFFICES, AND

PARTICIPATE IN ACTIVITIES OF THE ASSOCIATION."

FORM 990, PART VI, SECTION A, LINE 7A: THE BY-LAWS OF THE ORGANIZATION IN SECTION VII COUNCIL: "A COUNCIL SHALL ASSIST THE EXECUTIVE COMMITTEE IN GOVERNANCE OF THE ASSOCIATION. THE FUNCTIONS OF THE COUNCIL SHALL BE IN PART ADVISORY AND IN PART DECISION-MAKING WITH DAY TO DAY DECISIONS MADE BY THE PRESIDENT AND THE EXECUTIVE COMMITTEE. THE COUNCIL SHALL NORMALLY MEET TWICE YEARLY, ONCE IN CONNECTION WITH THE ANNUAL MEETING AND ONCE DURING THE YEAR."

 FORM
 990,
 PART
 VI,
 SECTION
 A,
 LINE
 7B:
 THE
 BY-LAWS
 OF
 THE
 ORGANIZATION
 IN

 LHA
 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
 Schedule O (Form 990) 2009

SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN ACCOUNTING ASSOCIATION

Employer identification number 39-6030166

SECTION IX NOMINATION AND ELECTIONS PROCEDURES: "A LIST OF THE NOMINATIONS

MADE BY THE COMMITTEE ON NOMINATIONS SHALL BE PUBLISHED APPROXIMATELY

NINETY (90) DAYS PRIOR TO THE BEGINNING OF THE ELECTION. ADDITIONAL

NOMINATIONS MAY BE MADE BY A PETITION SIGNED BY NOT LESS THAN ONE HUNDRED

(100) MEMBERS OF THE ASSOCIATION SUBMITTED TO THE EXECUTIVE DIRECTOR AT

LEAST FORTY-FIVE (45) DAYS PRIOR TO THE BEGINNING OF THE ELECTION."

FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTEE WILL REVIEW AND MAKE THE RECOMMENDATION TO THE EXECUTIVE DIRECTOR, WHO WILL SIGN.

FORM 990, PART VI, SECTION B, LINE 12: A PROCESS FOR MONITORING AND

COMPLIANCE IS IN THE PROCESS OF BEING IMPLEMENTED.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS ESTABLISHED BY A

WRITTEN EMPLOYMENT CONTRACT WHICH IS APPROVED BY THE BOARD OR COMPENSATION

FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE PROVIDED UPON

**REQUEST**.

PART XI, LINE 2(C) EXPLANATION

OVERSIGHT RESPONSIBILITY HAS NOT CHANGED.

# FORM 990 PAGE 10

ORM 9	90 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
12	A/C IMPROVEMENTS	04/13/00	SL	7.00	нү	16	7,754.				7,754.	7,754.		0.	7,754
45	ROOF REPLACEMENT	01/28/97	SL	15.00	HY	16	11,727.				11,727.	9,838.		586.	10,424
46	BUILDING	09/01/80	SL	20.00	HY	16	173,271.				173,271.	173,271.		0.	173,271.
68	AIR HANDLER	03/23/95	SL	10.00	HY	16	1,169.				1,169.	1,169.		0.	1,169.
80	AIR CONDITIONER CONDENSER	10/05/92	SL	10.00	HY	16	1,591.				1,591.	1,591.		0.	1,591.
81	AIR CONDITIONER CONDENSER	09/16/93	SL	10.00	HY	16	995.				995.	995.		0.	995
82	SHELVING	10/22/93	SL	10.00	HY	16	400.				400.	400.		0.	400.
86	(D)ALARM SYSTEM	05/09/94	SL	5.00	HY	16	440.				440.	440.		0.	
90	BUILDING- BENEVA	03/29/01	SL	40.00	HY	16	231,555.				231,555.	51,135.		4,342.	55,477.
91	NEW ROOF- BENEVA	06/28/01	SL	15.00	HY	16	11,359.				11,359.	6,183.		568.	6,751
92	ARCH SVCS- BENEVA	06/28/01	SL	40.00	HY	16	2,360.				2,360.	492.		44.	536.
93	AIR HANDLER	02/23/01	SL	7.00	HY	16	2,189.				2,189.	2,189.		0.	2,189
108	BUILDING RENOVATIONS	06/30/02	SL	40.00	HY	16	149,766.				149,766.	26,833.		2,808.	29,641.
109	BESSIE BLDG IMPROVEMENTS	08/30/02	SL	40.00	нү	16	7,511.				7,511.	1,315.		141.	1,456
124	PAINTING OF BESSIE BUILDING	08/29/03	SL	15.00	HY	16	4,250.				4,250.	1,699.		213.	1,912.
131	AIR HANDLER	10/30/03	SL	5.00	HY	16	1,936.				1,936.	1,936.		٥.	1,936.
137	HURRICANE WINDOW FILM	07/14/05	SL	5.00	нү	16	9,677.				9,677.	8,067.		1,452.	9,519.

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Asset No.	Description	Date Acquired	Method	Life	C Lin o No v	e Unadjusted · Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	ROOF REPAIRS - SHEWSKI ROOFING	11/30/06	SL	39.00	MM16	2,540.				2,540.	179.		49.	228.
144	(2) CABINETS W/COUNTER TOPS	04/27/07	SL	10.00	HY16	2,290.				2,290.	534.		172.	706.
145	CONDENSING UNIT #110408	10/05/06	SL	10.00	HY16	1,864.				1,864.	543.		140.	683.
146	CONDENSING UNIT #110409	10/05/06	SL	10.00	HY16	2,177.				2,177.	636.		163.	799.
158	A/C BENEVA RD	04/01/08	SL	10.00	HY16	5,470.				5,470.	775.		410.	1,185.
	AIR HANDLER AWNINGS - SUN STATE AWNINGS	10/01/07	SL	10.00	HY16	1,888.				1,888.	362.		142.	504.
	INC.	07/01/08	SL	5.00	НҮ16	3,400.				3,400.	737.		510.	1,247.
	BESSIE BLDG: BUILDING REMODEL	03/01/10	SL	40.00	HY16	103,964.				103,964.			650.	650.
	* 990 PAGE 10 TOTAL BUILDINGS					741,543.				741,543.	299,073.		12,390.	311,023.
	LAND													
47	LAND IMPROVEMENTS	09/01/80	SL	15.00	HY16	15,252.				15,252.	15,252.		0.	15,252.
89	LAND - BENEVA	03/29/01	L		НҮ	165,793.				165,793.			0.	
123	LAND-BESSIE	09/01/80	L		НҮ	29,748.				29,748.			٥.	
129	LANDSCAPING	07/06/04	SL	5.00	HY16	4,275.				4,275.	4,275.		0.	4,275.
	* 990 PAGE 10 TOTAL LAND					215,068.				215,068.	19,527.		0.	19,527.
	OTHER													
1	DELL COMPUTER	08/08/00	SL	3.00	HY16	4,222.				4,222.	4,222.		0.	4,222.
2	FILE CABINETS	09/01/80	SL	10.00	HY16	411.				411.	411.		0.	411.

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3	DELL COMPUTER	08/08/00	SL	3.00	нү16	3,710.				3,710.	3,710.		٥.	3,710.
4	TOSHIBA LAPTOP	08/08/00	SL	3.00	нү16	2,550.				2,550.	2,550.		0.	2,550.
5	(D)CANNON COPIER IR330	04/14/00	SL	5.00	нү16	13,531.				13,531.	13,531.		٥.	
6	FILE CABINETS	09/01/81	SL	10.00	нү16	201.				201.	201.		0.	201.
9	CHAIR/3 FILE CABINETS	09/01/82	SL	10.00	нү16	408.				408.	408.		٥.	408.
10	CANNON COPIER C2100CS	04/14/00	SL	5.00	нү16	14,925.				14,925.	14,925.		0.	14,925.
11	1 FILE CABINET	09/01/83	SL	10.00	нү16	110.				110.	110.		0.	110.
13	GATEWAY COMPUTER	02/04/00	SL	3.00	нү16	4,105.				4,105.	4,105.		0.	4,105.
15	1 FILE CABINET	09/01/85	SL	10.00	нү16	547.				547.	547.		٥.	547.
16	2 FILE CABINETS	09/01/85	SL	10.00	нү16	508.				508.	508.		0.	508.
19	GATEWAY COMPUTER	02/04/00	SL	3.00	нү16	4,105.				4,105.	4,105.		٥.	4,105.
21	DELL COMPUTER	08/31/99	SL	5.00	нү16	2,843.				2,843.	2,843.		0.	2,843.
22	WEB SERVER	08/31/99	SL	5.00	нү16	1,378.				1,378.	1,378.		٥.	1,378.
23	DESKS	08/31/99	SL	10.00	нү16	2,550.				2,550.	2,550.		0.	2,550.
24	WEB SERVER	08/31/99	SL	5.00	нү16	9,976.				9,976.	9,976.		٥.	9,976.
25	2 DELL COMPUTERS	08/27/99	SL	5.00	нү16	7,985.				7,985.	7,985.		0.	7,985.
27	WEB SERVER	07/06/99	SL	5.00	нү16	1,500.				1,500.	1,500.		0.	1,500.
28	TABLE/FILE/CHAIR	09/01/87	SL	10.00	нү16	340.				340.	340.		0.	340.

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Asset No.	Description	Date Acquired	Method	Life	C on v	ne Unadjusted <sup>o.</sup> Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
29	AMS SOFTWARE	05/20/99	SL	5.00	ну1	5 3,000.				3,000.	3,000.		0.	3,000
30	FILE CABINET	09/01/87	SL	10.00	HY1	5 31.				31.	31.		0.	31
31	1 BOOKCASE	09/01/88	SL	10.00	ну1	5 63.				63.	63.		0.	63
32	MICROWAVE	09/01/88	SL	5.00	HY1	5 81.				81.	81.		0.	81
33	2 FILE CABINETS	09/01/88	SL	10.00	HY1	5 201.				201.	201.		0.	201
34	DELL COMPUTER	02/15/99	SL	5.00	HY1	5 3,563.				3,563.	3,563.		0.	3,563
35	VIDEO CARD	01/21/99	SL	5.00	HY1	5 1,137.				1,137.	1,137.		0.	1,137
36	CAMCORDER	01/06/99	SL	5.00	HY1	5 2,125.				2,125.	2,125.		0.	2,125
37	DRACO VIDEO EDITOR	12/10/98	SL	5.00	HY1	5 6,190.				6,190.	6,190.		0.	6,190
38	2 DELL COMPUTERS	09/18/98	SL	5.00	HY1	5 7,824.				7,824.	7,824.		0.	7,824
39	DELL COMPUTER -LAPTOP	08/31/98	SL	5.00	HY1	5 4,907.				4,907.	4,907.		0.	4,907
40	HP LASER PRINTER	08/31/98	SL	5.00	HY1	5 3,291.				3,291.	3,291.		0.	3,291
41	AMS SOFTWARE	08/25/98	SL	5.00	ну1	5 4,536.				4,536.	4,536.		0.	4,536
42	AMS SOFTWARE	04/04/98	SL	5.00	HY1	5 5,334.				5,334.	5,334.		0.	5,334
52	MEMBERSHIP & ACCOUNTING SOFTWARE	08/11/97	SL	5.00	нү1	5 20,370.				20,370.	20,370.		0.	20,370
54	DELL PC & MONITOR	08/29/97	SL	5.00	HY1	5 3,476.				3,476.	3,476.		0.	3,476
55	NETWORK SERVER	08/08/97	SL	5.00	нү1	5 8,590.				8,590.	8,590.		0.	8,590
56	COMPUTER NETWORK	04/24/97	SL	5.00	HY1	5 5,756.				5,756.	5,756.		0.	5,756

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Asset No.	Description	Date Acquired	Method	Life	C Li o n v	ne Unadjusted <sup>o.</sup> Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
57	NEC NOTEBOOK COMPUTER	11/11/96	SL	5.00	HY1 (	5 4,878.				4,878.	4,878.		0.	4,878.
58	CONFERENCE CHAIRS	06/15/96	SL	7.00	HY1(	5 2,555.				2,555.	2,555.		0.	2,555.
59	STACKING CHAIRS	06/15/96	SL	7.00	HY1 (	5 423.				423.	423.		0.	423.
60	CABINETS	06/15/96	SL	7.00	HY1(	5 1,702.				1,702.	1,702.		0.	1,702.
61	EXEC. DIR. DESK	05/15/96	SL	7.00	HY1(	5 406.				406.	406.		0.	406.
62	CONFERENCE TABLE	01/15/96	SL	7.00	HY1(	5 423.				423.	423.		0.	423.
63	PUBLISHING COMPUTER	08/15/96	SL	5.00	HY1(	5 15,334.				15,334.	15,334.		0.	15,334.
64	PRINTER & SCANNER	01/15/96	SL	5.00	HY1(	926.				926.	926.		0.	926.
66	EXTRAWEB SOFTWARE	08/31/01	SL	3.00	HY1(	5 99,390.				99,390.	99,390.		0.	99,390.
67	PRINTER	08/15/95	SL	5.00	HY1(	321.				321.	321.		0.	321.
71	CANNON FAX	06/15/96	SL	5.00	HY1(	3,130.				3,130.	3,130.		0.	3,130.
72	COMPUTER WORKCENTER (MYRTLE'S)	08/07/93	SL	10.00	HY1(	5 181.				181.	181.		0.	181.
73	PRINTER STAND (MYRTLE'S OFFICE)	08/07/93	SL	10.00	HY1(	5 96.				96.	96.		0.	96.
74	CHAIR-TEAL (MYRTLE'S OFFICE)	08/07/93	SL	10.00	HY1(	5 214.				214.	214.		0.	214.
75	DESK 30 X 60 (MYRTLE'S OFFICE)	08/07/93	SL	10.00	HY1(	5 181.				181.	181.		0.	181.
76	BOOKCASE-OAK (MYRTLE'S OFFICE)	08/07/93	SL	10.00	HY10	5 52.				52.	52.		0.	52.
77	IBM LASER PRINTER 4039 10R	08/15/93	SL	5.00	HY1(	5 2,671.				2,671.	2,671.		0.	2,671.
78	FILING CABINET (MYRTLE'S OFFICE)	08/15/93	SL	10.00	HY1(	5 118.				118.	118.		0.	118.

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Asset No.	Description	Date Acquired	Method	Life	C Li o n v	ne Unadjusted <sup>o.</sup> Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
87	PORTABLE PRINTER	02/15/96	SL	5.00	HY1(	5 451.				451.	451.		0.	451.
88	COMPUTER MONITORS	01/01/96	SL	5.00	HY1(	5 1,496.				1,496.	1,496.		0.	1,496.
94	PHONE SYSTEM	05/22/01	SL	7.00	HY1 (	5 22,500.				22,500.	22,500.		0.	22,500.
95	ADOBE S/W	11/17/00	SL	3.00	HY1(	5 1,817.				1,817.	1,817.		0.	1,817.
96	DELL SERVER	11/17/00	SL	3.00	HY1(	5 11,949.				11,949.	11,949.		0.	11,949.
97	GATEWAY PC	11/17/00	SL	3.00	HY1(	5 5,003.				5,003.	5,003.		0.	5,003.
98	GATEWAY PC	11/17/00	SL	3.00	HY1(	5 5,003.				5,003.	5,003.		0.	5,003.
99	SONY VAIO COMPUTER	11/30/00	SL	3.00	HY1(	5 3,380.				3,380.	3,380.		0.	3,380.
100	MAVICA DIGITAL CAMERA	11/30/00	SL	3.00	HY1(	5 2,781.				2,781.	2,781.		0.	2,781.
101	ACE SERVER	12/14/00	SL	3.00	HY1(	5 2,500.				2,500.	2,500.		0.	2,500.
102	ADOBE SOFTWARE	01/31/01	SL	3.00	HY1(	5 2,299.				2,299.	2,299.		0.	2,299.
103	DELL LAPTOP	02/28/01	SL	3.00	HY1(	5 3,816.				3,816.	3,816.		0.	3,816.
104	AMS UPGRADE	03/22/01	SL	3.00	HY1(	5 9,942.				9,942.	9,942.		0.	9,942.
105	FIREWALL	08/31/01	SL	3.00	HY1(	5 5,000.				5,000.	5,000.		0.	5,000.
106	COLD FUSION S/W	05/25/01	SL	3.00	HY1(	5 1,667.				1,667.	1,667.		0.	1,667.
107	INFOCAN WEB SITE	10/31/01	SL	3.00	HY1(	5 26,325.				26,325.	26,325.		0.	26,325.
110	ROLAND OFFICE FURN	03/31/02	SL	7.00	HY1(	5 2,472.				2,472.	2,472.		0.	2,472.
111	PHONE SYSTEM	03/31/02	SL	7.00	HY1(	5 2,428.				2,428.	2,428.		0.	2,428.

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Asset No.	Description	Date Acquired	Method	Life	C Lii n N v	ne Unadjusted <sup>5.</sup> Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
112	FURNITURE	03/31/02	SL	7.00	нү16	2,414.				2,414.	2,414.		0.	2,414.
113	FAX/COPIER BENEVA	04/30/02	SL	5.00	ну16	358.				358.	358.		0.	358.
114	MICROWAVE	04/30/02	SL	5.00	нү16	177.				177.	177.		0.	177.
115	SERVER RACKS	04/30/02	SL	5.00	HY16	742.				742.	742.		0.	742.
116	SOFA	04/30/02	SL	5.00	HY16	732.				732.	732.		0.	732.
117	TABLE	04/30/02	SL	5.00	HY16	121.				121.	121.		0.	121.
118	CYLINDER TABLE	04/30/02	SL	5.00	HY16	92.				92.	92.		0.	92.
119	MISC FURNITURE	04/30/02	SL	5.00	HY16	258.				258.	258.		0.	258.
120	AIR HANDLER- BESSIE	06/30/02	SL	10.00	HY16	1,800.				1,800.	1,290.		135.	1,425.
121	NETWORKING	12/31/01	SL	5.00	HY16	5,780.				5,780.	5,780.		0.	5,780.
122	MISC	08/31/02	SL	3.00	нү16	1,734.				1,734.	1,734.		0.	1,734.
125	RICOH COPIER	04/09/03	SL	5.00	HY16	3,400.				3,400.	3,400.		0.	3,400.
126	LABEL PRINTER	12/30/02	SL	3.00	НҮ16	5,392.				5,392.	5,392.		0.	5,392.
127	EXTRAWEB SYSTEM	12/05/02	SL	3.00	HY16	9,450.				9,450.	9,450.		0.	9,450.
128	LIGHTSPEED SYSTEM	04/09/03	SL	3.00	HY16	900.				900.	900.		0.	900.
130	NEOPOST FOLDER/STUFFER	09/24/03	SL	5.00	HY16	4,895.				4,895.	4,895.		0.	4,895.
132	DELL LATITUDE LAPTOP	01/14/04	SL	3.00	HY16	2,679.				2,679.	2,679.		0.	2,679.
133	DELL DIMENSION XPS DESKTOP	12/08/03	SL	3.00	HY16	2,004.				2,004.	2,004.		0.	2,004.

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134	2 DELL DIMENSION XPS DESKTOPS	06/11/04	SL	3.00	HY16	5,154.				5,154.	5,154.		0.	5,154.
135	IBM THINKPAD & ACCESSORIES	07/14/04	SL	3.00	HY16	4,088.				4,088.	4,088.		0.	4,088.
136	LIGHTNING & SURGE PROTECTION	06/15/04	SL	3.00	HY16	4,438.				4,438.	4,438.		0.	4,438.
138	DELL LATITUDE LAPTOP COMPUTER	03/31/05	SL	3.00	нү16	2,175.				2,175.	2,175.		0.	2,175.
139	2 DELL DIMENSION XPS DESKTOPS	12/17/04	SL	3.00	HY16	5,282.				5,282.	5,282.		0.	5,282.
140	DELL SERVER	08/25/05	SL	5.00	HY16	12,438.				12,438.	9,952.		1,866.	11,818.
141	LENOVO THINK PAD T43P	08/30/06	SL	3.00	HY16	3,688.				3,688.	3,687.		0.	3,687.
142	(D)GP SOFTWARE AND SUPPORT	09/30/05	SL	3.00	НҮ16	18,535.				18,535.	18,535.		0.	
147	CLEARVANTAGE SOFTWARE-INCLUSIVE OF TRAINI	03/01/07	SL	5.00	HY16	197,432.				197,432.	98,715.		29,615.	128,330.
148	DELL PRECISION M65 SYSTEM, 15.4 INCH LCD	11/07/06	SL	3.00	HY16	3,352.				3,352.	3,165.		186.	3,351.
	DELL POWER EDGE 2900 SYSTEM	12/07/06	SL	3.00	HY16	9,951.				9,951.	9,122.		829.	9,951.
	XPS 710 BLACK W/20" ULTRASHARP MONITOR	02/01/07	SL	3.00	НҮ16	2,430.				2,430.	2,093.		337.	2,430.
151	ZIPCODE SEARCH SOFTWARE	02/19/07	SL	5.00	нү16	40.				40.	20.		6.	26.
152	OPTIPLEX 745 ULTRA SMALL FORM FACTOR SYSTEM	03/02/07	SL	3.00	HY16	1,307.				1,307.	1,090.		217.	1,307.
153	OPTIPLEX 745 ULTRA SMALL FORM FACTOR SYSTEM	03/02/07	SL	3.00	нү16	1,293.				1,293.	1,078.		215.	1,293.
	MICROSOFT SQL SERVER 2000 LICENSE (QTY OF 20)	12/07/06	SL	3.00	HY16	3,050.				3,050.	2,796.		254.	3,050.
155	MICROSOFT SQL SERVER 2000 SERVICE PACK FOR SERVER	12/07/06	SL	5.00	нү16	827.				827.	454.		124.	578.
156	SOFTWARE/ACQUISITION CONSULTING	03/01/07	SL	5.00	HY16	32,251.				32,251.	16,125.		4,838.	20,963.

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157	DELL LASER PRINTER 1710N	04/14/07	SL	3.00	нү1	5 239.				239.	193.		47.	240.
160	PHONE SYSTEM	11/01/07	SL	7.00	нү1	6,215.				6,215.	1,628.		666.	2,294.
161	DESK	01/01/08	SL	7.00	нү1	5 1,109.				1,109.	264.		119.	383.
162	CANON IRC51851 COPIER	03/01/08	SL	5.00	HY1	5 15,000.				15,000.	4,500.		2,250.	6,750.
163	2- DELL COMPUTER	12/01/07	SL	5.00	нү1	5 1,982.				1,982.	693.		297.	990.
164	DELL COMPUTER	12/01/07	SL	5.00	нү1	5 991.				991.	347.		149.	496.
165	DELL 20" MONITOR	12/01/07	SL	5.00	нү1	5 469.				469.	164.		70.	234.
166	CDW SONY LAPTOP	01/01/08	SL	5.00	HY1	5 4,201.				4,201.	1,400.		630.	2,030.
167	2 - DELL MONITORS	02/01/08	SL	5.00	HY1	5 844.				844.	267.		127.	394.
168	COMPUTER EQUIPMENT	03/01/08	SL	5.00	HY1	5 4,811.				4,811.	1,443.		722.	2,165.
169	7 - CDW ADOBE CREATIVE SOFTWARE	11/01/07	SL	3.00	HY1	5 3,548.				3,548.	1,774.		887.	2,661.
170	1- CDW ADOBE COLD FUSION SOFTWARE	11/01/07	SL	3.00	HY1	5 871.				871.	435.		218.	653.
171	25 CDW OFFICE 2007 LICENSE	04/01/08	SL	3.00	HY1	5 2,203.				2,203.	1,040.		551.	1,591.
172	16- APC BACKUPS	05/01/08	SL	5.00	HY1	5 1,894.				1,894.	505.		284.	789.
173	2- DELL 20" MONITORS	05/01/08	SL	5.00	нү1	5 798.				798.	213.		120.	333.
174	1- DELL COMPUTER	05/01/08	SL	5.00	нү1	5 1,718.				1,718.	459.		258.	717.
176	DELL OPTIPLEX WORKSTATION	08/01/08	SL	5.00	нү1	5 1,200.				1,200.	260.		180.	440.
177	DELL 20" ULTRASHARP MONITOR	08/01/08	SL	5.00	HY1	5 399.				399.	87.		60.	147.

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#### FORM 990 PAGE 10

#### 990

ORM 95	90 PAGE 10						990							
Asset No.	Description	Date Acquired	Method	Life	C l n v	<sub>line</sub> Unadjusted No. Cost Or Bas	s Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
178	RHLE DIRECTORY DATA FILES FOR ACCESS DATABASE	08/01/08	SL	3.00	НУ1	.6 7,500				7,500.	2,708.		1,875.	4,583.
179	TWO BLUE FABRIC CHAIRS	10/01/08	SL	7.00	нү1	.6 295				295.	39.		32.	71.
180	DELL OPTIPLEX WORKSTATION	09/01/08	SL	5.00	нү1	.6 1,219				1,219.	244.		183.	427.
181	20" DELL MONITOR 2007FP ULTRASHART	09/01/08	SL	5.00	нү1	.6 439				439.	88.		66.	154.
182	DELL LATITUDE LAPTOP	10/01/08	SL	5.00	нү1	.6 1,555				1,555.	285.		233.	518.
183	DELL POWEREDGE SERVER SC 440	11/01/08	SL	5.00	HY1	.6 2,370				2,370.	395.		355.	750.
184	DELL OPTIPLEX WORKSTATION	11/01/08	SL	5.00	нү1	.6 1,109				1,109.	185.		166.	351.
185	DELL OPTIPLEX WORKSTATION	11/01/08	SL	5.00	нү1	.6 1,103				1,103.	184.		165.	349.
186	DELL VOSTROS LAPTOP	12/01/08	SL	5.00	нү1	.6 3,613				3,613.	542.		542.	1,084.
187	PING FEDERATE 2 SERVER LICENSE FOR AAA COMMONS	12/01/08	SL	5.00	нү1	.6 27,000				27,000.	4,050.		4,050.	8,100.
188	DELL OPTIPLEX WORKSTATION	01/01/09	SL	5.00	нү1	.6 1,378				1,378.	184.		207.	391.
189	DELL LATITUDE LAPTOP	02/01/09	SL	5.00	нү1	.6 1,579				1,579.	184.		237.	421.
190	DELL LATITUDE LAPTOP S0#21428 FOR WEB	04/01/09	SL	5.00	нү1	.6 1,671				1,671.	139.		251.	390.
191	DELL LATITUDE LAPTOP FOR COO	05/01/09	SL	5.00	HY1	.6 1,591				1,591.	106.		239.	345.
192	DELL MONITOR	06/01/09	SL	5.00	нү1	.6 331				331.	17.		50.	67.
193	10 DELL 20" FLAT SCREEN MONITORS	08/01/09	SL	5.00	нү1	.6 3,335				3,335.	56.		500.	556.
194	DELL LATITUDE E6500 LAPTOP	08/01/09	SL	5.00	нү1	.6 1,584				1,584.	26.		238.	264.
195	DELL LATITUDE E6500 LAPTOP	08/01/09	SL	5.00	HY1	.6 1,584				1,584.	26.		238.	264.

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### FORM 990 PAGE 10

#### 990

OKM 93	00 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
196	DELL OPTIPLEX 760 WORKSTATION	08/01/09	SL	5.00	нү	16	822.				822.	14.		123.	137
197	LASER JET PRINTER P2055D	08/01/09	SL	5.00	нү	16	975.				975.	16.		146.	162
1178	DELL SERVER T410	10/01/09	SL	5.00	нү	16	5,397.				5,397.			720.	720.
	LASER JET PRINTER P2055D/ FINANCE	11/01/09	SL	5.00	нү	16	460.				460.			54.	54.
1180	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00	нү	16	208.				208.			10.	10.
1181	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00	ну	16	208.				208.			10.	10.
1182	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00	нү	16	208.				208.			10.	10.
1183	BESSIE BLDG: FURNITURE	03/01/10	SL	7.00	нү	16	47,385.				47,385.			1,692.	1,692.
1217	BESSIE BLDG: REFRIGERATOR	03/01/10	SL	3.00	нү	16	2,135.				2,135.			178.	178.
	BESSIE BLDG: ADMIN LAPTOP	04/01/10	SL	5.00	нү	16	1,288.				1,288.			43.	43.
	BESSIE BLDG: EXEC DIRECTOR MAC COMP	03/01/10	SL	5.00	нү	16	2,701.				2,701.			135.	135,
1221	GREAT PLAINS 10.0 SOFTWARE	04/01/10	SL	5.00	нү	16	13,600.				13,600.			453.	453.
1222	CV/AAA COMMONS SINGLE SIGN ON SOFTWARE	03/01/10	SL	5.00	нү	16	47,069.				47,069.			2,353.	2,353
	* 990 PAGE 10 TOTAL OTHER						981,073.				981,073.	655,757.		61,811.	685,502.
	* GRAND TOTAL 990 PAGE 10 DEPR						1,937,684.				1,937,684.	974,357.		74,201.	1,016,052

Form <b>4562</b>	
Department of the Treasury	

#### **Depreciation and Amortization** 990

OMB No. 1545-0172

 $\left[ \right]$ 

Including	Information	on Listed	Property

(Ir sep **ty)** eturn Jaing Inform 

	ment of the Treasury I Revenue Service (99)	ee separate inst	ructions.	Attach to y				Attachment Sequence No. <b>67</b>
_	s) shown on return					ch this form relate	s	Identifying number
AME	ERICAN ACCOUNTING AS	SSOCIATIO	N	FORM	990 PA	AGE 10		39-6030166
Par	<b>t I</b> Election To Expense Certain Prope	rty Under Section 1	79 Note: If you have	any listed p	property, co	omplete Part	V before y	
<b>1</b> N	laximum amount. See the instructions	for a higher limit	for certain business	es			1	250,000.
	otal cost of section 179 property place							
	hreshold cost of section 179 property							800,000.
<b>4</b> F	Reduction in limitation. Subtract line 3 1	from line 2. If zero	o or less, enter -0					
	ollar limitation for tax year. Subtract line 4 from line							
6	(a) Description of pro	operty	(b) COS	st (business us	e only)	(c) Elected	COSL	-
								-
								-
								-
7	isted property. Enter the amount from	line 29			7			-
	otal elected cost of section 179 prope		s in column (c) lines				8	
	entative deduction. Enter the <b>smaller</b>							
	Carryover of disallowed deduction from							
	Business income limitation. Enter the si							
	Section 179 expense deduction. Add li							
	Carryover of disallowed deduction to 20				13			
	: Do not use Part II or Part III below for		/		- <b>I I</b>			
Par	t II Special Depreciation Allowa	nce and Other D	epreciation (Do not	<b>t</b> include lis	ted prope	rty. <b>)</b>		
<b>14</b> S	Special depreciation allowance for qua	lified property (otl	her than listed prope	erty) placed	in service	during		
tł	he tax year						14	
<b>15</b> P	Property subject to section 168(f)(1) ele	ection					15	
	Other depreciation (including ACRS)						16	74,201.
Par	T III MACRS Depreciation (Do no	t include listed p	. ,,	,				
			Section A					1
<b>17</b> N	ACRS deductions for assets placed in	n service in tax ye	ears beginning befor	e 2009			<b>17</b>	
<b>18</b> If	you are electing to group any assets placed in serv							ha
	Section B - Assets	(b) Month and	(c) Basis for deprecia	tion			ation Syst	
	(a) Classification of property	year placed in service	(business/investment only - see instruction	use (	d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property	_						
b	5-year property	-						
C	7-year property	4						
d	10-year property	-						
<u>e</u>	15-year property	-						
f	20-year property	-			05		0.1	
<u>g</u>	25-year property				25 yrs.	N 4 N 4	S/L	
h	Residential rental property				27.5 yrs.	MM	S/L S/L	
		/			27.5 yrs.	MM	S/L S/L	
i	Nonresidential real property	/			39 yrs.	MM	S/L S/L	
	Section C - Assets P	/ Placed in Service	During 2009 Tax Y	ear Using	the Altern			l stem
20a	Class life			<u></u>			S/L	
<u></u> b	12-year	-			12 yrs.		S/L	
	40-year	/			40 yrs.	MM	S/L	
	t IV Summary (See instructions.)	•						
	isted property. Enter amount from line	28					21	
	<b>otal.</b> Add amounts from line 12, lines							
	Inter here and on the appropriate lines	-					22	74,201.
	or assets shown above and placed in							
р	ortion of the basis attributable to sect	ion 263A costs	<u></u>	<u></u>	23			

Fo	rm 4562 (2009)	AME	RICAN A	ACCOU	INTIN	G.	AS	SOCI	ATI	ON			39-	-6030	166	Page 2
Ρ	art V Listed Propert			ertain ot	her vehic	les,	cellu	ılar telep	ohone	s, certain (	comput	ers, and	propert	y used fo	r enterta	ainment,
	Note: For any v	vehicle for w	hich you are ι	ising the	standard	d mil	leage	e rate or	dedu	cting lease	expen	se, comp	leteonl	<b>y</b> 24a, 24	b, colun	nns (a)
	through (c) of Section A		on and Othe						nstruc	tions for li	mits for	nassen	ner auto	mohiles		
24:	a Do you have evidence to s						Ye			24b If "Y					Yes	No
2		(b)	(c)		(d)			<u>,s                                    </u>		(f)		(g)		(h)		<u>110</u> (i)
	(a) Type of property	Date placed in	Business, investmen		Cost or			s for depre		Recovery	Me	thod/	Depr	eciation	Ele	cted
	(list vehicles first )	service	use percenta		ther basis		(business/investm use only)			period	Con	ention/	ded	uction		on 179 Ost
25	Special depreciation allo	wance for q	ualified listed	propert	y placed	in se	ervic	e during	the ta	ax year an	d					
	used more than 50% in			• • •								. 25				
26	Property used more that															
		: :		%												
		: :		%												
		: :		%												
27	Property used 50% or le	ess in a qual	ified business	use:							i					
		: :		%							S/L ·					
				%							S/L -					
		: :		%							S/L -					
	Add amounts in column											-				
29	Add amounts in column	(i), line 26. E										<u></u>		. 29		
Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.																
	mplete this section for ver ou provided vehicles to y													ina this s	ection f	<b>h</b> r
-	ose vehicles.	our employe	500, 1100 0100				00110		, 100				oompioi	ing the c		51
	(a) (b) (c) (d) (e) (f)															
30	Total business/investment	miles driven d	luring the	-	hicle		(D) Vehicle		v	Vehicle		hicle		hicle	Veh	-
30	year ( <b>do not</b> include comr				VOII		v	CITICIC	vo		1 10	more	VOI			
31	Total commuting miles of															
	Total other personal (no															
UL.	driven															
33	Total miles driven during															
	Add lines 30 through 32															
34	Was the vehicle availab			Yes	No	Ye	es	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?															
35	Was the vehicle used p	rimarily by a	more													
	than 5% owner or relate	ed person?														
36	Is another vehicle availa	ble for perso	onal													
	use?															
		Section C	- Questions	for Emp	loyers W	/ho l	Prov	ide Veh	icles	for Use by	y Their	Employe	es			
An	swer these questions to o	determine if	you meet an o	exceptio	n to com	pleti	ng S	ection E	B for v	ehicles us	ed by e	mployee	s who a	ire not m	ore thar	5%
	ners or related persons.														1	<u> </u>
37	Do you maintain a writte									-	-				Yes	No
~~	employees?		+					obiele -		+ oc '						
38	Do you maintain a writte	. ,	•						•							
20	employees? See the ins															
	Do you treat all use of v															
-+0	Do you provide more that the use of the vehicles,															
41	Do you meet the require															+
41	Note: If your answer to 3															
Ρ	art VI Amortization	,,,,,	-, -, -, -, -, -, -, -, -, -, -, -, -, -			2.00				2.2.000.00						
-	(a)			(b)			(c)			(d)		(e)			(f)	
	Description of	f costs	Dat	e amortization begins		Amor	rtizabl nount	e		Code section		Amortiza period or per	tion	An fo	nortization r this year	
42	Amortization of costs th	at begins du	uring your 200	-	ar:											
		~		;;;												
_																
43	Amortization of costs th	at began be	fore your 200	9 tax yea	ar								43			
	Total. Add amounts in c												44			