

Return of Organization Exempt From Income Tax

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2010 calendar year, or tax year beginning JUN 1, 2010 and ending MAY 31, 2011

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICAN ACCOUNTING ASSOCIATION		D Employer identification number 39-6030166
	Doing Business As		E Telephone number 941-921-7747
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 7,195,475.
	City or town, state or country, and ZIP + 4 SARASOTA, FL 34233		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer: TRACEY E. SUTHERLAND SAME AS C ABOVE		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ AAHQ.ORG		K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1935 M State of legal domicile: IL	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE AMERICAN ACCOUNTING ASSOCIATION PROMOTES WORLDWIDE EXCELLENCE IN ACCOUNTING EDUCATION,	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 11
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5 27
	6 Total number of volunteers (estimate if necessary)	6 0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 114,975.
b Net unrelated business taxable income from Form 990-T, line 34	7b 27,108.	

Revenue		Prior Year	Current Year
		8 Contributions and grants (Part VIII, line 1h)	584,044.
9 Program service revenue (Part VIII, line 2g)	3,462,768.	5,673,341.	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,999.	19,547.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,072,811.	7,194,237.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,283,124.	1,681,942.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,402,020.	5,059,264.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,685,144.	6,741,206.	
19 Revenue less expenses. Subtract line 18 from line 12	<612,333.>	453,031.	

Net Assets or Fund Balances		Beginning of Current Year	End of Year
		20 Total assets (Part X, line 16)	8,051,070.
21 Total liabilities (Part X, line 26)	2,169,941.	2,136,347.	
22 Net assets or fund balances. Subtract line 21 from line 20	5,881,129.	6,334,160.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer	Date			
	▶ TRACEY E. SUTHERLAND, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name TOMMYE E. BARIE, CPA	Preparer's signature	Date 01/09/12	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ MAULDIN & JENKINS, LLC	Firm's address ▶ 1301 SIXTH AVENUE WEST SUITE 600 BRADENTON, FL 34205-7440	Firm's EIN ▶	Phone no. (941) 747-4483	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: TO PROVIDE AND PROMOTE EDUCATIONAL SUPPORT IN ACCOUNTING EDUCATION, RESEARCH AND PRACTICE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 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.

4a (Code:) (Expenses \$ 3,321,246. including grants of \$) (Revenue \$ 2,199,562.) ANNUAL MEETING FOR MEMBERS, CONFERENCES & CONSORTIA RELATING TO VARIOUS ACCOUNTING EDUCATION TOPICS

4b (Code:) (Expenses \$ 296,871. including grants of \$) (Revenue \$) COMMITTEE MEETINGS AND PROGRAMS TO RESEARCH VARIOUS ACCOUNTING-RELATED TOPICS, TO EDUCATE ACCOUNTING PROFESSORS AND TO RECOGNIZE OUTSTANDING EDUCATORS

4c (Code:) (Expenses \$ 1,261,993. including grants of \$) (Revenue \$ 1,220,399.) THE ASSOCIATION PUBLISHES 10 JOURNALS, 15 NEWSLETTERS, AND OTHER PUBLICATIONS, INCLUDING A WEB SITE FOR DISSEMINATION OF INFORMATION TO MEMBERS/SUBSCRIBERS

4d Other program services. (Describe in Schedule O.) (Expenses \$ 235,783. including grants of \$) (Revenue \$ 2,138,405.)

4e Total program service expenses 5,115,893.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	X	
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 "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
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 "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O response

Table with columns for question number, question text, and Yes/No response columns. Includes questions 1a through 14b regarding Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, and contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	1a	11	
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b	11	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
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	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section 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 Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 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

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NANCY BAGRANOFF PAST PRESIDENT	10.00	X		X				0.	0.	0.
KEVIN STOCKS PRESIDENT	15.00	X		X				0.	0.	0.
GREG WAYMIRE PRESIDENT - ELECT	10.00	X		X				0.	0.	0.
KAZUO HIRAMATSU VP - INTERNATIONAL	10.00	X		X				0.	0.	0.
ROBERT COLSON VP - PROF RELATIONS	10.00	X		X				0.	0.	0.
JEAN BEDARD VP - PUBLICATIONS	10.00	X		X				0.	0.	0.
STACY KOVAR VICE PRESIDENT - FINANCE	10.00	X		X				0.	0.	0.
JOHN CHRISTENSEN VICE PRESIDENT - RESEARCH	10.00	X		X				0.	0.	0.
GAIL HOOVER KING VP - SECTIONS & REGIONS	10.00	X		X				0.	0.	0.
BELVERD NEEDLES VICE PRESIDENT - EDUCATION	10.00	X		X				0.	0.	0.
IRA SOLOMON VICE PRESIDENT	10.00	X		X				0.	0.	0.
CHRISTINE BOTOSAN VP - PUBLICATIONS ELECT	10.00	X		X				0.	0.	0.
ALAN REINSTEIN VP - EDUCATION ELECT	10.00	X		X				0.	0.	0.
TRACEY E SUTHERLAND EXECUTIVE DIRECTOR	50.00			X		X		159,542.	0.	21,018.
DIANE LEGER DIRECTOR OF FINANCE	45.00			X				74,160.	0.	19,978.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							233,702.	0.	40,996.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							233,702.	0.	40,996.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
DEE STRAHAN ENTERPRISES, INC. 1223 OXBOW LANE, WINTER SPRINGS, FL 32708	MEETING PLANNER	135,742.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 1

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns					
	b	Membership dues					
	c	Fundraising events					
	d	Related organizations					
	e	Government grants (contributions)					
	f	All other contributions, gifts, grants, and similar amounts not included above	1501349.				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f		1501349.			
Program Service Revenue	2 a	MEMBERSHIP DUES	611710	1523584.	1523584.		
	b	ANNUAL MEETING	611710	1432693.	1432693.		
	c	PUBLICATIONS	511120	1220399.	1220399.		
	d	SUBSCRIPTIONS	511120	890,681.	890,681.		
	e	OTHER PROGRAMS & FASB	611710	491,009.	491,009.		
	f	All other program service revenue	541800	114,975.		114,975.	
	g	Total. Add lines 2a-2f		5673341.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		20,785.		20,785.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real				
		Less: rental expenses	(ii) Personal				
		Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
		Less: cost or other basis and sales expenses	(ii) Other				
		Gain or (loss)		1,238.			
		Net gain or (loss)		<1,238.>			<1,238.>
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		Less: direct expenses	b				
Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	a					
	Less: direct expenses	b					
	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a					
	Less: cost of goods sold	b					
	Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		7194237.	5558366.	114,975.	19,547.	

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	274,698.		274,698.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	915,217.	708,237.	206,980.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	391,610.	233,086.	158,524.	
9 Other employee benefits				
10 Payroll taxes	100,417.	59,769.	40,648.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	520,743.	348,549.	172,194.	
12 Advertising and promotion				
13 Office expenses	22,322.	12,061.	10,261.	
14 Information technology	78,849.	44,797.	34,052.	
15 Royalties				
16 Occupancy	39,985.	21,665.	18,320.	
17 Travel	401,534.	253,771.	147,763.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,264,120.	2,072,899.	191,221.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	116,875.	63,148.	53,727.	
23 Insurance	39,125.	18,321.	20,804.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a UBTI TAXES	1,580.		1,580.	
b PRINTING AND PUBLICATIO	751,233.	671,704.	79,529.	
c POSTAGE	178,708.	169,973.	8,735.	
d WEB SERVICES / WEB HOST	127,157.	25,039.	102,118.	
e EVENT COORDINATOR	123,090.	98,515.	24,575.	
f All other expenses	393,943.	314,359.	79,584.	
25 Total functional expenses. Add lines 1 through 24f	6,741,206.	5,115,893.	1,625,313.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	6,255,955.	2	6,160,884.	
	3 Pledges and grants receivable, net	560,090.	3	861,236.	
	4 Accounts receivable, net	259,268.	4	446,254.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use	4,876.	8	6,488.	
	9 Prepaid expenses and deferred charges	80,683.	9	116,488.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,997,448.			
	b Less: accumulated depreciation	10b 1,118,291.	889,128.	10c	879,157.
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	1,070.	15	0.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,051,070.	16	8,470,507.		
Liabilities	17 Accounts payable and accrued expenses	349,984.	17	363,261.	
	18 Grants payable		18		
	19 Deferred revenue	1,819,957.	19	1,773,086.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	2,169,941.	26	2,136,347.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	5,182,230.	27	5,380,172.	
	28 Temporarily restricted net assets	698,899.	28	953,988.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	5,881,129.	33	6,334,160.	
34 Total liabilities and net assets/fund balances	8,051,070.	34	8,470,507.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,194,237.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,741,206.
3	Revenue less expenses. Subtract line 2 from line 1	3	453,031.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,881,129.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	6,334,160.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
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 separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?		X
3b	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.		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization **AMERICAN ACCOUNTING ASSOCIATION** Employer identification number **39-6030166**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,177,458.	1,836,816.	852,107.	584,044.	1,501,349.	6,951,774.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,779,755.	4,847,574.	5,543,891.	3,379,417.	5,498,628.	22,049,265.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	4,957,213.	6,684,390.	6,395,998.	3,963,461.	6,999,977.	29,001,039.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	569,163.	1,721,990.	639,084.	487,967.	1,166,528.	4,584,732.
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	569,163.	1,721,990.	639,084.	487,967.	1,166,528.	4,584,732.
8 Public support (Subtract line 7c from line 6.)						24,416,307.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	4,957,213.	6,684,390.	6,395,998.	3,963,461.	6,999,977.	29,001,039.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	204,670.	136,440.	56,387.	25,999.	20,785.	444,281.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	204,670.	136,440.	56,387.	25,999.	20,785.	444,281.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	39,532.	70,085.	44,506.	22,731.	29,453.	206,307.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	5,201,415.	6,890,915.	6,496,891.	4,012,191.	7,050,215.	29,651,627.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	82.34 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	82.66 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	1.50 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	2.02 %

19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2010

Name of the organization

Employer identification number

AMERICAN ACCOUNTING ASSOCIATION

39-6030166

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** 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

501(c)(3) taxable 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.

General Rule

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.

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 Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

AMERICAN ACCOUNTING ASSOCIATION

Employer identification number

39-6030166

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		215,068.		215,068.
b Buildings		756,362.	302,544.	453,818.
c Leasehold improvements				
d Equipment		1,026,018.	815,747.	210,271.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				879,157.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶		

2. FIN 48 (ASC 740) 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 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,194,237.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,741,206.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	453,031.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	453,031.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,194,237.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	7,194,237.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,194,237.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,741,206.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	6,741,206.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,741,206.

Part 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.

PART X, LINE 2: ON SEPTEMBER 1, 2009 (THE EFFECTIVE DATE), THE ASSOCIATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARD CODIFICATION 740 RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THIS PROVISION REQUIRES ALL TAX POSITIONS THAT MEET A MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AT THE EFFECTIVE DATE BE RECOGNIZED (OR CONTINUE TO BE RECOGNIZED) UPON ADOPTION.

MANAGEMENT HAS REVIEWED THEIR TAX POSITIONS AND CONCLUDED NO LIABILITY OR

Part XIV Supplemental Information (continued)

UNCERTAIN TAX POSITIONS, OR ANY INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, SHOULD BE RECOGNIZED IN THE ASSOCIATION'S FINANCIAL STATEMENTS.

THE ASSOCIATION FILES INCOME TAX RETURNS IN THE U.S. AND VARIOUS STATES. WITH FEW EXCEPTIONS, THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO INCOME TAX EXAMINATION BY TAX AUTHORITIES FOR TAX YEARS ENDING ON OR AFTER AUGUST 31, 2008.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

AMERICAN ACCOUNTING ASSOCIATION

Employer identification number

39-6030166

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>										
<p>a Receive a severance payment or change-of-control payment from the organization or a related organization?</p>	4a	X								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	X								
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	X								
<p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p>										
<p>5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>										
<p>a The organization?</p>	5a	X								
<p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	5b	X								
<p>6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>										
<p>a The organization?</p>	6a	X								
<p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	6b	X								
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	X								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	X								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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

Schedule J (Form 990) 2010

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TRACEY E SUTHERLAND	(i)	159,542.	0.	0.	11,242.	9,776.	180,560.	139,518.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

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 \$ 235,783. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,138,405.

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

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 12C: ANNUALLY, THE AMERICAN ACCOUNTING ASSOCIATION'S CONFLICT OF INTEREST AND CODE OF ETHICS POLICIES ARE DISTRIBUTED TO THE CURRENT AND INCOMING BOARD OF DIRECTORS. IT IS REQUESTED THAT ALL BOARD MEMBERS COMPLETE AND RETURN THE CONFLICT OF INTEREST DISCLOSURE FORM. THIS PROCESS IS MONITORED UNTIL 100% COMPLIANCE IS OBTAINED.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS ESTABLISHED BY A WRITTEN EMPLOYMENT CONTRACT WHICH IS APPROVED BY THE BOARD OR COMPENSATION COMMITTEE.

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

2010 DEPRECIATION AND AMORTIZATION REPORT

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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														
	(D)ROOF REPLACEMENT	01/28/97	SL	15.00		HY16	11,727.				11,727.	10,424.		65.	
	BUILDING	09/01/80	SL	20.00		HY16	173,271.				173,271.	173,271.		0.	173,271.
	(D)AIR HANDLER	03/23/95	SL	10.00		HY16	1,169.				1,169.	1,169.		0.	
	AIR CONDITIONER CONDENSER	10/05/92	SL	10.00		HY16	1,591.				1,591.	1,591.		0.	1,591.
	AIR CONDITIONER CONDENSER	09/16/93	SL	10.00		HY16	995.				995.	995.		0.	995.
	SHELVING	10/22/93	SL	10.00		HY16	400.				400.	400.		0.	400.
	BUILDING- BENEVA	03/29/01	SL	40.00		HY16	231,555.				231,555.	55,477.		5,789.	61,266.
	NEW ROOF- BENEVA	06/28/01	SL	15.00		HY16	11,359.				11,359.	6,751.		757.	7,508.
	ARCH SVCS- BENEVA	06/28/01	SL	40.00		HY16	2,360.				2,360.	536.		59.	595.
	BUILDING RENOVATIONS	06/30/02	SL	40.00		HY16	149,766.				149,766.	29,641.		3,744.	33,385.
	BESSIE BLDG IMPROVEMENTS	08/30/02	SL	40.00		HY16	7,511.				7,511.	1,456.		188.	1,644.
	PAINTING OF BESSIE BUILDING	08/29/03	SL	15.00		HY16	4,250.				4,250.	1,912.		283.	2,195.
	HURRICANE WINDOW FILM	07/14/05	SL	5.00		HY16	9,671.				9,671.	9,519.		163.	9,682.
	ROOF REPAIRS - SHEWSKI ROOFING	11/30/06	SL	39.00		MM16	2,540.				2,540.	228.		65.	293.
	(2) CABINETS W/COUNTER TOPS	04/27/07	SL	10.00		HY16	2,290.				2,290.	706.		229.	935.
	CONDENSING UNIT #110408	10/05/06	SL	10.00		HY16	1,864.				1,864.	683.		186.	869.
	CONDENSING UNIT #110409	10/05/06	SL	10.00		HY16	2,177.				2,177.	799.		218.	1,017.

2010 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	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
	AWNINGS - SUN STATE AWNINGS INC.	07/01/08	SL	5.00		HY16	3,400.				3,400.	1,247.		680.	1,927.
	BESSIE BLDG: BUILDING REMODEL	03/01/10	SL	40.00		HY16	103,964.				103,964.	650.		2,598.	3,248.
	ROOF REPLACEMENT	07/01/10	SL	15.00		HY16	23,820.				23,820.			1,456.	1,456.
	REMODEL 2011	04/01/11	SL	15.00		HY16	22,838.				22,838.			254.	254.
	REPLACE AC MOTOR	04/01/11	SL	10.00		HY16	740.				740.			12.	12.
	* 990 PAGE 10 TOTAL BUILDINGS						769,258.				769,258.	297,455.		16,746.	302,543.
	LAND														
	LAND IMPROVEMENTS	09/01/80	SL	15.00		HY16	15,252.				15,252.	15,252.		0.	15,252.
	LAND - BENEVA	03/29/01	L			HY	165,793.				165,793.			0.	
	LAND-BESSIE	09/01/80	L			HY	29,748.				29,748.			0.	
	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														
	DELL COMPUTER	08/08/00	SL	3.00		HY16	4,222.				4,222.	4,222.		0.	4,222.
	FILE CABINETS	09/01/80	SL	10.00		HY16	411.				411.	411.		0.	411.
	DELL COMPUTER	08/08/00	SL	3.00		HY16	3,710.				3,710.	3,710.		0.	3,710.
	TOSHIBA LAPTOP	08/08/00	SL	3.00		HY16	2,550.				2,550.	2,550.		0.	2,550.
	FILE CABINETS	09/01/81	SL	10.00		HY16	201.				201.	201.		0.	201.

2010 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	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
	CHAIR/3 FILE CABINETS	09/01/82	SL	10.00		HY16	408.				408.	408.		0.	408.
	CANNON COPIER C2100CS	04/14/00	SL	5.00		HY16	14,925.				14,925.	14,925.		0.	14,925.
	1 FILE CABINET	09/01/83	SL	10.00		HY16	110.				110.	110.		0.	110.
	GATEWAY COMPUTER	02/04/00	SL	3.00		HY16	4,105.				4,105.	4,105.		0.	4,105.
	1 FILE CABINET	09/01/85	SL	10.00		HY16	547.				547.	547.		0.	547.
	2 FILE CABINETS	09/01/85	SL	10.00		HY16	508.				508.	508.		0.	508.
	GATEWAY COMPUTER	02/04/00	SL	3.00		HY16	4,105.				4,105.	4,105.		0.	4,105.
	DELL COMPUTER	08/31/99	SL	5.00		HY16	2,843.				2,843.	2,843.		0.	2,843.
	WEB SERVER	08/31/99	SL	5.00		HY16	1,378.				1,378.	1,378.		0.	1,378.
	DESKS	08/31/99	SL	10.00		HY16	2,550.				2,550.	2,550.		0.	2,550.
	WEB SERVER	08/31/99	SL	5.00		HY16	9,976.				9,976.	9,976.		0.	9,976.
	2 DELL COMPUTERS	08/27/99	SL	5.00		HY16	7,985.				7,985.	7,985.		0.	7,985.
	WEB SERVER	07/06/99	SL	5.00		HY16	1,500.				1,500.	1,500.		0.	1,500.
	TABLE/FILE/CHAIR	09/01/87	SL	10.00		HY16	340.				340.	340.		0.	340.
	AMS SOFTWARE	05/20/99	SL	5.00		HY16	3,000.				3,000.	3,000.		0.	3,000.
	FILE CABINET	09/01/87	SL	10.00		HY16	31.				31.	31.		0.	31.
	1 BOOKCASE	09/01/88	SL	10.00		HY16	63.				63.	63.		0.	63.
	MICROWAVE	09/01/88	SL	5.00		HY16	81.				81.	81.		0.	81.

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	2 FILE CABINETS	09/01/88	SL	10.00		HY16	201.				201.	201.		0.	201.
	DELL COMPUTER	02/15/99	SL	5.00		HY16	3,563.				3,563.	3,563.		0.	3,563.
	VIDEO CARD	01/21/99	SL	5.00		HY16	1,137.				1,137.	1,137.		0.	1,137.
	CAMCORDER	01/06/99	SL	5.00		HY16	2,125.				2,125.	2,125.		0.	2,125.
	DRACO VIDEO EDITOR	12/10/98	SL	5.00		HY16	6,190.				6,190.	6,190.		0.	6,190.
	2 DELL COMPUTERS	09/18/98	SL	5.00		HY16	7,824.				7,824.	7,824.		0.	7,824.
	DELL COMPUTER -LAPTOP	08/31/98	SL	5.00		HY16	4,907.				4,907.	4,907.		0.	4,907.
	HP LASER PRINTER	08/31/98	SL	5.00		HY16	3,291.				3,291.	3,291.		0.	3,291.
	AMS SOFTWARE	08/25/98	SL	5.00		HY16	4,536.				4,536.	4,536.		0.	4,536.
	AMS SOFTWARE	04/04/98	SL	5.00		HY16	5,334.				5,334.	5,334.		0.	5,334.
	MEMBERSHIP & ACCOUNTING SOFTWARE	08/11/97	SL	5.00		HY16	20,370.				20,370.	20,370.		0.	20,370.
	DELL PC & MONITOR	08/29/97	SL	5.00		HY16	3,476.				3,476.	3,476.		0.	3,476.
	NETWORK SERVER	08/08/97	SL	5.00		HY16	8,590.				8,590.	8,590.		0.	8,590.
	COMPUTER NETWORK	04/24/97	SL	5.00		HY16	5,756.				5,756.	5,756.		0.	5,756.
	NEC NOTEBOOK COMPUTER	11/11/96	SL	5.00		HY16	4,878.				4,878.	4,878.		0.	4,878.
	(D)CONFERENCE CHAIRS	06/15/96	SL	7.00		HY16	2,555.				2,555.	2,555.		0.	
	STACKING CHAIRS	06/15/96	SL	7.00		HY16	423.				423.	423.		0.	423.
	CABINETS	06/15/96	SL	7.00		HY16	1,702.				1,702.	1,702.		0.	1,702.

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	EXEC. DIR. DESK	05/15/96	SL	7.00		HY16	406.				406.	406.		0.	406.
	(D)CONFERENCE TABLE	01/15/96	SL	7.00		HY16	423.				423.	423.		0.	
	PUBLISHING COMPUTER	08/15/96	SL	5.00		HY16	15,334.				15,334.	15,334.		0.	15,334.
	PRINTER & SCANNER	01/15/96	SL	5.00		HY16	926.				926.	926.		0.	926.
	EXTRAWEB SOFTWARE	08/31/01	SL	3.00		HY16	99,390.				99,390.	99,390.		0.	99,390.
	PRINTER	08/15/95	SL	5.00		HY16	321.				321.	321.		0.	321.
	CANNON FAX	06/15/96	SL	5.00		HY16	3,130.				3,130.	3,130.		0.	3,130.
	COMPUTER WORKCENTER (MYRTLE'S)	08/07/93	SL	10.00		HY16	181.				181.	181.		0.	181.
	PRINTER STAND (MYRTLE'S OFFICE)	08/07/93	SL	10.00		HY16	96.				96.	96.		0.	96.
	CHAIR-TEAL (MYRTLE'S OFFICE)	08/07/93	SL	10.00		HY16	214.				214.	214.		0.	214.
	DESK 30 X 60 (MYRTLE'S OFFICE)	08/07/93	SL	10.00		HY16	181.				181.	181.		0.	181.
	BOOKCASE-OAK (MYRTLE'S OFFICE)	08/07/93	SL	10.00		HY16	52.				52.	52.		0.	52.
	IBM LASER PRINTER 4039 10R	08/15/93	SL	5.00		HY16	2,671.				2,671.	2,671.		0.	2,671.
	FILING CABINET (MYRTLE'S OFFICE)	08/15/93	SL	10.00		HY16	118.				118.	118.		0.	118.
	PORTABLE PRINTER	02/15/96	SL	5.00		HY16	451.				451.	451.		0.	451.
	COMPUTER MONITORS	01/01/96	SL	5.00		HY16	1,496.				1,496.	1,496.		0.	1,496.
	ADOBE S/W	11/17/00	SL	3.00		HY16	1,817.				1,817.	1,817.		0.	1,817.
	DELL SERVER	11/17/00	SL	3.00		HY16	11,949.				11,949.	11,949.		0.	11,949.

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	GATEWAY PC	11/17/00	SL	3.00		HY16	5,003.				5,003.	5,003.		0.	5,003.
	GATEWAY PC	11/17/00	SL	3.00		HY16	5,003.				5,003.	5,003.		0.	5,003.
	SONY VAIO COMPUTER	11/30/00	SL	3.00		HY16	3,380.				3,380.	3,380.		0.	3,380.
	MAVICA DIGITAL CAMERA	11/30/00	SL	3.00		HY16	2,781.				2,781.	2,781.		0.	2,781.
	ACE SERVER	12/14/00	SL	3.00		HY16	2,500.				2,500.	2,500.		0.	2,500.
	ADOBE SOFTWARE	01/31/01	SL	3.00		HY16	2,299.				2,299.	2,299.		0.	2,299.
	DELL LAPTOP	02/28/01	SL	3.00		HY16	3,816.				3,816.	3,816.		0.	3,816.
	AMS UPGRADE	03/22/01	SL	3.00		HY16	9,942.				9,942.	9,942.		0.	9,942.
	FIREWALL	08/31/01	SL	3.00		HY16	5,000.				5,000.	5,000.		0.	5,000.
	COLD FUSION S/W	05/25/01	SL	3.00		HY16	1,667.				1,667.	1,667.		0.	1,667.
	INFOCAN WEB SITE	10/31/01	SL	3.00		HY16	26,325.				26,325.	26,325.		0.	26,325.
	ROLAND OFFICE FURN	03/31/02	SL	7.00		HY16	2,472.				2,472.	2,472.		0.	2,472.
	FURNITURE	03/31/02	SL	7.00		HY16	2,414.				2,414.	2,414.		0.	2,414.
	FAX/COPIER BENEVA	04/30/02	SL	5.00		HY16	358.				358.	358.		0.	358.
	MICROWAVE	04/30/02	SL	5.00		HY16	177.				177.	177.		0.	177.
	SERVER RACKS	04/30/02	SL	5.00		HY16	742.				742.	742.		0.	742.
	SOFA	04/30/02	SL	5.00		HY16	732.				732.	732.		0.	732.
	TABLE	04/30/02	SL	5.00		HY16	121.				121.	121.		0.	121.

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	CYLINDER TABLE	04/30/02	SL	5.00		HY16	92.				92.	92.		0.	92.
	MISC FURNITURE	04/30/02	SL	5.00		HY16	258.				258.	258.		0.	258.
	NETWORKING	12/31/01	SL	5.00		HY16	5,780.				5,780.	5,780.		0.	5,780.
	MISC	08/31/02	SL	3.00		HY16	1,734.				1,734.	1,734.		0.	1,734.
	RICOH COPIER	04/09/03	SL	5.00		HY16	3,400.				3,400.	3,400.		0.	3,400.
	LABEL PRINTER	12/30/02	SL	3.00		HY16	5,392.				5,392.	5,392.		0.	5,392.
	EXTRAWEB SYSTEM	12/05/02	SL	3.00		HY16	9,450.				9,450.	9,450.		0.	9,450.
	LIGHTSPEED SYSTEM	04/09/03	SL	3.00		HY16	900.				900.	900.		0.	900.
	NEOPOST FOLDER/STUFFER	09/24/03	SL	5.00		HY16	4,895.				4,895.	4,895.		0.	4,895.
	DELL LATITUDE LAPTOP	01/14/04	SL	3.00		HY16	2,679.				2,679.	2,679.		0.	2,679.
	DELL DIMENSION XPS DESKTOP	12/08/03	SL	3.00		HY16	2,004.				2,004.	2,004.		0.	2,004.
	2 DELL DIMENSION XPS DESKTOPS	06/11/04	SL	3.00		HY16	5,154.				5,154.	5,154.		0.	5,154.
	IBM THINKPAD & ACCESSORIES	07/14/04	SL	3.00		HY16	4,088.				4,088.	4,088.		0.	4,088.
	LIGHTNING & SURGE PROTECTION	06/15/04	SL	3.00		HY16	4,438.				4,438.	4,438.		0.	4,438.
	DELL LATITUDE LAPTOP COMPUTER	03/31/05	SL	3.00		HY16	2,175.				2,175.	2,175.		0.	2,175.
	2 DELL DIMENSION XPS DESKTOPS	12/17/04	SL	3.00		HY16	5,282.				5,282.	5,282.		0.	5,282.
	DELL SERVER	08/25/05	SL	5.00		HY16	12,438.				12,438.	11,818.		620.	12,438.
	LENOVO THINK PAD T43P	08/30/06	SL	3.00		HY16	3,688.				3,688.	3,687.		0.	3,687.

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	CLEARVANTAGE SOFTWARE-INCLUSIVE OF TRAINING	03/01/07	SL	5.00	HY16	197,432.				197,432.	128,330.		39,486.	167,816.
	DELL PRECISION M65 SYSTEM, 15.4 INCH LCD	11/07/06	SL	3.00	HY16	3,352.				3,352.	3,351.		0.	3,351.
	DELL POWER EDGE 2900 SYSTEM XPS 710 BLACK W/20" ULTRASHARP MONITOR	12/07/06	SL	3.00	HY16	9,951.				9,951.	9,951.		0.	9,951.
	ZIPCODE SEARCH SOFTWARE	02/19/07	SL	5.00	HY16	40.				40.	26.		8.	34.
	OPTIPLEX 745 ULTRA SMALL FORM FACTOR SYSTEM	03/02/07	SL	3.00	HY16	1,307.				1,307.	1,307.		0.	1,307.
	OPTIPLEX 745 ULTRA SMALL FORM FACTOR SYSTEM	03/02/07	SL	3.00	HY16	1,293.				1,293.	1,293.		0.	1,293.
	MICROSOFT SQL SERVER 2000 LICENSE (QTY OF 20)	12/07/06	SL	3.00	HY16	3,050.				3,050.	3,050.		0.	3,050.
	MICROSOFT SQL SERVER 2000 SERVICE PACK FOR SERVER	12/07/06	SL	5.00	HY16	827.				827.	578.		165.	743.
	SOFTWARE/ACQUISITION CONSULTING	03/01/07	SL	5.00	HY16	32,250.				32,250.	20,963.		6,449.	27,412.
	DELL LASER PRINTER 1710N	04/14/07	SL	3.00	HY16	240.				240.	240.		0.	240.
	DESK	01/01/08	SL	7.00	HY16	1,109.				1,109.	383.		158.	541.
	CANON IRC5185I COPIER	03/01/08	SL	5.00	HY16	15,000.				15,000.	6,750.		3,000.	9,750.
	2- DELL COMPUTER	12/01/07	SL	5.00	HY16	1,982.				1,982.	990.		396.	1,386.
	DELL COMPUTER	12/01/07	SL	5.00	HY16	991.				991.	496.		198.	694.
	DELL 20" MONITOR	12/01/07	SL	5.00	HY16	469.				469.	234.		94.	328.
	CDW SONY LAPTOP	01/01/08	SL	5.00	HY16	4,201.				4,201.	2,030.		840.	2,870.
	2 - DELL MONITORS	02/01/08	SL	5.00	HY16	844.				844.	394.		169.	563.

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	COMPUTER EQUIPMENT	03/01/08	SL	5.00		HY16	4,811.				4,811.	2,165.		962.	3,127.
	7 - CDW ADOBE CREATIVE SOFTWARE	11/01/07	SL	3.00		HY16	3,548.				3,548.	2,661.		887.	3,548.
	1- CDW ADOBE COLD FUSION SOFTWARE	11/01/07	SL	3.00		HY16	871.				871.	653.		218.	871.
	25 CDW OFFICE 2007 LICENSE	04/01/08	SL	3.00		HY16	2,203.				2,203.	1,591.		612.	2,203.
	16- APC BACKUPS	05/01/08	SL	5.00		HY16	1,894.				1,894.	789.		379.	1,168.
	2- DELL 20" MONITORS	05/01/08	SL	5.00		HY16	798.				798.	333.		160.	493.
	1- DELL COMPUTER	05/01/08	SL	5.00		HY16	1,718.				1,718.	717.		344.	1,061.
	DELL OPTIPLEX WORKSTATION	08/01/08	SL	5.00		HY16	1,200.				1,200.	440.		240.	680.
	DELL 20" ULTRASHARP MONITOR	08/01/08	SL	5.00		HY16	399.				399.	147.		80.	227.
	RHLE DIRECTORY DATA FILES FOR ACCESS DATABASE	08/01/08	SL	3.00		HY16	7,500.				7,500.	4,583.		2,500.	7,083.
	TWO BLUE FABRIC CHAIRS	10/01/08	SL	7.00		HY16	295.				295.	71.		42.	113.
	DELL OPTIPLEX WORKSTATION	09/01/08	SL	5.00		HY16	1,219.				1,219.	427.		244.	671.
	20" DELL MONITOR 2007FP ULTRASHART	09/01/08	SL	5.00		HY16	439.				439.	154.		88.	242.
	DELL LATITUDE LAPTOP	10/01/08	SL	5.00		HY16	1,555.				1,555.	518.		311.	829.
	DELL POWEREDGE SERVER SC 440	11/01/08	SL	5.00		HY16	2,370.				2,370.	750.		474.	1,224.
	DELL OPTIPLEX WORKSTATION	11/01/08	SL	5.00		HY16	1,109.				1,109.	351.		222.	573.
	DELL OPTIPLEX WORKSTATION	11/01/08	SL	5.00		HY16	1,103.				1,103.	349.		221.	570.
	DELL VOSTROS LAPTOP	12/01/08	SL	5.00		HY16	3,613.				3,613.	1,084.		723.	1,807.

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	PING FEDERATE 2 SERVER LICENSE FOR AAA COMMONS	12/01/08	SL	5.00			27,000.				27,000.	8,100.		5,400.	13,500.
	DELL OPTIPLEX WORKSTATION	01/01/09	SL	5.00			1,378.				1,378.	391.		276.	667.
	DELL LATITUDE LAPTOP	02/01/09	SL	5.00			1,579.				1,579.	421.		316.	737.
	DELL LATITUDE LAPTOP S0#21428 FOR WEB	04/01/09	SL	5.00			1,671.				1,671.	390.		334.	724.
	DELL LATITUDE LAPTOP FOR COO	05/01/09	SL	5.00			1,591.				1,591.	345.		318.	663.
	DELL MONITOR	06/01/09	SL	5.00			331.				331.	67.		66.	133.
	10 DELL 20" FLAT SCREEN MONITORS	08/01/09	SL	5.00			3,335.				3,335.	556.		667.	1,223.
	DELL LATITUDE E6500 LAPTOP	08/01/09	SL	5.00			1,584.				1,584.	264.		317.	581.
	DELL LATITUDE E6500 LAPTOP	08/01/09	SL	5.00			1,584.				1,584.	264.		317.	581.
	DELL OPTIPLEX 760 WORKSTATION	08/01/09	SL	5.00			822.				822.	137.		164.	301.
	LASER JET PRINTER P2055D	08/01/09	SL	5.00			975.				975.	162.		195.	357.
	DELL SERVER T410	10/01/09	SL	5.00			5,397.				5,397.	720.		1,079.	1,799.
	LASER JET PRINTER P2055D/ FINANCE	11/01/09	SL	5.00			460.				460.	54.		92.	146.
	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00			208.				208.	10.		42.	52.
	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00			208.				208.	10.		42.	52.
	DELL MONITOR 19" FINANCE	03/01/10	SL	5.00			208.				208.	10.		42.	52.
	BESSIE BLDG: REFRIGERATOR	03/01/10	SL	3.00			2,135.				2,135.	178.		712.	890.
	BESSIE BLDG: ADMIN LAPTOP	04/01/10	SL	5.00			1,288.				1,288.	43.		258.	301.

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	BESSIE BLDG: EXEC DIRECTOR MAC COMP	03/01/10	SL	5.00		HY16	2,701.				2,701.	135.		540.	675.
	GREAT PLAINS 10.0 SOFTWARE	04/01/10	SL	5.00		HY16	13,600.				13,600.	453.		2,720.	3,173.
	CV/AAA COMMONS SINGLE SIGN ON SOFTWARE	03/01/10	SL	5.00		HY16	47,069.				47,069.	2,353.		9,414.	11,767.
	DELL OPTIPLEX WORKSTATION	06/01/10	SL	5.00		HY16	950.				950.			190.	190.
	DELL OPTIPLEX WORKSTATION	06/01/10	SL	5.00		HY16	950.				950.			190.	190.
	DELL OPTIPLEX WORKSTATION	06/01/10	SL	5.00		HY16	950.				950.			190.	190.
	HP COLOR LASERJET CP1518	06/01/10	SL	5.00		HY16	432.				432.			86.	86.
	HP COLOR LASERJET CP1518	06/01/10	SL	5.00		HY16	432.				432.			86.	86.
	MICROWAVE & HOOD	07/01/10	SL	3.00		HY16	316.				316.			97.	97.
	STOVE	07/01/10	SL	3.00		HY16	622.				622.			190.	190.
	DISHWASHER	07/01/10	SL	3.00		HY16	795.				795.			243.	243.
	36X72 U SHAPED ARC FRONT DESK GROUPING	07/01/10	SL	7.00		HY16	1,509.				1,509.			198.	198.
	36X72 U SHAPED ARC FRONT DESK GROUPING	07/01/10	SL	7.00		HY16	1,509.				1,509.			198.	198.
	36X72 U SHAPED ARC FRONT DESK GROUPING	07/01/10	SL	7.00		HY16	1,509.				1,509.			198.	198.
	SHARK TOOTH DESK	07/01/10	SL	7.00		HY16	1,466.				1,466.			192.	192.
	96" HUTCH WITH DOORS	07/01/10	SL	7.00		HY16	982.				982.			129.	129.
	96" HUTCH WITH DOORS	07/01/10	SL	7.00		HY16	982.				982.			129.	129.
	96" HUTCH WITH DOORS	07/01/10	SL	7.00		HY16	982.				982.			129.	129.

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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
	96" HUTCH WITH DOORS	07/01/10	SL	7.00			982.				982.			129.	129.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	36" WIDE 4 DRAWER LATERAL	07/01/10	SL	7.00			959.				959.			126.	126.
	36" WIDE 4 DRAWER LATERAL	07/01/10	SL	7.00			959.				959.			126.	126.
	36" WIDE 4 DRAWER LATERAL	07/01/10	SL	7.00			959.				959.			126.	126.
	36" WIDE 4 DRAWER LATERAL	07/01/10	SL	7.00			959.				959.			126.	126.
	TASK CHAIR	07/01/10	SL	7.00			376.				376.			49.	49.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.
	GUEST CHAIR	07/01/10	SL	7.00			255.				255.			33.	33.

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Asset No.	Description	Date Acquired	Method	Life	Conv 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
	ADDITIONAL GUEST CHAIR	07/01/10	SL	7.00	HY16	250.				250.			33.	33.
	TACK BOARDS FOR HUTCHES IN NEW DESKS	07/01/10	SL	7.00	HY16	238.				238.			31.	31.
	TACK BOARDS FOR HUTCHES IN NEW DESKS	07/01/10	SL	7.00	HY16	238.				238.			31.	31.
	TACK BOARDS FOR HUTCHES IN NEW DESKS	07/01/10	SL	7.00	HY16	238.				238.			31.	31.
	TACK BOARDS FOR HUTCHES IN NEW DESKS	07/01/10	SL	7.00	HY16	238.				238.			31.	31.
	BOOKCASE	07/01/10	SL	7.00	HY16	997.				997.			131.	131.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCHES	07/01/10	SL	7.00	HY16	151.				151.			20.	20.
	TACK BOARDS FOR EXISTING HUTCH	07/01/10	SL	7.00	HY16	238.				238.			31.	31.
	TACK BOARDS FOR EXISTING HUTCH	07/01/10	SL	7.00	HY16	173.				173.			23.	23.
	CONFERENCE TABLE	07/01/10	SL	7.00	HY16	2,636.				2,636.			345.	345.

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Asset No.	Description	Date Acquired	Method	Life	Conv	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
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.
	CONFERENCE CHAIRS	07/01/10	SL	7.00		HY16	298.				298.			39.	39.

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Asset No.	Description	Date Acquired	Method	Life	Conv 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
	KITCHEN, SOUTH WALL CABINETS	07/01/10	SL	7.00	HY16	3,483.				3,483.			456.	456.
	SERVER DRIVES	09/01/10	SL	5.00	HY16	624.				624.			94.	94.
	CV 2 ADDITIONAL LIC FEES	11/01/10	SL	5.00	HY16	5,600.				5,600.			653.	653.
	CD 7.7 & WEB 3.0.0 UPGRADE	12/01/10	SL	5.00	HY16	11,880.				11,880.			1,188.	1,188.
	A/C UNIT	06/01/10	SL	10.00	HY16	4,069.				4,069.			407.	407.
	BLINDS IN OFFICES & CONF ROOM	03/01/10	SL	7.00	HY16	4,059.				4,059.	147.		580.	727.
	EXEC DIR DESK	03/01/10	SL	7.00	HY16	1,380.				1,380.	49.		197.	246.
	EXEC DIR HUTCH	03/01/10	SL	7.00	HY16	506.				506.	18.		72.	90.
	EXEC DIR CONF TABLE	03/01/10	SL	7.00	HY16	506.				506.	18.		72.	90.
	EXEC DIR EXECUTIVE CHAIR	03/01/10	SL	7.00	HY16	497.				497.	18.		71.	89.
	EXEC DIR GUEST CHAIRS (4)	03/01/10	SL	7.00	HY16	1,020.				1,020.	36.		146.	182.
	COO DESK	03/01/10	SL	7.00	HY16	1,379.				1,379.	49.		197.	246.
	COO HUTCH	03/01/10	SL	7.00	HY16	935.				935.	33.		134.	167.
	COO LATERAL FILE	03/01/10	SL	7.00	HY16	482.				482.	17.		69.	86.
	COO EXECUTIVE CHAIR	03/01/10	SL	7.00	HY16	497.				497.	18.		71.	89.
	COO GUEST CHAIRS (2)	03/01/10	SL	7.00	HY16	510.				510.	18.		73.	91.
	ADMIN DESK GROUPING	03/01/10	SL	7.00	HY16	1,321.				1,321.	47.		189.	236.
	ADMIN LATERAL FILE	03/01/10	SL	7.00	HY16	482.				482.	17.		69.	86.

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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
	ADMIN TASK CHAIR	03/01/10	SL	7.00		HY16	376.				376.	13.		54.	67.
	ADMIN GUEST CHAIRS (2)	03/01/10	SL	7.00		HY16	510.				510.	18.		73.	91.
	CONFERENCE ROOM TABLES (3)	03/01/10	SL	7.00		HY16	1,347.				1,347.	48.		192.	240.
	CONFERENCE ROOM CHAIRS (8)	03/01/10	SL	7.00		HY16	2,384.				2,384.	85.		341.	426.
	CONFERENCE ROOM VISUAL BOARD	03/01/10	SL	7.00		HY16	1,037.				1,037.	37.		148.	185.
	MEMBERSHIP STAFF AREA DESKS (2)	03/01/10	SL	7.00		HY16	2,424.				2,424.	87.		346.	433.
	MEMBERSHIP STAFF WORKSURFACE	03/01/10	SL	7.00		HY16	336.				336.	12.		48.	60.
	MEMBERSHIP STAFF TASK CHAIRS	03/01/10	SL	7.00		HY16	752.				752.	27.		107.	134.
	MEMBERSHIP STAFF GUEST CHAIR	03/01/10	SL	7.00		HY16	250.				250.	9.		36.	45.
	MEMBERSHIP STAFF DESKS (3)	03/01/10	SL	7.00		HY16	3,636.				3,636.	130.		519.	649.
	MEMBERSHIP STAFF LATERAL FILE	03/01/10	SL	7.00		HY16	336.				336.	12.		48.	60.
	MEMBERSHIP STAFF HUTCHES (3)	03/01/10	SL	7.00		HY16	4,320.				4,320.	154.		617.	771.
	MEMBERSHIP STAFF TASK CHAIRS	03/01/10	SL	7.00		HY16	1,128.				1,128.	40.		161.	201.
	MEMBERSHIP STAFF GUEST CHAIRS	03/01/10	SL	7.00		HY16	810.				810.	29.		116.	145.
	WEB STAFF AREA DESKS (4)	03/01/10	SL	7.00		HY16	4,848.				4,848.	173.		693.	866.
	WEB STAFF AREA HUTCHES (4)	03/01/10	SL	7.00		HY16	1,920.				1,920.	69.		274.	343.
	WEB STAFF AREA TASK CHAIRS (4)	03/01/10	SL	7.00		HY16	1,504.				1,504.	54.		215.	269.
	RECEPTION ROOM SIDE CHAIRS (2)	03/01/10	SL	7.00		HY16	1,130.				1,130.	40.		161.	201.

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Asset No.	Description	Date Acquired	Method	Life	Conv	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
	RECEPTION ROOM END TABLE	03/01/10	SL	7.00		HY16	250.				250.	9.		36.	45.
	RECEPTION RM LITERATURE CONSOLE	03/01/10	SL	7.00		HY16	250.				250.	9.		36.	45.
	KITCHEN NORTH WALL CABINET	03/01/10	SL	7.00		HY16	4,263.				4,263.	152.		609.	761.
	A/C IMPROVEMENTS	04/13/00	SL	7.00		HY16	7,754.				7,754.	7,754.		0.	7,754.
	AIR HANDLER	02/23/01	SL	7.00		HY16	2,189.				2,189.	2,189.		0.	2,189.
	AIR HANDLER- BESSIE	06/30/02	SL	10.00		HY16	1,800.				1,800.	1,425.		180.	1,605.
	AIR HANDLER	10/30/03	SL	5.00		HY16	1,936.				1,936.	1,936.		0.	1,936.
	A/C BENEVA RD	04/01/08	SL	10.00		HY16	5,470.				5,470.	1,185.		547.	1,732.
	AIR HANDLER	10/01/07	SL	10.00		HY16	1,888.				1,888.	504.		189.	693.
	* 990 PAGE 10 TOTAL OTHER						997,850.				997,850.	671,848.		99,241.	768,111.
	* 990 PAGE 10 TOTAL - TELEPHONE						1,982,176.				1,982,176.	988,830.		115,987.	1,090,181.
	OTHER														
	PHONE SYSTEM	05/22/01	SL	7.00		HY16	22,500.				22,500.	22,500.		0.	22,500.
	PHONE SYSTEM	03/31/02	SL	7.00		HY16	2,428.				2,428.	2,428.		0.	2,428.
	PHONE SYSTEM	11/01/07	SL	7.00		HY16	6,215.				6,215.	2,294.		888.	3,182.
	* 990 PAGE 10 TOTAL OTHER						31,143.				31,143.	27,222.		888.	28,110.
	* 990 PAGE 10 TOTAL - TELEPHONE						31,143.				31,143.	27,222.		888.	28,110.
	* GRAND TOTAL 990 PAGE 10 DEPR						2,013,319.				2,013,319.	1,016,052.		116,875.	1,118,291.

Depreciation and Amortization 990
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

AMERICAN ACCOUNTING ASSOCIATION

FORM 990 PAGE 10

39-6030166

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	116,875.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year	/	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	116,875.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

26 Property used more than 50% in a qualified business use:

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
	:	%						
	:	%						
	:	%						

27 Property used 50% or less in a qualified business use:

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
	:	%				S/L -		
	:	%				S/L -		
	:	%				S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 **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. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	------------------------------	------------------------	---	--------------------------------------

42 Amortization of costs that begins during your 2010 tax year:

(a)	(b)	(c)	(d)	(e)	(f)
	:				
	:				

43 Amortization of costs that began before your 2010 tax year **43**

44 Total. Add amounts in column (f). See the instructions for where to report **44**