

Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2008**Open to Public Inspection**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)

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

A For the 2008 calendar year, or tax year beginning , 2008, and ending , 20	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ANIMAL SANCTUARY OF THE UNITED STATES Doing Business As THE WILD ANIMAL ORPHANGE Number and street (or P.O. box if mail is not delivered to street address) Room/suite 9626 LESLIE RD City or town, state or country, and ZIP + 4 SAN ANTONIO, TX 78254
	D Employer identification number 74 2489271
	E Telephone number (210) 688-9038
	G Gross receipts \$ 1,294,700
	F Name and address of principal officer: CAROL ASVESTAS 9488 LESLIE RD SAN ANTONIO, TX 78254
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 ▶	
I Tax-exempt status <input type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶	
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of formation. 1983	
M State of legal domicile	

Part I Summary		
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CARE AND UPKEEP OF UNWANTED AND/OR ABANDONED WILD AND TO EDUCATE THE GENERAL PUBLIC BY WAY OF MAIL OUTS, FACILITY TOURS AND CLASSROOM INSTRUCTIONS ABOUT THE CARE AND UPKEEP OF THESE ANIMALS WHERE THEY COME FROM HOW THEY WERE RECEIVED AT THE FACILITY AND THEIR FUTURE FATE	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
	3 Number of voting members of the governing body (Part VI, line 1a) 3	
	4 Number of independent voting members of the governing body (Part VI, line 1b) 6	
	5 Total number of employees (Part V, line 2a) 20	
	6 Total number of volunteers (estimate if necessary) 12	
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a	
	b Net unrelated business taxable income from Form 990-T, line 34. 7b	
	Revenue	8 Contributions and grants (Part VIII, line 1h) 1,144,982
		9 Program service revenue (Part VIII, line 2g) 14,128
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 519		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8a, 8c, 10, and 11e) 5,333		
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,164,962		
12,700,880		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	
	16a Professional fundraising fees (Part IX, column (A), line 11e) 127,809	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 127,809	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) 1,317,947	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 1,475,882		
19 Revenue less expenses. Subtract line 18 from line 12 -310,920		
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 1,267,382	
	21 Total liabilities (Part X, line 26) 302,714	
	22 Net assets or fund balances. Subtract line 21 from line 20 964,668	
22,900,981		

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 N. Garcia Date 11/16/2009	Type or print name and title NICOLE GARCIA C.E.O
Preparer's signature John Savickas Date 11/16/09 Check if self-employed <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions) 023-30-7763 EIN ▶ 06 1664243 Phone no. ▶ (210) 680-7052
Firm's name (or yours if self-employed), address, and ZIP + 4 JOHN SAVICKAS	
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2008)

ORIGINAL

SCANNED DEC 07 2009

Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

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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 ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(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 \$ including grants of \$) (Revenue \$)

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4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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4d Other program services. (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	<input type="checkbox"/>	<input type="checkbox"/>
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule F, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	<input type="checkbox"/>	<input type="checkbox"/>
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? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<input type="checkbox"/>	<input type="checkbox"/>
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		✓
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>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
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>		✓
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>		✓
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>		✓
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
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>		✓
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>		✓

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	25
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	✓
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	✓
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	✓
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	✓
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

	Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		
1a Enter the number of voting members of the governing body	1a	5
b Enter the number of voting members that are independent	1b	5
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?	2	<input checked="" type="checkbox"/>
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?	3	<input checked="" type="checkbox"/>
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	<input checked="" type="checkbox"/>
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	<input checked="" type="checkbox"/>
6 Does the organization have members or stockholders?	6	<input checked="" type="checkbox"/>
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	<input checked="" type="checkbox"/>
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<input checked="" type="checkbox"/>
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	
b Each committee with authority to act on behalf of the governing body?	8b	
9a Does the organization have local chapters, branches, or affiliates?	9a	
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?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<input checked="" type="checkbox"/>
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<input checked="" type="checkbox"/>
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	<input checked="" type="checkbox"/>
13 Does the organization have a written whistleblower policy?	13	<input checked="" type="checkbox"/>
14 Does the organization have a written document retention and destruction policy?	14	<input checked="" type="checkbox"/>
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?	15a	<input checked="" type="checkbox"/>
b Other officers or key employees of the organization?	15b	<input checked="" type="checkbox"/>
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?	16a	<input checked="" type="checkbox"/>
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?	16b	<input checked="" type="checkbox"/>

Section C. Disclosure

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

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: ▶

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	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions).	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f. \$						
	h Total. Add lines 1a-1f ▶						
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶						
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6a Gross Rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a						
	b Less: direct expenses b						
	c Net income or (loss) from fundraising events ▶						
	9a Gross income from gaming activities. See Part IV, line 19 a						
	b Less: direct expenses b						
	c Net income or (loss) from gaming activities ▶						
	10a Gross sales of inventory, less returns and allowances a						
	b Less: cost of goods sold b						
c Net income or (loss) from sales of inventory ▶							
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d ▶							
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶							

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	5,793			
5 Compensation of current officers, directors, trustees, and key employees	-296,468			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	22,680			
11 Fees for services (non-employees):				
a Management				
b Legal	7,060			
c Accounting	3,845			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	7,109			
12 Advertising and promotion	13,982			
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	35,319			
17 Travel	2,567			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,021			
20 Interest	25,520			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	176,541			
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a ANIMAL CARE/VETS/FOOD	88,071			
b ANIMAL HAULING	56,803			
c AUTO	47,607			
d GENERAL PUBLIC EDUCATION	426,030			
e PROPERTY MAINTENANCE/REPAIRS	68,724			
f All other expenses SCHEDULE	47,527			
25 Total functional expenses. Add lines 1 through 24f				
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 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	5,441	1	12,239
	2 Savings and temporary cash investments	30,320	2	49,946
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	25,389	5	25,389
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	11,273	8	13,920
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis 10a 3,230,416			
	b Less: accumulated depreciation. Complete Part VI of Schedule D 10b 2,161,779	1,194,959	10c	1,068,637
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,267,382	16	1,170,131	
Liabilities	17 Accounts payable and accrued expenses	41,208	17	20,780
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow 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	261,506	23	248,370
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	302,714	26	269,150
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	964,668	27	900,981
	28 Temporarily restricted net assets		28	
	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		33	
	34 Total liabilities and net assets/fund balances	1,267,382	34	1,170,131

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990. ☐ Cash ☐ Accrual ☐ Other
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to lines 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?
- 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?
- b** If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		
2b		
2c		
3a		
3b		

ANIMAL SANCTUARY OF THE UNITED STATES				74-2489271		
Part II - Statement of Functional Expenses						
Line 42 - Depreciation						
SCHEDULE 3						
		Date	Method/	Prior Years	Current	Accum
	Cost	Purch	Life	Depreciation	Depreciation	Depreciation
Vehicles						
Horse Trailer	700	6/16/1995	S/L 5 yrs	700		700
Trailer	2,112	3/10/1997	S/L 7 Yrs	2,112		2,112
Flatbed	500	3/4/1997	S/L 7 Yrs	500		500
1998 Ford Explorer	27,752	7/14/2000	S/L 5 yrs	27,752		27,752
Kawasaki Utility Cart	4,410	7/1/2001	S/L 5 yrs	4,410		4,410
2001 Kawasaki Mule	7,000	7/13/2001	S/L 5 yrs	7,000		7,000
1997 Trolley	6,000	7/13/2001	S/L 5 yrs	6,000		6,000
Kubota Tractor	12,705	7/5/2002	S/L 5 yrs	11,825	880	12,705
40' Transport	3,000	10/16/2003	S/L 5 yrs	2,550	450	3,000
USPS Van	1,000	8/2/2003	S/L 5 yrs	883	117	1,000
Taoyota Four Runner	11,513	10/1/2003	S/L 5 yrs	9,788	1,725	11,513
1959 Dump Truck IFAW	7,354	1/26/2004	S/L 5 yrs	5,884	1,470	7,354
Flatbed Trailers	500	8/18/2004	S/L 5 yrs	367	100	467
Cargo Van	9,772	12/1/2003	S/L 5 yrs	7,979	1,793	9,772
1983 International Cab Tractor/Trailer	4,845	11/6/2005	S/L 5 yrs	1,131	969	2,100
1991 F250 Pick up Ranch Truck	4,000	3/1/2006	S/L 5 yrs	1,467	800	2,267
1999 F350 Pick up Diully Beige	17,000	5/1/2006	S/L 5 yrs	5,383	3,400	8,783
2003 Ford Expedition SUV	21,446	8/1/2006	S/L 5 yrs	6,076	4,289	10,365
2003 F350 Pick Up	27,007	9/1/2006	S/L 5 yrs	7,201	5,401	12,602
2002 F350 Silver Dually	25,000	12/1/2006	S/L 5 yrs	5,417	5,000	10,417
1994 Ford F450	3,000	3/10/2006	S/L 5 yrs	1,100	600	1,700
1998 Wells Cargo 40" Trailer	6,300	8/1/2005	S/L 5 yrs	1,785	1,260	3,045
2000 Appalachian 52' Flatbed	8,000	8/1/2006	S/L 5 yrs	2,267	1,600	3,867
2 John Deer Gtors W/Canopy	11,631	3/3/2007	S/L 5 yrs	1,939	2,626	4,565
Skidloader	13,000	1/4/2005	S/L 5 yrs	7,800	2,600	10,400
8' Goosneck Trao:er	2,100	9/3/2008	S/L 5 yrs		140	140
2005 Dually White	30,018	10/28/2008	S/L 5 yrs		1,501	1,501
John Deere Gator	5,900	11/28/2008	S/L 5 yrs		197	197
36' Trailer	8,000	12/18/2008	S/L 5 yrs		133	133
Total Vehicles	281,565			129,316	37,051	166,367
Buildings/Cages						
Monkey Cage	6,000	9/30/1992	S/L 7 Yrs	6,000		6,000
Perimeter Fence	36,038	6/30/1992	S/L 7 Yrs	36,038		36,038
Monkey Dome	5,358	3/31/1992	S/L 7 Yrs	5,358		5,358
Quarantine/Primate	8,067	10/1/1993	S/L 7 Yrs	8,067		8,067
Greenhouse Primate	7,300	10/1/1993	S/L 7 Yrs	7,300		7,300
Cages 1994	48,999	6/30/1994	S/L 7 Yrs	48,999		48,999
Cages 1995	15,395	12/1/1995	S/L 7 Yrs	15,395		15,395

Cages 1996	31,279	6/15/1996	S/L 7 Yrs	31,279		31,279
Steel Indoor Cages	15,000	3/15/1998	S/L 7 Yrs	15,000		15,000
Chimp Cages	140,000	3/15/1998	S/L 7 Yrs	140,000		140,000
32 Squeeze Back Cages	32,000	3/15/1998	S/L 7 Yrs	32,000		32,000
Heating/Air Cond. Unit	15,000	6/15/1998	S/L 7 Yrs	15,000		15,000
Cat Haven Building	16,000	7/15/1998	S/L 15 Yrs	10,136	1,067	11,203
Building Improvements	11,000	6/15/1998	S/L 15 Yrs	7,025	733	7,758
Bear Cage	15,000	6/15/1998	S/L 7 Yrs	15,000		15,000
Wolve Enclosures	10,000	4/15/1998	S/L 7 Yrs	10,000		10,000
Bear Cages	15,000	6/15/1998	S/L 7 Yrs	15,000		15,000
Stumptail Cages	15,000	6/15/1998	S/L 7 Yrs	15,000		15,000
Java Cages	15,101	10/15/1998	S/L 7 Yrs	15,101		15,101
5 Squeeze Back Cages	1,500	11/9/1997	S/L 7 Yrs	1,500		1,500
Wao Clinic	60,946	4/1/2000	S/L 15 Yrs	31,488	4,063	35,551
Cat Haven Building	6,844	1/1/2000	S/L 15 Yrs	3,648	456	4,104
Primatae Clinic	5,645	1/1/2000	S/L 15 Yrs	3,008	376	3,384
Handicap Bathroom	5,971	6/15/1999	S/L 15 Yrs	3,416	398	3,814
18 Squeeze Back Cages	21,600	4/1/1999	S/L 7 Yrs	21,600		21,600
5 Chimp Squeeze Cages	35,000	4/1/1999	S/L 7 Yrs	36,250	(1,250)	35,000
Chimp Cages	41,130	9/1/1999	S/L 7 Yrs	41,130		41,130
Primate Cages	38,886	9/1/1999	S/L 7 Yrs	38,886		38,886
Bear Cages	3,407	9/1/1999	S/L 7 Yrs	3,407		3,407
Mobile Home	3,000	6/17/1999	S/L 15 Yrs	1,717	200	1,917
Mobile Home	5,000	1/15/1999	S/L 15 Yrs	2,997	333	3,330
Mobile Home	4,200	4/26/2000	S/L 15 Yrs	2,170	280	2,450
Bird Cages	500	8/16/2000	S/L 7 Yrs	500		500
Shelter Boxes	820	3/31/2000	S/L 7 Yrs	820		820
Tiger Cages	12,250	10/15/2000	S/L 7 Yrs	12,250		12,250
Chimp Cages	209,115	9/15/2000	S/L 7 Yrs	209,115		209,115
Lion Cages	47,250	11/15/2000	S/L 7 Yrs	47,250		47,250
Monkey Cages	25,131	6/1/2000	S/L 7 Yrs	25,131		25,131
Bear Cages	32,000	6/30/2001	S/L 7 Yrs	29,712	2,288	32,000
Quarantine Talley	17,201	10/31/2001	S/L 7 Yrs	15,151	2,050	17,201
Quarantine Leslie	15,537	10/31/2001	S/L 7 Yrs	13,690	1,847	15,537
Tiger Cages	13,672	12/1/2002	S/L 7 Yrs	10,214	1,953	12,167
Tiger Cages	2,863	12/1/2002	S/L 7 Yrs	2,766	97	2,863
Wolf Enclosure	25,000	9/30/2001	S/L 7 Yrs	22,319	2,681	25,000
Gate/Fencing	930	3/31/2001	S/L 7 Yrs	898	32	930
Primate Building	29,625	8/1/2001	S/L 7 Yrs	27,155	2,470	29,625
Primate Cages	90,000	9/30/2001	S/L 7 Yrs	80,356	9,644	90,000
Primate Cages	75,000	11/1/2001	S/L 7 Yrs	66,069	8,931	75,000
Mobile Home	1,500	1/1/2002	S/L 15 Yrs	600	100	700
Mobile Home	1,500	1/14/2002	S/L 15 Yrs	600	100	700
4 Treated Picnic Tables	1,200	7/15/2002	S/L 5 Yrts	1,320	(120)	1,200
Perimeter Fence	6,000	6/15/2002	S/L 7 Yrs	4,785	857	5,642
Upgrade Trail	3,500	3/15/2002	S/L 7 Yrs	2,917	500	3,417
Bear Cage	5,000	2/15/2002	S/L 7 Yrs	4,284	714	4,998
Feeding Troughs	8,500	7/1/2002	S/L 7 Yrs	6,677	1,214	7,891
Chimp Cages	3,000	2/1/2002	S/L 7 Yrs	2,533	428	2,961
Animal Cages	72,950	6/24/1905	S/L 7 Yrs	52,105	10,421	62,526
Bear Cages	3,335	12/31/2000	S/L 7 Yrs	3,134	201	3,335
Quarantine Area	54,000	6/5/2003	S/L 7 Yrs	35,856	7,714	43,570

Walk in Freezer	65,000	10/5/2003	S/L 7 Yrs	39,465	9,286	48,751
Building Improvements	14,149	6/15/2004	S/L 15 Yrs	3,379	943	4,322
Educational Building	24,837	6/15/2004	S/L 15 Yrs	5,934	1,656	7,590
Educational Building	23,525	10/15/2005	S/L 15 Yrs	1,176	392	1,568
Fencing	3,096	3/1/2004	S/L 7 Yrs	1,695	442	2,137
Feed Shed/Walk in Freezer	53,756	5/1/2004	S/L 7 Yrs	28,157	7,679	35,836
IFAW Cages	71,000	9/1/2004	S/L 7 Yrs	33,810	10,143	43,953
Baboon Cage	25,267	5/1/2004	S/L 7 Yrs	13,236	3,610	16,846
Bear Cage	30,799	11/1/2004	S/L 7 Yrs	13,933	4,400	18,333
WIP Donated materials (Educ Bldg)	16,000	6/15/2004	S/L 7 Yrs	801	267	1,068
Appliances	2,500	4/1/2004	S/L 7 Yrs	1,875	500	2,375
Mobile Home	12,343	10/15/2004	S/L 7 Yrs	5,730	1,763	7,493
Mobile Home -	3,200	1/24/2005	S/L 7 Yrs	1,371	457	1,828
Mobile Home	1,500	5/23/2005	S/L 7 Yrs	1,375	300	1,675
Wire Dog Crates	3,200	10/15/2005	S/L 7 Yrs	480	160	640
Tiger/Leopard Cages	94,877	10/15/2005	S/L 7 Yrs	10,164	3,388	13,552
WIP Animal Clinic	41,590	12/31/2003	S/L 7 Yrs	2,773	2,773	5,546
WIP Animal Clinic	5,752	10/31/2007	S/L 7 Yrs	317	822	1,139
Building Improv Office/Gift Shop	20,965	6/1/2007	S/L 15 Yrs	1,398	1,398	2,796
WIP Cages	24,635	11/30/2007	S/L 7 Yrs		3,519	3,519
Fencing	6,500	12/31/2006	S/L 7 Yrs	929	929	1,858
1 Acre Lion Cage	33,000	11/30/2006	S/L 7 Yrs	1,572	786	2,358
Primary Cage	20,000	6/16/2006	S/L 7 Yrs	3,334	1,667	5,001
WIP Donated Building Materials	10,000	6/30/2006	S/L 7 Yrs			
Total Buildings/Cages	2,055,536			1,490,026	118,058	1,608,084
Other						
Exotic Anmils	1,000	12/21/2004	S/L 10 Yrs	308	100	408
Exotic Animals	2,300	6/30/1997	S/L 10 Yrs	2,415	230	2,645
Total Exocit Anamils	3,300			2,723	330	3,053
Equipment						-
Water Blaster	1,000	2/19/1997	S/L 5 yrs	1,000		1,000
Welder	500	4/22/1997	S/L 5 yrs	500		500
Compressor/Spray Gun	400	6/23/1997	S/L 5 yrs	400		400
Utility Shed	700	6/1/1997	S/L 5 yrs	700		700
Cutting Tools	900	6/1/1997	S/L 5 yrs	900		900
Freezer	1,500	10/1/1991	S/L 5 yrs	1,500		1,500
Welding Machine	1,625	11/15/1999	S/L 5 Yrs	1,625		1,625
Water Blaster	1,850	1/15/1999	S/L 5 Yrs	1,850		1,850
Sedated Pistol W/Darts	600	1/5/1995	S/L 5 yrs	600		600
Welding Machine	2,739	4/19/2000	S/L 5 yrs	2,739		2,739
Air Compressor	4,000	4/11/2000	S/L 5 yrs	4,000		4,000
Table Saw	350	4/28/2000	S/L 5 yrs	350		350
Cement Mixer	1,004	4/28/2000	S/L 5 yrs	1,004		1,004
Forklift	1,000	5/6/2002	S/L 5 yrs	1,000		1,000
Forklift Attachment	650	6/24/2002	S/L 5 yrs	650		650
Post Hole Digger	705	6/27/2002	S/L 5 yrs	705		705
Backhoe	12,000	9/22/2000	S/L 5 yrs	12,000		12,000
Refrigation	3,500	1/31/2003	S/L 5 yrs	3,500		3,500

Electric winch	450	9/13/2006	S/L 5 yrs	390	60	450
Deep Freezer	320	4/15/2003	S/L 5 yrs	306	14	320
Air Compressor	725	11/15/2003	S/L 5 yrs	604	121	725
Blue Str	1,695	1/10/2004	S/L 5 yrs	1,356	339	1,695
Tommy Lift	1,000	2/4/2004	S/L 5 yrs	783	200	983
Incinertor	1,250	4/13/2004	S/L 5 yrs	937	250	1,187
Feret Food Service Box	2,000	6/21/2004	S/L 5 yrs	1,433	400	1,833
A/C Heaters	1,192	5/19/2004	S/L 5 yrs	813	238	1,051
Generator	1,000	8/21/2004	S/L 5 yrs	683	200	883
Electric Fence	400	8/26/2004	S/L 5 yrs	273	80	353
Waer Blaqster	388	8/26/2004	S/L 5 yrs	266	78	344
pPneumatic rock drill SA Foundation	1,119	9/23/2004	S/L 5 yrs	747	224	971
25' Scissor Fift SA Foundation	6,500	10/2/2004	S/L 5 yrs	4,225	1,300	5,525
Panel Collers SA Founation	1,150	11/27/2004	S/L 5 yrs	728	230	958
Cooler Reffer	1,866	1/30/2005	S/L 5 yrs	1,119	373	1,492
Radial Saw	500	3/8/2005	S/L 5 yrs	367	100	467
Appliances	1,347	12/8/2005	S/L 5 yrs	560	269	829
Furniture	2,854	12/8/2005	S/L 5 yrs	1,190	571	1,761
CX9 Mixer Bucket	2,750	6/1/2006	S/L 5 yrs	871	550	1,421
Skidloader Graappie Bucket	800	2/6/2006	S/L 5 yrs	307	160	467
Air Jack Hammer	750	2/6/2006	S/L 5 yrs	275	150	425
Vermee Trencher	650	4/12/2006	S/L 5 yrs	228	130	358
6000 Watt Generator	758	6/19/2006	S/L 5 yrs	240	152	392
Miller Bobcat Machine	1,000	7/11/2006	S/L 5 yrs	300	200	500
Skidloader Forks	650	10/15/2006	S/L 5 yrs	163	130	293
2 Refrigerators	240	1/4/2007	S/L 5 yrs	48	48	96
Meat Saw	1,400	3/28/2007	S/L 5 yrs	70	280	350
Gift Shop Shelving	1,556	5/2/2007	S/L 5 yrs	104	311	415
Freezer 2 Door	1,500	12/14/2007	S/L 5 yrs	25	300	325
Genertor	629	4/1/2007	S/L 5 yrs	31	126	157
Meat Saw	1,000	12/20/2005	S/L 5 yrs	417	200	617
Genertor	624	12/19/2003	S/L 5 yrs	510	125	635
Generator	730	9/15/2008	S/L 5 yrs		49	49
BBQ Pit	400	1/26/2008	S/L 5 yrs		80	80
Craftsman Generator	880	3/7/2008	S/L 5 yrs		147	147
Compactor	599	5/6/2008	S/L 5 yrs		70	70
Generator	730	11/14/2008	S/L 5 yrs		24	24
2 Water Boosters	701	12/1/2008	S/L 5 yrs		12	12
Pressure Tank	275	12/8/2008	S/L 5 yrs		5	5
Signs	1,234	12/10/2008	S/L 5 yrs		21	21
Booster Pump	324	12/21/2008	S/L 5 yrs		5	5
Total Equipment	80,959			55,392	8,322	63,714
Total Programs	2,421,360	35,611		1,677,457	163,761	1,841,218
Office Equipment						
VCR	395	1/3/1999	S/L 5 yrs	316		316
Laser Jet printer	400	1/22/2009	S/L 5 yrs	320		320
Camera Lens	652	8/3/2000	S/L 5 yrs	652		652
Dell computer Station	1,000	9/2/2002	S/L 5 yrs	1,000		1,000
Printer	500	10/22/2002	S/L 5 yrs	500		500

Binder	415	12/2/2003	S/L 5 yrs	339	76	415
T-Shirt Machine	574	6/2/2003	S/L 5 yrs	527	47	574
Computers	5,406	1/1/2003	S/L 5 yrs	5,405	1	5,406
Printer	594	2/1/2003	S/L 5 yrs	585	9	594
Computer Software	1,114	5/2/2003	S/L 5 yrs	1,059	55	1,114
Donated Office Furniture	8,000	3/1/2003	S/L 5 yrs	7,733	267	8,000
DVD Recorder	399	2/4/2004	S/L 5 yrs	313	80	393
Digital Video Camera IFAW	1,572	4/21/2004	S/L 5 yrs	1,178	314	1,492
Digital Camera	771	11/1/2004	S/L 5 yrs	488	154	642
Speaker/PA System	1,658	12/1/2004	S/L 5 yrs	1,024	332	1,356
Computer System	4,597	5/1/2004	S/L 5 yrs	3,370	919	4,289
Lap top computer	1,278	4/1/2003	S/L 5 yrs	1,216	256	1,472
Sharp Copier	2,995	1/4/2006	S/L 5 yrs	1,198	599	1,797
Dell computer Station	1,944	1/1/2005	S/L 5 yrs	778	389	1,167
Donated Office Furnituraa	2,000	5/12/2006	S/L 5 yrs	633	400	1,033
Furniture Rental Property	663	1/2/2006	S/L 5 yrs	266	133	399
Store Fixtures	1,300	12/9/2006	S/L 5 yrs	282	260	542
Patio Furniture	1,300	12/9/2006	S/L 5 yrs	282	260	542
Office Furniture	750	2/21/2006	S/L 5 Yrs	288	150	438
Computure Hard Drive	500	5/10/2006	S/L 5 Yrs	158	100	258
Vending Machines	735	8/18/2006	S/L 5 Yrs	208	147	355
SpiraqI Staircase	1,216	6/15/2006	S/L 5 Yrs	385	243	628
Glass Display Case	1,500	6/15/2006	S/L 5 Yrs	475	300	775
Fax Machine	276	1/4/2007	S/L 5 Yrs	55	55	110
Conference Table	1,500	2/15/2007	S/L 5 yrs	275	300	575
Desks/Credenza	550	3/7/2007	S/L 5 yrs	18	110	128
Cell Phone	280	3/16/2007	S/L 5 yrs	14	56	70
Phone System/Auto diqler	5,193	2/26/2007	S/L 5 yrs	173	1,039	1,212
Laptop computer	1,380	2/15/2007	S/L 5 Yrs	46	197	243
Dell Computer Sysem	1,874	4/15/2007	S/L 5 Yrs	125	375	500
Dell computer Station	1,710	9/2/2007	S/L 5 Yrs	228	342	570
Camera Lens	450	2/1/2007	S/l 5 Yrs	8	90	98
Gift Shop Blinds	742	7/1/2007	S/l 5 Yrs	74	148	222
Cannon Camera	1,200	5/1/2007	S/l 5 Yrs	80	240	320
Fax Machine	382	7/1/2007	S/l 5 Yrs	38	76	114
Fund Raising Equip	802	12/24/1997	S/L 5 yrs	802		802
Computer System	1,402	10/15/2008	S/L 5 yrs		47	47
Printing Machine	2,277	1/15/2008	S/L 5 yrs		455	455
Cash Register	399	2/15/2008	S/L 5 yrs		73	73
Nvigation System	389	10/15/2008	S/L 5 yrs		19	19
Konica Copier	9,203	6/10/2008	S/L 5 yrs		1,074	1,074
Total Office	74,237			32,914	10,187	43,101
Mailing Lists						
2003 Scquisitions	39,280	6/15/2006	S/L 3 Yrs	46,917	(7,637)	39,280
2004 Acquisitions	120,357	6/15/2004	S/L 3 Yrs	140,416	(20,059)	120,357
2005 Acquisitions	138,634	6/15/2005	S/L 3 Yrs	80,868	26,956	107,824
2006 Acquisitions	20,000	6/15/2006	S/L 3 Yrs	6,666	3,333	9,999
Total Mailing Lists	318,271			274,867	2,593	277,460

Land	25,467	3/29/1990				
Land	225,000	7/1/2001				
Land Easement	1,000	3/11/2004				
Land Improvements	15,201	10/15/2001				
Land	149,880	2/15/1999				
Total Land	416,548					
Total Assets	3,230,416			1,985,238	176,541	2,161,779