Return of Organization Exempt From Income Tax

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

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

<table>
<thead>
<tr>
<th>A</th>
<th>For the 2010 calendar year, or tax year beginning 07/01/10, and ending 06/30/11</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>B</th>
<th>Check if applicable:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C</th>
<th>Name of organization</th>
<th>AMERICAN SCHOOLS OF ORIENTAL RESEARCH</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>D</th>
<th>Employer identification number</th>
<th>23-1352617</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>E</th>
<th>Telephone number</th>
<th>617-353-6570</th>
</tr>
</thead>
</table>

| G | Gross receipts | 996,560 |

<table>
<thead>
<tr>
<th>H</th>
<th>Is this a group return for affiliates?</th>
<th>X No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>K</th>
<th>Website:</th>
<th><a href="http://WWW.ASOR.ORG">WWW.ASOR.ORG</a></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>L</th>
<th>Year of formation</th>
<th>1935</th>
</tr>
</thead>
</table>

| M | State of legal domicile | MA |

### Part I Summary

1. Briefly describe the organization's mission or most significant activities:

   **STUDY, TEACH AND DISSEMINATE KNOWLEDGE OF ANCIENT AND MODERN LANGUAGE, LITERATURE, GEOGRAPHY, HISTORY AND ARCHAEOLOGY OF MIDDLE EASTERN COUNTRIES.**

2. Check this box ☑ 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 | 48 |

4. Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 48 |

5. Total number of individuals employed in calendar year 2010 (Part V, line 2a) | 5 | 7 |

6. Total number of volunteers (estimate if necessary) | 6 | 102 |

7a. Total unrelated business revenue from Part VIII, column (C), line 12 | 7a |

7b. Net unrelated business taxable income from Form 990-T, line 34 | 0 |

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
</table>

8. Contributions and grants (Part VIII, line 1h) | 233,730 | 301,120 |

9. Program service revenue (Part VIII, line 2g) | 475,739 | 514,159 |

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 16,110 | 18,121 |

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 126,239 | 153,970 |

12. Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 851,818 | 987,370 |

13. Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 28,500 | 34,000 |

14. Benefits paid to or for members (Part IX, column (A), line 4) | 402,414 | 424,389 |

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 5 | 11e |

16a. Professional fundraising fees (Part IX, column (A), line 11e) | 33,820 |

17. Other expenses (Part IX, column (A), lines 11a–11d, 11f–24) | 413,238 | 402,870 |

18. Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 844,152 | 861,259 |

19. Revenue less expenses. Subtract line 18 from line 12 | 7,666 | 126,111 |

20. Total assets (Part X, line 16) | 1,302,918 | 1,602,381 |

21. Total liabilities (Part X, line 26) | 291,039 | 293,265 |

22. Net assets or fund balances. Subtract line 21 from line 20 | 1,011,879 | 1,309,116 |

### 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 which preparer has any knowledge.

<table>
<thead>
<tr>
<th>Sign Here</th>
<th>Signature of officer</th>
<th>EXECUTIVE DIRECTOR</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Type or print name and title</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Paid Preparer</th>
<th>Print/Type preparer's name</th>
<th>Preparer's signature</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Use Only</th>
<th>Firm's name</th>
<th></th>
</tr>
</thead>
</table>

| Firm's address | CARY, NC 27511 |

| Phone no. | 919-467-2050 |

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)
Part III  Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission:
   STUDY, TEACH AND DISSEMINATE KNOWLEDGE OF ANCIENT AND
   MODERN LANGUAGE, LITERATURE, GEOGRAPHY, HISTORY AND
   ARCHAEOLOGY OF MIDDLE EASTERN COUNTRIES.

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

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

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

   If "Yes," describe these changes on Schedule O.

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 $ 783,287 including grants of $ 34,000 ) (Revenue $ 987,370 )
   FOSTERING ORIGINAL RESEARCH, ARCHAEOLOGICAL EXCAVATIONS AND EXPLORATIONS.
   ENCOURAGING SCHOLARSHIP IN THE BASIC LANGUAGES, CULTURAL HISTORIES AND
   TRADITIONS OF THE NEAR EASTERN WORLD.
   PROMOTING THE EDUCATIONAL GOALS OF NEAR EASTERN STUDIES AND DISCIPLINES,
   AND BY ADVOCATING HIGH ACADEMIC STANDARDS IN TEACHING AND INTERDISCIPLINARY
   RESEARCH.
   MAINTAINING AN ACTIVE PROGRAM OF TIMELY DISSEMINATION OF RESEARCH RESULTS
   AND CONCLUSIONS.

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

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

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

   4e Total program service expenses $ 783,287

DAA

Form 990 (2010)
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1</td>
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<td>X</td>
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<tr>
<td>2</td>
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<td>X</td>
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<tr>
<td>20a</td>
<td></td>
<td>X</td>
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<tr>
<td>20b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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? If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>22 Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If &quot;Yes,&quot; complete Schedule I, Parts I and III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>25b 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 &quot;Yes,&quot; complete Schedule L, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If &quot;Yes,&quot; complete Schedule L, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>27 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):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b A family member of a current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>28 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If &quot;Yes,&quot; complete Schedule R, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>33 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Parts II, III, IV, and V, line 1</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If &quot;Yes,&quot; complete Schedule R, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 31

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X

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 7

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)

3a Did the organization have unrelated business gross income of $1,000 or more during the year? X

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)? X

b If "Yes," enter the name of the foreign country:


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible? X

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 Organizations that may receive deductible contributions under section 170(c).

a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? X

b If "Yes," did the organization notify the donor of the value of the goods or services provided? X

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X

d If "Yes," indicate the number of Forms 8282 filed during the year 7d

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? X

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? X

8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8

9 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

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? X

Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b

14a Did the organization receive any payments for indoor tanning services during the tax year? X

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b
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

1a Enter the number of voting members of the governing body at the end of the tax year
1b Enter the number of voting members included in line 1a, above, who are independent

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?

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?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
8a The governing body?
8b Each committee with authority to act on behalf of the governing body?

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

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

10a Does the organization have local chapters, branches, or affiliates?
10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, branches, and affiliates to ensure their operations are consistent with those of the organization?

11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?
11b 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
12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

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?
15a The organization's CEO, Executive Director, or top management official
15b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
16b If "Yes," did the organization adopt 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
MA

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.
X 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:

BOSTON ANDREW VAUGHN 656 BEACON STREET MA 02215 617-353-6570
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 organizations compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>DR ANDREW VAUGHN</td>
<td>32.00 X X</td>
<td>95,305</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SUSAN ACKERMAN</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DR GARY ARBINO</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
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<tr>
<td>SHEILA T BISHOP</td>
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<tr>
<td>ROBERT J BULL</td>
<td>1.00 X</td>
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<tr>
<td>JEFFREY CHADWICK</td>
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<tr>
<td>DR FRANK MOORE</td>
<td>1.00 X</td>
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</tr>
<tr>
<td>JENNIE EBELING</td>
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<tr>
<td>JANE EVANS</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
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<tr>
<td>RAY EWING</td>
<td>1.00 X</td>
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<td>0</td>
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<tr>
<td>WESTON FIELDS</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</tr>
<tr>
<td>NILI FOX</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SHELDON FOX</td>
<td>1.00 X X</td>
<td>0</td>
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<tr>
<td>DR ERNEST FRERICHS</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
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<tr>
<td>DR LAWRENCE T GERATY</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>BARRY GITTLEN</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
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</tr>
</tbody>
</table>

DAA
### Part VII

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>17. DR JOSEPH A GREENE</strong></td>
<td><strong>TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>18. DR JIMMY HARDIN</strong></td>
<td><strong>TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>19. DR TIMOTHY HARRISON</strong></td>
<td><strong>PRESIDENT</strong> 1.00 X X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>20. CHARLES E JONES</strong></td>
<td><strong>VP PUBLICATIONS</strong> 1.00 X X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>21. MRS NORMA KERSHAW</strong></td>
<td><strong>HONORARY TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>22. DR MORAG M KERSEL</strong></td>
<td><strong>F CO-VP PROGRAMS</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>23. ANN-MARIE KNOBLAUCH</strong></td>
<td><strong>TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>24. DR OYSTEIN S LAHANCA</strong></td>
<td><strong>VP ARCHAEOLOGICAL RE</strong> 1.00 X X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>25. DR C C LAMBERG-KARLOVSKY</strong></td>
<td><strong>HONORARY TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>26. DR GEORGE LANDES</strong></td>
<td><strong>HONORARY TRUSTEE</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>27. W MARK LANIER</strong></td>
<td><strong>BOARD MEMBER</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>28. P E MACALLISTER</strong></td>
<td><strong>CHAIRMAN OF BOARD</strong> 1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**1b Sub-total** .......................... ➤ 95,305
**c Total from continuation sheets to Part VII, Section A** .......................... ➤ 95,305

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 ➤ 0

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

   Yes No

3 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? If "Yes," complete Schedule J for such individual

   Yes No

4 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? If "Yes," complete Schedule J for such person

   Yes No

5 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

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 ➤ 0
### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
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</tr>
</thead>
<tbody>
<tr>
<td>17. DR. CAROL MEYERS TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>18. DR. ERIC MEYERS PAST PRESIDENT</td>
<td>1.00 X</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>19. ELIZABETH MOYNIHAN HONORARY TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>20. ROBERT MULLINS TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>21. DR. BETH ALPERT NAKHAI TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>22. ORLYN NELSON BOARD MEMBER</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>23. DR. KEVIN O'CONNELL HONORARY TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>24. ROBERT ODEN BOARD MEMBER</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>25. DR. SUSANNE RICHARD TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>26. CHRISTOPHER A ROLLSTON FHD TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>27. DR. B W RUFFNER BOARD MEMBER</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>28. GLENN M SCHWARTZ TRUSTEE</td>
<td>1.00 X</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total: .................................................. ▶

c Total from continuation sheets to Part VII, Section A: ...................................... ▶

d Total (add lines 1b and 1c): ...................................... ▶

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: ▶

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: ▶

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? If "Yes," complete Schedule J for such individual: ▶

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person: ▶

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</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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: ▶
### Part VII

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

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</tr>
</thead>
<tbody>
<tr>
<td>(17) DR JOE SEGER BOARD MEMBER</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(18) AUDREY SHAFFER BOARD MEMBER</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(19) DR SUSAN SHERIDAN TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(20) LYDIE SHUFRO HONORARY TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(21) DR JAMES F STRANGE SECRETARY</td>
<td>1.00 X X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(22) GOUGH W THOMPSON JR HONORARY TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(23) DR EDWARD WRIGHT OVERSEAS INS TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(24) K LAWSON YOUNGER JR TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>(25) DR RANDALL YOUNGER TRUSTEE</td>
<td>1.00 X</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>(26)</td>
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<td>(27)</td>
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<tr>
<td>(28)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

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

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If “Yes,” complete Schedule J for such individual

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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
# Form 990 (2010) AMERICAN SCHOOLS OF ORIENTAL 23-1352617 Page 9

## Part VIII Statement of Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1a</strong> Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d</strong> Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>e</strong> Government grants (contributions)</td>
<td>1e</td>
<td>130,937</td>
<td></td>
</tr>
<tr>
<td><strong>f</strong> All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>170,183</td>
<td></td>
</tr>
<tr>
<td><strong>g</strong> Noncash contributions included in lines 1a-1f:</td>
<td>$</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>h</strong> Total. Add lines 1a-1f</td>
<td></td>
<td>301,120</td>
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</tr>
<tr>
<td><strong>2a</strong> JOURNALS REVENUE</td>
<td>900099</td>
<td>241,153</td>
<td>241,153</td>
</tr>
<tr>
<td><strong>b</strong> INDIVIDUAL MEMBERSHIP DUES</td>
<td>900099</td>
<td>150,489</td>
<td>150,489</td>
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<tr>
<td><strong>c</strong> INSTITUTIONAL MEMBERSHIP DUES</td>
<td>900099</td>
<td>87,000</td>
<td>87,000</td>
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<tr>
<td><strong>d</strong> BOOK REVENUE</td>
<td>900099</td>
<td>35,517</td>
<td>35,517</td>
</tr>
<tr>
<td><strong>e</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>f</strong> All other program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>g</strong> Total. Add lines 2a-2f</td>
<td></td>
<td>514,159</td>
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</tr>
<tr>
<td><strong>3</strong> Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td>14,580</td>
<td>14,580</td>
</tr>
<tr>
<td><strong>4</strong> Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>5</strong> Royalties</td>
<td></td>
<td>33,620</td>
<td>33,620</td>
</tr>
<tr>
<td><strong>6a</strong> Gross Rents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Rental inc. or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7a</strong> Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7b</strong> Gross amount from sales of assets other than inventory</td>
<td>(i) Securities</td>
<td>9,263</td>
<td>3,468</td>
</tr>
<tr>
<td><strong>7c</strong> Less: cost or other basis &amp; sales expenses</td>
<td>(ii) Other</td>
<td>9,190</td>
<td>3,468</td>
</tr>
<tr>
<td><strong>7d</strong> Gain or (loss)</td>
<td></td>
<td>73</td>
<td>3,468</td>
</tr>
<tr>
<td><strong>7e</strong> Net gain or (loss)</td>
<td></td>
<td>3,541</td>
<td>3,541</td>
</tr>
<tr>
<td><strong>8a</strong> Gross income from fundraising events (not including $ of contributions reported on line 1c).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>8b</strong> Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>8c</strong> Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9a</strong> Gross income from gaming activities.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9b</strong> Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9c</strong> Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>10a</strong> Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>10b</strong> Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>10c</strong> Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>11a</strong> ANNUAL MEETINGS</td>
<td>900099</td>
<td>120,350</td>
<td>120,350</td>
</tr>
<tr>
<td><strong>b</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d</strong> All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>e</strong> Total. Add lines 11a-11d</td>
<td></td>
<td>120,350</td>
<td></td>
</tr>
<tr>
<td><strong>12</strong> Total revenue. See instructions</td>
<td></td>
<td>987,370</td>
<td>668,129</td>
</tr>
<tr>
<td>Line</td>
<td>Description</td>
<td>(A) Total expenses</td>
<td>(B) Program service expenses</td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
<td>--------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21</td>
<td>34,000</td>
<td>34,000</td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the U.S. See Part IV, line 22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>95,305</td>
<td>76,244</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>299,976</td>
<td>280,899</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>29,108</td>
<td>26,178</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employee):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td>20,296</td>
<td>952</td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other</td>
<td>10,879</td>
<td>10,879</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>50,895</td>
<td>44,456</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>4,532</td>
<td>3,173</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>14,992</td>
<td>12,557</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>75,688</td>
<td>72,303</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>649</td>
<td>649</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>3,169</td>
<td>2,218</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>5,793</td>
<td>4,055</td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>PUBLICATION PRODUCTION</td>
<td>144,123</td>
<td>144,123</td>
</tr>
<tr>
<td>b</td>
<td>EDITORIAL EXPENSE</td>
<td>39,899</td>
<td>39,899</td>
</tr>
<tr>
<td>c</td>
<td>DISTRIBUTION &amp; MARKETING</td>
<td>14,496</td>
<td>14,496</td>
</tr>
<tr>
<td>d</td>
<td>SPONSORED PROJECTS</td>
<td>8,546</td>
<td>8,546</td>
</tr>
<tr>
<td>e</td>
<td>MISCELLANEOUS</td>
<td>5,776</td>
<td>6,516</td>
</tr>
<tr>
<td>f</td>
<td>All other expenses</td>
<td>3,137</td>
<td>1,144</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24f</td>
<td>861,259</td>
<td>783,287</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Check here if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part X Balance Sheet

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash—non-interest bearing</td>
<td>135,575</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>275,337</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>45,531</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>58,484</td>
</tr>
<tr>
<td>5</td>
<td>Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>23,365</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>6,930</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>117,705</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>109,943</td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td>749,723</td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>1,302,918</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>19,988</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>271,051</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities. Complete Part X of Schedule D</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>291,039</td>
</tr>
<tr>
<td></td>
<td>27</td>
<td>Unrestricted net assets</td>
</tr>
<tr>
<td></td>
<td>28</td>
<td>Temporarily restricted net assets</td>
</tr>
<tr>
<td></td>
<td>29</td>
<td>Permanently restricted net assets</td>
</tr>
<tr>
<td></td>
<td>Organizations that do not follow SFAS 117, check here □ and complete lines 30 through 34.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
</tr>
<tr>
<td></td>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
</tr>
<tr>
<td></td>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
</tr>
<tr>
<td></td>
<td>33</td>
<td>Total net assets or fund balances</td>
</tr>
<tr>
<td></td>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
</tr>
</tbody>
</table>

Form 990 (2010)
### Part XI: Reconciliation of Net Assets

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
</tr>
<tr>
<td>b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
</tr>
<tr>
<td>c</td>
<td>If &quot;Yes&quot; 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?</td>
</tr>
<tr>
<td>d</td>
<td>If &quot;Yes&quot; 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: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis</td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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.</td>
</tr>
</tbody>
</table>

Form 990 (2010)
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.

OBT No. 1545-0047

2010

Open to Public Inspection

Name of the organization: AMERICAN SCHOOLS OF ORIENTAL RESEARCH

Employer Identification number: 23-1352617

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

12 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).

13 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

14 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
   (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?
   (ii) A family member of a person described in (i) above?
   (iii) A 35% controlled entity of a person described in (i) or (ii) above?

15 Provide the following information about the supported organization(s):

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you split the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td>Yes No</td>
<td>Yes No</td>
<td>Yes No</td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16 Total

For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2010

Form 990 or 990-EZ.

DAA
## 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants&quot;)</td>
<td>381,763</td>
<td>544,074</td>
<td>395,944</td>
<td>233,730</td>
<td>301,120</td>
<td>1,856,631</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>381,763</td>
<td>544,074</td>
<td>395,944</td>
<td>233,730</td>
<td>301,120</td>
<td>1,856,631</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td>381,763</td>
<td>544,074</td>
<td>395,944</td>
<td>233,730</td>
<td>301,120</td>
<td>1,856,631</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>381,763</td>
<td>544,074</td>
<td>395,944</td>
<td>233,730</td>
<td>301,120</td>
<td>1,856,631</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>103,045</td>
<td>140,135</td>
<td>50,256</td>
<td>45,340</td>
<td>48,200</td>
<td>386,976</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td>381,763</td>
<td>544,074</td>
<td>395,944</td>
<td>233,730</td>
<td>301,120</td>
<td>1,856,631</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td>2,243,607</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>12 634,509</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))</td>
<td>82.75%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public support percentage from 2009 Schedule A, Part II, line 14</td>
<td>74.13%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part IV how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part IV how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

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

#### Section D. Computation of Investment Income Percentage

| Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) | 17 % |
| Investment income percentage from 2008 Schedule A, Part III, line 17 | 18 % |

**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.

**19b 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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMERICAN SCHOOLS OF ORIENTAL RESEARCH</td>
<td>23-1352617</td>
</tr>
</tbody>
</table>

**Organization type (check one):**

<table>
<thead>
<tr>
<th>Filers of:</th>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or 990-EZ</td>
<td><strong>X</strong> 501(c)(3) (enter number) organization</td>
</tr>
<tr>
<td></td>
<td>4947(a)(1) nonexempt charitable trust not treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>527 political organization</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>501(c)(3) exempt private foundation</td>
</tr>
<tr>
<td></td>
<td>4947(a)(1) nonexempt charitable trust treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>501(c)(3) taxable private foundation</td>
</tr>
</tbody>
</table>

---

**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).
### Part I: Contributors

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Aggregate contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
</table>
| 1   | P E MACALLISTER
P O BOX 1941
INDIANAPOLIS IN 46206 | $7,625 | Person X, Payroll, Noncash (Complete Part II if there is a noncash contribution.) |
| 2   | THE LANIER LAW FIRM PC
P O BOX 691448
HOUSTON TX 77169-1448 | $25,000 | Person X, Payroll, Noncash (Complete Part II if there is a noncash contribution.) |
| 3   | MACALLISTER MACHINERY COMPANY INC
P O BOX 1941
INDIANAPOLIS IN 46206 | $15,000 | Person X, Payroll, Noncash (Complete Part II if there is a noncash contribution.) |
| 4   | NATIONAL ENDOWMENT FOR THE HUMANITIE
1100 PENNSYLVANIA AVE, NW
WASHINGTON DC 20506 | $130,937 | Person X, Payroll, Noncash (Complete Part II if there is a noncash contribution.) |
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.

Name of the organization

AMERICAN SCHOOLS OF ORIENTAL RESEARCH

Employer Identification number 23-1352617

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.

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

(a) Donor advised funds
(b) Funds and other accounts

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? □ Yes □ 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? □ Yes □ 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)
   □ Protection of natural habitat
   □ Preservation of an historically important land area
   □ 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.

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

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.

1 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 ▶ $ ▶

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

Schedule D (Form 990) 2010

DAA
Schedule D (Form 990) 2010

AMERICAN SCHOOLS OF ORIENTAL 23-1352617

Page 2

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

If “Yes,” explain the arrangement in Part XIV and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21?
   ☐ Yes ☐ No

If “Yes,” explain the arrangement in Part XIV.

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

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Beginning of year balance</td>
<td>658,536</td>
<td>600,197</td>
<td>736,598</td>
<td></td>
</tr>
<tr>
<td>1b Contributions</td>
<td>20,000</td>
<td></td>
<td>1,260</td>
<td></td>
</tr>
<tr>
<td>1c Net investment earnings, gains, and losses</td>
<td>160,165</td>
<td>82,890</td>
<td>-130,961</td>
<td></td>
</tr>
<tr>
<td>1d Grants or scholarships</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Other expenditures for facilities and programs</td>
<td>30,272</td>
<td>24,551</td>
<td>6,700</td>
<td></td>
</tr>
<tr>
<td>1f Administrative expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g End of year balance</td>
<td>808,429</td>
<td>658,536</td>
<td>600,197</td>
<td></td>
</tr>
</tbody>
</table>

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:
   i [ ] unrelated organizations
   ii [ ] related organizations

If “Yes” to 3a(ii), are the related organizations listed as required on Schedule R?
3b

3a(i) ☐
3a(ii) ☐

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

<table>
<thead>
<tr>
<th>Description of Investment</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>117,705</td>
<td>109,943</td>
<td>7,762</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

7,762

Schedule D (Form 990) 2010

DAA
**Part VII** Investments—Other Securities. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category</th>
<th>(b) Book value</th>
<th>(c) Method of valuation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td>Cost or end-of-year market value</td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
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<tr>
<td>(E)</td>
<td></td>
<td></td>
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<tr>
<td>(F)</td>
<td></td>
<td></td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 12.)

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

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td>Cost or end-of-year market value</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
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<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
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<td>(8)</td>
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<td>(9)</td>
<td></td>
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</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 13.)

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<tr>
<td>(3)</td>
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<tr>
<td>(4)</td>
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<td>(5)</td>
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<td>(6)</td>
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<td>(7)</td>
<td></td>
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<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

**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
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
</tr>
</tbody>
</table>

**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).
### Schedule D (Form 990) 2010

#### AMERICAN SCHOOLS OF ORIENTAL 23-1352617

**Page 4**

---

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
<td>987,370</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
<td>861,259</td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year. Subtract line 2 from line 1</td>
<td>126,111</td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
<td>171,126</td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV).</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net). Add lines 4 through 8</td>
<td>171,126</td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9</td>
<td>297,237</td>
</tr>
</tbody>
</table>

---

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>1,199,230</td>
</tr>
<tr>
<td>2a</td>
<td>Net unrealized gains on investments</td>
<td>171,126</td>
</tr>
<tr>
<td>2b</td>
<td>Donated services and use of facilities</td>
<td>40,734</td>
</tr>
<tr>
<td>2c</td>
<td>Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIV).</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td>211,860</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>987,370</td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIV).</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
<td>987,370</td>
</tr>
</tbody>
</table>

---

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>901,993</td>
</tr>
<tr>
<td>2a</td>
<td>Donated services and use of facilities</td>
<td>40,734</td>
</tr>
<tr>
<td>2b</td>
<td>Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Other losses</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIV).</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td>40,734</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>861,259</td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIV).</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
<td>861,259</td>
</tr>
</tbody>
</table>

---

#### 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.

---

Schedule D (Form 990) 2010

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

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

Attach to Form 990.

**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes  [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Governments and Organizations in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section applicable (d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<td>(9)</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations

3. Enter total number of other organizations

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

DAA

Schedule I (Form 990) (2010)
### Part III

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 PLATT FELLOWSHIP</td>
<td>14</td>
<td>14,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 HERITAGE FELLOWSHIP</td>
<td>20</td>
<td>20,000</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV

**Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

**PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS**

RECIPIENTS OF FELLOWSHIPS ARE REQUIRED TO SUBMIT REPORTS TO ORGANIZATION.

REPORTS ARE THEN PUBLISHED IN ORGANIZATION'S NEWSLETTER. ORGANIZATION

FOLLOWS UP WITH RECIPIENTS IF THEY DO NOT SEND IN REPORTS.
## SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization: AMERICAN SCHOOLS OF ORIENTAL RESEARCH

Employer Identification number: 23-1352617

### Part I: Excess Benefit Transactions
(sections 501(c)(3) and 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 38a or 40b.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of disqualified person</th>
<th>(b) Description of transaction</th>
<th>(c) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>(1)</td>
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<tr>
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</tbody>
</table>

2. Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958.

3. Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

### Part II: Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person and purpose</th>
<th>(b) Loan to or from the organization?</th>
<th>(c) Original principal amount</th>
<th>(d) Balance due</th>
<th>(e) in default?</th>
<th>(f) Approved by board or committee?</th>
<th>(g) Written agreement?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>To</td>
<td>From</td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
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</tr>
</tbody>
</table>

Total: $\quad$ $\quad$

### Part III: Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount and type of assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part IV  Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of org. revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ERIC MEYERS</td>
<td>DIRECTOR</td>
<td>3,000</td>
<td>NEH GRANT STIPEND</td>
<td>X</td>
</tr>
<tr>
<td>(2) ORLYN NELSON</td>
<td>DIRECTOR</td>
<td>8,962</td>
<td>PRINTING SERVICES</td>
<td>X</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
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<tr>
<td>(10)</td>
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</tr>
</tbody>
</table>

### Part V  Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT
OFFERING EDUCATIONAL OPPORTUNITIES IN NEAR EASTERN HISTORY AND ARCHAEOLOGY
TO UNDERGRADUATES AND GRADUATES IN NORTH AMERICAN COLLEGES AND
UNIVERSITIES, AND THROUGH OUTREACH ACTIVITIES TO THE GENERAL PUBLIC.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

ERIC MEYERS  CAROL MEYERS
PAST PRES  TRUSTEE
HUSBAND AND WIFE

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS
AMENDED BY-LAWS DURING CURRENT FISCAL YEAR TO REDUCE THE NUMBER OF TRUSTEES
ELECTED BY THE MEMBERSHIP AND TO ELIMINATE CERTAIN OFFICER POSITIONS THAT
HAD ALSO BEEN PREVIOUSLY CONSIDERED TRUSTEES.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
DESCRIPTED IN BY-LAWS. THE GENERAL MEMBERSHIP ELECTS 2 MEMBERS PER YEAR FOR
3-YEAR TERMS. THE INITIAL INSTITUTIONAL REPRESENTATIVES ELECT 2 MEMBERS
PER YEAR FOR 3-YEAR TERMS. UP TO 4 MEMBERS ELECTED BY THE BOARD EACH YEAR
FOR 3-YEAR TERMS.

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED

SUSAN ACKERMAN
6221 HINMAN BOX
HANOVER, NH 03775
AMERICAN SCHOOLS OF ORIENTAL

DR GARY ARBINO
STRAWBERRY POINT
MILL VALLEY, CA 94941

SHEILA T BISHOP
2175 DAHLONEGA HIGHWAY
CUMMING, GA 30004

ROBERT J BULL
54 PROSPECT STREET
MADISON, NJ 07940-2641

JEFFREY CHADWICK
2134 W 900 NORTH
FARR WEST, UT 84404

DR FRANK MOORE CROSS
6 DIVINITY AVENUE; ROOM 102
CAMBRIDGE, MA 02138

DR JENNIE EBELING
UNIVERSITY OF EVANSVILLE
EVANSVILLE, IN 47722

JANE EVANS
5500 S SHORE DRIVE; APT 706
AMERICAN SCHOOLS OF ORIENTAL

CHICAGO, IL 60637

RAY EWING
35240 PRESTWICK CT
ROUND HILL, VA 20141

WESTON FIELDS

BOX 25
KODIAK, AK 99615

NILI FOX
935 WENINGER CIRCLE
CINCINNATI, OH 45203-3181

SHELDON FOX
2303 CHURCHILL ROAD
RALEIGH, NC 27608

DR ERNEST FRERICHS
229 MEDWAY ST; APT 209
PROVIDENCE, RI 02906-5300

DR LAWRENCE T GERATY
4500 RIVERWALK PKWY
RIVERSIDE, CA 92515

BARRY GITTLEN
AMERICAN SCHOOLS OF ORIENTAL

5800 PARK HEIGHTS AVENUE
BALTIMORE, MD 21215-3932

DR JOSEPH A GREENE
6 DIVINITY AVENUE
CAMBRIDGE, MA 02138

DR JIMMY HARDIN
MISSISSIPPI STATE UNIV: DRAWER AR
MISSISSIPPI STATE, MS 39762

DR TIMOTHY HARRISON
4 BANCROFT AVENUE; 2ND FLOOR
TORONTO, ON M5S 1C1

CHARLES E JONES
69 TIEMANN PLACE; APT 58
NEW YORK, NY 10027

MRS NORMA KERSHAW
25686 MORALES
MISSION VIEJO, CA 92691

DR MORAG M KERSEL
1354 E 48TH ST; APT 3E
CHICAGO, IL 60615
ANN-MARIE KNOBLAUCH
409 ELLETT ROAD
VIRGINIA, VA 24060

DR OYSTEIN S LABIANCA
4075 LAKE CHAPIN ROAD
BERRIEN SPRINGS, MI 49103-9654

DR C C LAMBERG-KARLOVSKY
11 DIVINITY AVENUE
CAMBRIDGE, MA 02138

DR GEORGE LANDES
2521 BELLVIEW ROAD
SCHNECKSVILLE, PA 18078

W MARK LANIER
6810 FM 1960 ROAD WEST
HOUSTON, TX 77069

P E MACALLISTER
7515 EAST 30TH ST
INDIANAPOLIS, IN 46206

DR CAROL MEYERS
P O BOX 90964
DURHAM, NC 27708-0964
AMERICAN SCHOOLS OF ORIENTAL

DR ERIC MEYERS
P O BOX 90964
DURHAM, NC 27708-0964

ELIZABETH MOYNIHAN
65 CENTRAL PARK WEST; APT 2D
NEW YORK, NY 10023

ROBERT MULLINS
585 E BONITA AVE; #F
SAN DIMAS, CA 91773

DR BETH ALPERT NAKHAI
P O BOX 210158B
TUCSON, AZ 85721-0158

ORLYN NELSON
27 NASHUA STREET
LEOMINSTER, MA 01453

DR KEVIN O'CONNELL
P O BOX 212074
AMMAN, JO 11121

ROBERT ODEN
5 NORTH BALCH STREET

DAA
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMERICAN SCHOOLS OF ORIENTAL</td>
<td>23-1352617</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>City, State, Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>HANOVER, NH 03755</td>
<td></td>
</tr>
<tr>
<td>DR SUZANNE RICHARD</td>
<td></td>
</tr>
<tr>
<td>250 STONEGATE DRIVE</td>
<td></td>
</tr>
<tr>
<td>ERIE, PA 16505</td>
<td></td>
</tr>
<tr>
<td>CHRISTOPHER A ROLLSTON PHD</td>
<td></td>
</tr>
<tr>
<td>ONE WALKER DRIVE</td>
<td></td>
</tr>
<tr>
<td>JOHNSON CITY, TN 37601</td>
<td></td>
</tr>
<tr>
<td>DR B W RUFFNER</td>
<td></td>
</tr>
<tr>
<td>3021 E BROW ROAD</td>
<td></td>
</tr>
<tr>
<td>SIGNAL MOUNTAIN, TN 37377</td>
<td></td>
</tr>
<tr>
<td>GLENN M SCHWARTZ</td>
<td></td>
</tr>
<tr>
<td>JOHNS Hopkins UNIVERSITY</td>
<td></td>
</tr>
<tr>
<td>BALTIMORE, MD 21218</td>
<td></td>
</tr>
<tr>
<td>DR JOE SEGER</td>
<td></td>
</tr>
<tr>
<td>MISSISSIPPI STATE UNIV; DRAWER AR</td>
<td></td>
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<tr>
<td>MISSISSIPPI STATE, MS 39762</td>
<td></td>
</tr>
<tr>
<td>AUDREY SHAFFER</td>
<td></td>
</tr>
<tr>
<td>880 ENCANTO STREET</td>
<td></td>
</tr>
<tr>
<td>CORONA, CA 92881-3501</td>
<td></td>
</tr>
<tr>
<td>DR SUSAN SHERIDAN</td>
<td></td>
</tr>
<tr>
<td>Name of the organization</td>
<td>Employer identification number</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>AMERICAN SCHOOLS OF ORIENTAL</td>
<td>23-1352617</td>
</tr>
</tbody>
</table>

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**DR RANDALL YOUNKER**
INSTITUTE OF ARCHEOLOGY
Berrien Springs, MI 49104
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE. FORM 990 IS THEN MADE AVAILABLE TO THE WHOLE BOARD UPON REQUEST.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

EACH MEMBER OF THE BOARD AND VARIOUS COMMITTEES MUST EXECUTE AND SUBMIT A CONFLICT-OF-INTEREST QUESTIONNAIRE ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

COMPENSATION REVIEWED AND RECOMMENDED BY TREASURER, PRESIDENT AND PERSONNEL COMMITTEE. THE PERSONNEL COMMITTEE CONDUCTS AN ANNUAL EVALUATION.

RECOMMENDATIONS OF COMPENSATION SUBMITTED BY THE PERSONNEL COMMITTEE ARE THEN REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

FORM 990 IS POSTED ON WEBSITE.
## Depreciation and Amortization

**Including Information on Listed Property**

### INDIRECT DEPRECIATION

**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.

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
<th>Cost (business use only)</th>
<th>Elected cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Maximum amount (see instructions)</td>
<td>500,000</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Total cost of section 179 property placed in service (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Threshold cost of section 179 property before reduction in limitation (see instructions)</td>
<td>2,000,000</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part II  
Special Depreciation Allowance and Other Depreciation

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Listed property. Enter the amount from line 29</td>
</tr>
<tr>
<td>8</td>
<td>Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7</td>
</tr>
<tr>
<td>9</td>
<td>Tentative deduction. Enter the smaller of line 5 or line 8</td>
</tr>
<tr>
<td>10</td>
<td>Carryover of disallowed deduction from line 13 of your 2009 Form 4562</td>
</tr>
<tr>
<td>11</td>
<td>Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)</td>
</tr>
<tr>
<td>12</td>
<td>Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11</td>
</tr>
<tr>
<td>13</td>
<td>Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12</td>
</tr>
</tbody>
</table>

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

### Part III  
MACRS Depreciation

**Section A**  
MACRS deductions for assets placed in service in tax years beginning before 2010

<table>
<thead>
<tr>
<th></th>
<th>Classification of property</th>
<th>Month and year placed in service</th>
<th>Basis for depreciation (business/investment use only—see instructions)</th>
<th>Recovery period</th>
<th>Convention</th>
<th>Method</th>
<th>Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>18a</td>
<td>3-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18b</td>
<td>5-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18c</td>
<td>7-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18d</td>
<td>10-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18e</td>
<td>15-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18f</td>
<td>20-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18g</td>
<td>25-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18h</td>
<td>Residential rental property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18i</td>
<td>Nonresidential real property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Classification of property</th>
<th>Month and year placed in service</th>
<th>Basis for depreciation (business/investment use only—see instructions)</th>
<th>Recovery period</th>
<th>Convention</th>
<th>Method</th>
<th>Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>19a</td>
<td>3-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b</td>
<td>5-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19c</td>
<td>7-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19d</td>
<td>10-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19e</td>
<td>15-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19f</td>
<td>20-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19g</td>
<td>25-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19h</td>
<td>Residential rental property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19i</td>
<td>Nonresidential real property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Classification of property</th>
<th>Month and year placed in service</th>
<th>Basis for depreciation (business/investment use only—see instructions)</th>
<th>Recovery period</th>
<th>Convention</th>
<th>Method</th>
<th>Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>20a</td>
<td>Class life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20b</td>
<td>12-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20c</td>
<td>40-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV  
Summary

<table>
<thead>
<tr>
<th></th>
<th>Description of property</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>Listed property. Enter amount from line 28</td>
</tr>
<tr>
<td>22</td>
<td>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 instructions</td>
</tr>
<tr>
<td>23</td>
<td>For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see separate instructions.
Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.