

**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)

OMB No 1545-0047

**2005**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2005 calendar year, or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C** Name of organization: **HUMANE SOCIETY OF UTAH**  
 Number and street (or P.O. box if mail is not delivered to street address): **4242 S 300 W**  
 Room/suite: \_\_\_\_\_  
 City or town, state or country, and ZIP + 4: **MURRAY, UT 84107**

**D** Employer identification number: **87-0256350**

**E** Telephone number: **801-261-2919**

**F** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

**G** Website: **NONE**

**J** Organization type (check only one):  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

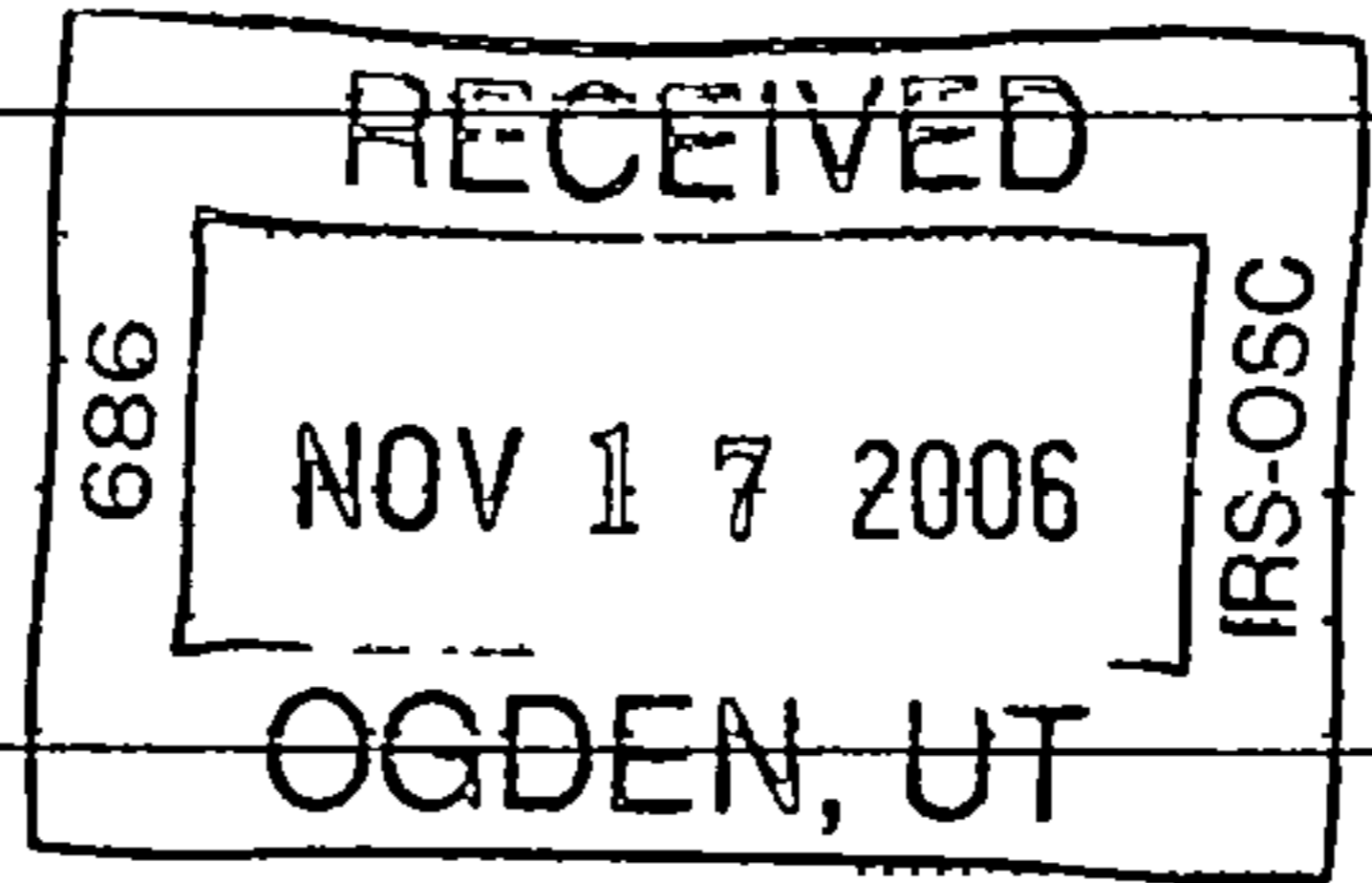
**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return**

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: **1,841,747.**

**H and I are not applicable to section 527 organizations**  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates: **N/A**  
**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I** Group Exemption Number: **N/A**  
**M** Check  if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

| Revenue           |   |                |            |           |  |
|-------------------|---|----------------|------------|-----------|--|
| 1                 | Contributions, gifts, grants, and similar amounts received:   |                |            |           |  |
| a                 | Direct public support   | 1a             | 677,231.   |           |  |
| b                 | Indirect public support   | 1b             |            |           |  |
| c                 | Government contributions (grants)   | 1c             |            |           |  |
| d                 | Total (add lines 1a through 1c) (cash \$ <u>677,231.</u> noncash \$ _____ )                                       | 1d             | 677,231.   |           |  |
| 2                 | Program service revenue including government fees and contracts (from Part VII, line 93)                          | 2              | 1,056,816. |           |  |
| 3                 | Membership dues and assessments   | 3              |            |           |  |
| 4                 | Interest on savings and temporary cash investments  | 4              | 60,319.    |           |  |
| 5                 | Dividends and interest from securities  | 5              |            |           |  |
| 6 a               | Gross rents <b>SEE STATEMENT 1</b>  | 6a             | 18,275.    |           |  |
| b                 | Less: rental expenses <b>SEE STATEMENT 2</b>  | 6b             | 24,220.    |           |  |
| c                 | Net rental income or (loss) (subtract line 6b from line 6a)   | 6c             | <5,945.>   |           |  |
| 7                 | Other investment income (describe _____ )   | 7              |            |           |  |
| 8 a               | Gross amount from sales of assets other than inventory  | (A) Securities |            | (B) Other |  |
| b                 | Less: cost or other basis and sales expenses  | 8a             |            |           |  |
| c                 | Gain or (loss) (attach schedule)  | 8b             |            |           |  |
| d                 | Net gain or (loss) (combine line 8c, columns (A) and (B))   | 8c             |            |           |  |
| 8d                |   | 8d             |            |           |  |
| 9                 | Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/> |                |            |           |  |
| a                 | Gross revenue (not including \$ _____ of contributions reported on line 1a)                                       | 9a             |            |           |  |
| b                 | Less direct expenses other than fundraising expenses  | 9b             |            |           |  |
| c                 | Net income or (loss) from special events (subtract line 9b from line 9a)  | 9c             |            |           |  |
| 10 a              | Gross sales of inventory, less returns and allowances   | 10a            | 29,106.    |           |  |
| b                 | Less cost of goods sold <b>STATEMENT 4</b>  | 10b            | 16,578.    |           |  |
| c                 | Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) <b>STMT 3</b>  | 10c            | 12,528.    |           |  |
| 11                | Other revenue (from Part VII, line 103)   | 11             |            |           |  |
| 12                | <b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)                                       | 12             | 1,800,949. |           |  |
| <b>Expenses</b>   |   |                |            |           |  |
| 13                | Program services (from line 44, column (B))   | 13             | 1,394,608. |           |  |
| 14                | Management and general (from line 44, column (C))   | 14             | 185,680.   |           |  |
| 15                | Fundraising (from line 44, column (D))  | 15             | 195,079.   |           |  |
| 16                | Payments to affiliates (attach schedule)  | 16             |            |           |  |
| 17                | <b>Total expenses</b> (add lines 13 and 14, column (A))   | 17             | 1,775,367. |           |  |
| 18                | Excess or (deficit) for the year (subtract line 17 from line 12)  | 18             | 25,582.    |           |  |
| <b>Net Assets</b> |   |                |            |           |  |
| 19                | Net assets or fund balances at beginning of year (from line 73, column (A))                                       | 19             | 3,824,821. |           |  |
| 20                | Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 5</b>                          | 20             | 38,367.    |           |  |
| 21                | Net assets or fund balances at end of year (combine lines 18, 19, and 20)   | 21             | 3,888,770. |           |  |



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**Part II Statement of Functional Expenses** All organizations must complete column (A); Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

| Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I  | (A) Total     | (B) Program services | (C) Management and general | (D) Fundraising |
|---|---------------|----------------------|----------------------------|-----------------|
| 22 Grants and allocations (attach schedule)<br>(cash \$ <u>0.</u> noncash \$ <u>0.</u> )<br>If this amount includes foreign grants, check here <input type="checkbox"/> | 22            |                      |                            |                 |
| 23 Specific assistance to individuals (attach schedule)   | 23            |                      |                            |                 |
| 24 Benefits paid to or for members (attach schedule)  | 24            |                      |                            |                 |
| 25 Compensation of officers, directors, etc   | 25 169,525.   | 169,525.             | 0.                         | 0.              |
| 26 Other salaries and wages   | 26 703,638.   | 614,382.             | 49,207.                    | 40,049.         |
| 27 Pension plan contributions   | 27            |                      |                            |                 |
| 28 Other employee benefits  | 28 86,144.    | 60,187.              | 21,146.                    | 4,811.          |
| 29 Payroll taxes  | 29 75,243.    | 67,163.              | 4,640.                     | 3,440.          |
| 30 Professional fundraising fees  | 30 12,000.    |                      |                            | 12,000.         |
| 31 Accounting fees  | 31 9,982.     | 7,264.               | 2,610.                     | 108.            |
| 32 Legal fees   | 32            |                      |                            |                 |
| 33 Supplies   | 33 52,428.    | 36,042.              | 16,207.                    | 179.            |
| 34 Telephone  | 34 12,713.    | 9,239.               | 3,344.                     | 130.            |
| 35 Postage and shipping   | 35 83,285.    |                      |                            | 83,285.         |
| 36 Occupancy  | 36            |                      |                            |                 |
| 37 Equipment rental and maintenance   | 37 44,341.    | 23,499.              | 18,308.                    | 2,534.          |
| 38 Printing and publications  | 38            |                      |                            |                 |
| 39 Travel   | 39            |                      |                            |                 |
| 40 Conferences, conventions, and meetings   | 40            |                      |                            |                 |
| 41 Interest   | 41            |                      |                            |                 |
| 42 Depreciation, depletion, etc (attach schedule)   | 42 119,146.   | 105,575.             | 8,114.                     | 5,457.          |
| 43 Other expenses not covered above (itemize)   |               |                      |                            |                 |
| a _____   | 43a           |                      |                            |                 |
| b _____   | 43b           |                      |                            |                 |
| c _____   | 43c           |                      |                            |                 |
| d _____   | 43d           |                      |                            |                 |
| e _____   | 43e           |                      |                            |                 |
| f _____   | 43f           |                      |                            |                 |
| g <b>SEE STATEMENT 6</b>  | 43g 406,922.  | 301,732.             | 62,104.                    | 43,086.         |
| 44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)                                     | 44 1,775,367. | 1,394,608.           | 185,680.                   | 195,079.        |

**Joint Costs.** Check  if you are following SOP 98-2  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;  
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

| What is the organization's primary exempt purpose? <b>HUMANE TREATMENT OF ANIMALS</b>  | Program Service Expenses<br>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others) |
|--|--|
| All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) |  |
| <b>a LOW COST CLINIC FOR ANIMAL SURGERY</b>  |  |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>   | 579,938.   |
| <b>b ANIMAL SHELTER</b>  |  |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>   | 567,101.   |
| <b>c OUTREACH ADOPTION</b>   |  |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>   | 132,151.   |
| <b>d INVESTIGATIONS</b>  |  |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>   | 60,661.  |
| <b>e Other program services (attach schedule) SEE STATEMENT 7</b>  |  |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>   | 54,757.  |
| <b>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</b>  | 1,394,608.   |

Form 990 (2005)

**Part IV Balance Sheets** (See the instructions)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

|                             |   | --(A)--   |  | --(B)--     |            |            |
|-----------------------------|---|---|--|-------------|------------|------------|
|                             |   | Beginning of year   |  | End of year |            |            |
| Assets                      | 45  | Cash - non-interest-bearing                                       | 349,437.   | 45          | 383,632.   |            |
|                             | 46  | Savings and temporary cash investments                            |  | 46          |            |            |
|                             | 47 a  | Accounts receivable   | 52,464.  |             |            |            |
|                             |   | b Less allowance for doubtful accounts                            |  | 28,459.     | 47c        | 52,464.    |
|                             | 48 a  | Pledges receivable  |  |             |            |            |
|                             |   | b Less allowance for doubtful accounts                            |  |             | 48c        |            |
|                             | 49  | Grants receivable   |  |             | 49         |            |
|                             | 50  | Receivables from officers, directors, trustees, and key employees |  |             | 50         |            |
|                             | 51 a  | Other notes and loans receivable                                  |  |             |            |            |
|                             |   | b Less allowance for doubtful accounts                            |  |             | 51c        |            |
|                             | 52  | Inventories for sale or use                                       |  |             | 52         |            |
|                             | 53  | Prepaid expenses and deferred charges                             |  |             | 53         |            |
|                             | 54  | Investments - securities  | STMT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV | 1,625,836.  | 54         | 1,650,863. |
|                             | 55 a  | Investments - land, buildings, and equipment basis                | 55a  | 136,800.    |            |            |
|                             |   | b Less accumulated depreciation                                   | 55b  | 47,522.     | 92,933.    | 55c        |
| 56                          | Investments - other   |   |  | 56          |            |            |
| 57 a                        | Land, buildings, and equipment basis  | 57a   | 3,242,724.   |             |            |            |
|                             | b Less accumulated depreciation   | 57b   | 1,447,171.   | 1,898,991.  | 57c        | 1,795,553. |
| 58                          | Other assets (describe <input type="checkbox"/> )   |   |  | 58          |            |            |
| 59                          | <b>Total assets</b> (must equal line 74) Add lines 45 through 58  |   | 3,995,656.   | 59          | 3,971,790. |            |
| Liabilities                 | 60  | Accounts payable and accrued expenses                             | 121,831.   | 60          | 34,476.    |            |
|                             | 61  | Grants payable  |  | 61          |            |            |
|                             | 62  | Deferred revenue  |  | 62          |            |            |
|                             | 63  | Loans from officers, directors, trustees, and key employees       |  | 63          |            |            |
|                             | 64 a  | Tax-exempt bond liabilities                                       |  | 64a         |            |            |
|                             |   | b Mortgages and other notes payable                               |  | 64b         |            |            |
| 65                          | Other liabilities (describe <input type="checkbox"/> <b>ACCRUED LIABILITIES</b> )   |   | 49,004.  | 65          | 48,544.    |            |
| 66                          | <b>Total liabilities.</b> Add lines 60 through 65)  |   | 170,835.   | 66          | 83,020.    |            |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74                 |   |  |             |            |            |
|                             | 67  | Unrestricted  | 2,195,368.   | 67          | 2,236,166. |            |
|                             | 68  | Temporarily restricted  | 3,617.   | 68          | 1,741.     |            |
|                             | 69  | Permanently restricted  | 1,625,836.   | 69          | 1,650,863. |            |
|                             | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74   |   |  |             |            |            |
|                             | 70  | Capital stock, trust principal, or current funds                  |  | 70          |            |            |
|                             | 71  | Paid-in or capital surplus, or land, building, and equipment fund |  | 71          |            |            |
|                             | 72  | Retained earnings, endowment, accumulated income, or other funds  |  | 72          |            |            |
| 73                          | <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19, column (B) must equal line 21) |   | 3,824,821.   | 73          | 3,888,770. |            |
| 74                          | <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73  |   | 3,995,656.   | 74          | 3,971,790. |            |



Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) Yes No

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization-business at-board meetings 9
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) 75b X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? 75c X
Note. Related organizations include section 509(a)(3) supporting organizations
If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization
d Does the organization have a written conflict of interest policy? 75d X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column See the instructions )

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 contains 'NONE' in column A.

Part VI Other Information (See the instructions ) Yes No

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 76 X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes 77 X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78a X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 78b
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization? 80a X
b If "Yes," enter the name of the organization N/A and check whether it is [ ] exempt or [ ] nonexempt
81 a Enter direct or indirect political expenditures (See line 81 instructions ) 81a 0.
b Did the organization file Form 1120-POL for this year? 81b X

| Part VI - Other Information (continued) |  | Yes | No  |
|---|--|-----|-----|
| 82 a                                    | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?  |     | X   |
| b                                       | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)   |     |     |
|   | 82b  |     | N/A |
| 83 a                                    | Did the organization comply with the public inspection requirements for returns and exemption applications?  | X   |     |
| b                                       | Did the organization comply with the disclosure requirements relating to quid pro quo contributions?   | X   |     |
| 84 a                                    | Did the organization solicit any contributions or gifts 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?  |     |     |
|   |  |     | N/A |
| 85                                      | 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?   |     |     |
|   |  |     | N/A |
| b                                       | Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year  |     |     |
|   |  |     | N/A |
| c                                       | Dues, assessments, and similar amounts from members  |     |     |
|   | 85c  |     | N/A |
| d                                       | Section 162(e) lobbying and political expenditures   |     |     |
|   | 85d  |     | N/A |
| e                                       | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices   |     |     |
|   | 85e  |     | N/A |
| f                                       | Taxable amount of lobbying and political expenditures (line 85d less 85e)  |     |     |
|   | 85f  |     | N/A |
| g                                       | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  |     |     |
|   |  |     | N/A |
| 85g                                     |  |     |     |
| h                                       | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?   |     |     |
|   |  |     | N/A |
| 85h                                     |  |     |     |
| 86                                      | 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12  |     |     |
|   | 86a  |     | N/A |
| b                                       | Gross receipts, included on line 12, for public use of club facilities   |     |     |
|   | 86b  |     | N/A |
| 87                                      | 501(c)(12) organizations Enter a Gross income from members or shareholders   |     |     |
|   | 87a  |     | N/A |
| b                                       | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  |     |     |
|   | 87b  |     | N/A |
| 88                                      | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX   |     | X   |
| 88                                      |  |     |     |
| 89 a                                    | 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>   |     |     |
| b                                       | 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction   |     | X   |
| 89b                                     |  |     |     |
| c                                       | Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>   |     |     |
| d                                       | Enter Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>   |     |     |
| 90 a                                    | List the states with which a copy of this return is filed <u>UT</u>  |     |     |
| b                                       | Number of employees employed in the pay period that includes March 12, 2005  | 90b | 41  |
| 91 a                                    | The books are in care of <u>GENE BAIERSCHMIDT</u> Telephone no <u>801-2612919</u><br>Located at <u>4242 SOUTH 300 WEST, MURRAY, UT</u> ZIP + 4 <u>84107</u>  |     |     |
| b                                       | 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)?<br>If "Yes," enter the name of the foreign country <u>N/A</u><br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | 91b | X   |
| c                                       | At any time during the calendar year, did the organization maintain an office outside of the United States?<br>If "Yes," enter the name of the foreign country <u>N/A</u>  | 91c | X   |
| 92                                      | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the tax year <u>N/A</u>   | 92  |     |

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

|   | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (E)<br>Related or exempt<br>function income |
|---|---------------------------|---------------|--------------------------------------|---------------|---|
|   | (A)<br>Business<br>code   | (B)<br>Amount | (C)<br>Exclu-<br>sion<br>code        | (D)<br>Amount |   |
| <b>Note:</b> Enter gross amounts unless otherwise indicated.    |                           |               |                                      |               |   |
| 93 Program service revenue                                      |                           |               |                                      |               |   |
| a <b>ADOPTION FEES</b>  |                           |               |                                      |               | 492,151.                                    |
| b <b>CLINIC FEES</b>  |                           |               |                                      |               | 548,653.                                    |
| c <b>OTHER SUPPORT</b>  |                           |               |                                      |               | 16,012.                                     |
| d _____   |                           |               |                                      |               |   |
| e _____   |                           |               |                                      |               |   |
| f Medicare/Medicaid payments                                    |                           |               |                                      |               |   |
| g Fees and contracts from government agencies                   |                           |               |                                      |               |   |
| 94 Membership dues and assessments                              |                           |               |                                      |               |   |
| 95 Interest on savings and temporary cash investments           |                           |               |                                      |               | 60,319.                                     |
| 96 Dividends and interest from securities                       |                           |               |                                      |               |   |
| 97 Net rental income or (loss) from real estate.                |                           |               |                                      |               |   |
| a debt-financed property  |                           |               |                                      |               |   |
| b not debt-financed property                                    | 532000                    | <5,945.>      |                                      |               |   |
| 98 Net rental income or (loss) from personal property           |                           |               |                                      |               |   |
| 99 Other investment income                                      |                           |               |                                      |               |   |
| 100 Gain or (loss) from sales of assets<br>other than inventory |                           |               |                                      |               |   |
| 101 Net income or (loss) from special events                    |                           |               |                                      |               |   |
| 102 Gross profit or (loss) from sales of inventory              |                           |               |                                      |               | 12,528.                                     |
| 103 Other revenue   |                           |               |                                      |               |   |
| a _____   |                           |               |                                      |               |   |
| b _____   |                           |               |                                      |               |   |
| c _____   |                           |               |                                      |               |   |
| d _____   |                           |               |                                      |               |   |
| e _____   |                           |               |                                      |               |   |
| 104 Subtotal (add columns (B), (D), and (E))                    |                           | <5,945.>      |                                      | 0.            | 1,129,663.                                  |
| 105 Total (add line 104, columns (B), (D), and (E))             |                           |               |                                      |               | 1,123,718.                                  |

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions)

| Line No | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). |
|---------|---|
| ▼       | PROVIDE RESOURCES TO ASSIST IN HUMANE TREATMENT OF ANIMALS  |
|         |   |
|         |   |

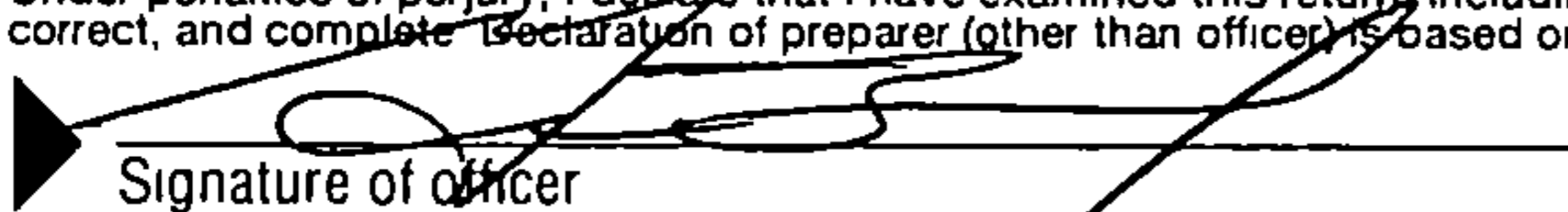
**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions)

| (A)<br>Name, address, and EIN of corporation,<br>partnership, or disregarded entity | (B)<br>Percentage of<br>ownership interest | (C)<br>Nature of activities | (D)<br>Total income | (E)<br>End-of-year<br>assets |
|---|--|-----------------------------|---------------------|------------------------------|
| N/A   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Signature of officer:  Date: 11-15-06 Type or print name and title: GENE BAIERESCHMIDT, EXECUTIVE DIRECTOR

Paid Preparer's Use Only: Preparer's signature: David M. Sperry CPA Date: 11-15-06 Check if self-employed:  Preparer's SSN or PTIN: P00176382

Firm's name (or yours if self-employed), address, and ZIP + 4: TANNER, LC CPAS 215 SOUTH STATE STREET, SUITE 800 SALT LAKE CITY, UT 84111

EIN: Phone no.: 801-532-7444

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization: **HUMANE SOCIETY OF UTAH**  
Employer identification number: **87 0256350**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

| (a) Name and address of each employee paid more than \$50,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| <u>PAUL W CHAPIN</u>  | <u>VETERINARIAN</u><br>40.00                             | 69,525.          | 0.  | 0.                                       |
| <u>GENE BAIERSCHMIDT</u>                                      | <u>EXECUTIVE DIRECTOR</u><br>40.00                       | 55,000.          | 0.  | 0.                                       |
|   |  |                  |   |  |
|   |  |                  |   |  |
|   |  |                  |   |  |
|   |  |                  |   |  |
| Total number of other employees paid over \$50,000 ▶          | 0  |                  |   |  |

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms) If there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service          | (c) Compensation |
|---|------------------------------|------------------|
| <u>NEWPORT CREATIVE COMMUNICATIONS</u>                                      | <u>POSTAGE AND MARKETING</u> | 118,826.         |
|   |                              |                  |
|   |                              |                  |
|   |                              |                  |
|   |                              |                  |
| Total number of others receiving over \$50,000 for professional services ▶  | 0                            |                  |

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

| (a) Name and address of each independent contractor paid more than \$50,000    | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| <u>NONE</u>  |                     |                  |
|  |                     |                  |
|  |                     |                  |
|  |                     |                  |
|  |                     |                  |
| Total number of other contractors receiving over \$50,000 for other services ▶ | 0                   |                  |

| <b>Part III</b> Statements About Activities (See page 2 of the instructions.) |  | Yes | No |
|---|--|-----|----|
| 1   | During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)<br>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. |     | X  |
| 2   | During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)  |     |    |
| a   | Sale, exchange, or leasing of property?  |     | X  |
| b   | Lending of money or other extension of credit?   |     | X  |
| c   | Furnishing of goods, services, or facilities?  |     | X  |
| d   | Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?  | X   |    |
| e   | Transfer of any part of its income or assets?  |     | X  |
| 3 a   | Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)  |     | X  |
| b   | Do you have a section 403(b) annuity plan for your employees?  | X   |    |
| c   | During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?   |     | X  |
| 4 a   | Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?  |     | X  |
| b   | Do you provide credit counseling, debt management, credit repair, or debt negotiation services?  |     | X  |

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

- The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)
- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
  - 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V.)
  - 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii).
  - 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
  - 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► \_\_\_\_\_
  - 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
  - 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
  - 11b  A community trust. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
  - 12  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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
  - 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization:  Type 1  Type 2  Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

| (a) Name(s) of supported organization(s) | (b) Line number from above |
|--|----------------------------|
|  |                            |
|  |                            |
|  |                            |

14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.  
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

| Calendar year (or fiscal year beginning in)   | (a) 2004   | (b) 2003   | (c) 2002   | (d) 2001   | (e) Total      |
|---|------------|------------|------------|------------|----------------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)  | 466,869.   | 2,289,574. | 625,759.   | 682,044.   | 4,064,246.     |
| 16 Membership fees received   |            |            |            |            |                |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose  | 979,888.   | 902,655.   | 835,954.   | 786,886.   | 3,505,383.     |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975   | 9,817.     | 7,243.     | 7,339.     | 9,729.     | 34,128.        |
| 19 Net income from unrelated business activities not included in line 18  |            |            |            |            |                |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf   |            |            |            |            |                |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.  |            |            |            |            |                |
| 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.  |            |            |            |            |                |
| 23 Total of lines 15 through 22   | 1,456,574. | 3,199,472. | 1,469,052. | 1,478,659. | 7,603,757.     |
| 24 Line 23 minus line 17  | 476,686.   | 2,296,817. | 633,098.   | 691,773.   | 4,098,374.     |
| 25 Enter 1% of line 23  | 14,566.    | 31,995.    | 14,691.    | 14,787.    |                |
| 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24   |            |            |            |            | 26a 81,967.    |
| b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts  |            |            |            |            | 26b 0.         |
| c Total support for section 509(a)(1) test. Enter line 24, column (e)   |            |            |            |            | 26c 4,098,374. |
| d Add: Amounts from column (e) for lines: 18 34,128. 19 _____ 22 _____ 26b _____  |            |            |            |            | 26d 34,128.    |
| e Public support (line 26c minus line 26d total)  |            |            |            |            | 26e 4,064,246. |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator))  |            |            |            |            | 26f 99.1673%   |
| 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A  | (2004)     | (2003)     | (2002)     | (2001)     |                |
| b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A | (2004)     | (2003)     | (2002)     | (2001)     |                |
| c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____  |            |            |            |            | 27c N/A        |
| d Add: Line 27a total _____ and line 27b total _____  |            |            |            |            | 27d N/A        |
| e Public support (line 27c total minus line 27d total)  |            |            |            |            | 27e N/A        |
| f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)   |            |            |            |            | 27f N/A        |
| g Public support percentage (line 27e (numerator) divided by line 27f (denominator))  |            |            |            |            | 27g N/A %      |
| h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))  |            |            |            |            | 27h N/A %      |
| 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.  | NONE       |            |            |            |                |

**Part V Private School Questionnaire** (See page 7 of the instructions)

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

|      |  | Yes | No |
|------|--|-----|----|
| 29   | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?  |     |    |
| 30   | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?   |     |    |
| 31   | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?<br>If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement.) |     |    |
| 32   | Does the organization maintain the following:  |     |    |
| a    | Records indicating the racial composition of the student body, faculty, and administrative staff?  |     |    |
| b    | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  |     |    |
| c    | Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  |     |    |
| d    | Copies of all material used by the organization or on its behalf to solicit contributions?<br>If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)   |     |    |
| 33   | Does the organization discriminate by race in any way with respect to:   |     |    |
| a    | Students' rights or privileges?  |     |    |
| b    | Admissions policies?   |     |    |
| c    | Employment of faculty or administrative staff?   |     |    |
| d    | Scholarships or other financial assistance?  |     |    |
| e    | Educational policies?  |     |    |
| f    | Use of facilities?   |     |    |
| g    | Athletic programs?   |     |    |
| h    | Other extracurricular activities?<br>If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)   |     |    |
| 34 a | Does the organization receive any financial aid or assistance from a governmental agency?  |     |    |
| b    | Has the organization's right to such aid ever been revoked or suspended?<br>If you answered "Yes" to either 34a or b, please explain using an attached statement.  |     |    |
| 35   | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation  |     |    |





FORM 990 RENTAL INCOME STATEMENT - 1

| KIND AND LOCATION OF PROPERTY      | ACTIVITY NUMBER | GROSS RENTAL INCOME |
|------------------------------------|-----------------|---------------------|
| BUTTERFIELD PROPERTIES             | 1               | 18,275.             |
| TOTAL TO FORM 990, PART I, LINE 6A |                 | 18,275.             |

FORM 990 RENTAL EXPENSES STATEMENT 2

| DESCRIPTION                        | ACTIVITY NUMBER | AMOUNT  | TOTAL   |
|------------------------------------|-----------------|---------|---------|
| RENTAL EXPENSE                     |                 | 24,220. |         |
| - SUBTOTAL -                       | 1               |         | 24,220. |
| TOTAL TO FORM 990, PART I, LINE 6B |                 |         | 24,220. |

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME

|  |        |        |
|--|--------|--------|
| 1. GROSS RECEIPTS . . . . .                    | 29,106 |        |
| 2. RETURNS AND ALLOWANCES . . . . .            |        |        |
| 3. LINE 1 LESS LINE 2 . . . . .                |        | 29,106 |
| 4. COST OF GOODS SOLD (LINE 13) . . . . .      | 16,578 |        |
| 5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . . |        | 12,528 |

COST OF GOODS SOLD

|  |        |        |
|--|--------|--------|
| 6. INVENTORY AT BEGINNING OF YEAR . . . . .            |        |        |
| 7. MERCHANDISE PURCHASED . . . . .                     |        |        |
| 8. COST OF LABOR . . . . .                             |        |        |
| 9. MATERIALS AND SUPPLIES . . . . .                    |        |        |
| 10. OTHER COSTS . . . . .                              | 16,578 |        |
| 11. ADD LINES 6 THROUGH 10 . . . . .                   |        | 16,578 |
| 12. INVENTORY AT END OF YEAR . . . . .                 |        |        |
| 13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). . . . . |        | 16,578 |

| FORM 990                                     | COST OF GOODS SOLD - OTHER COSTS | STATEMENT | 4 |
|--|----------------------------------|-----------|---|
| DESCRIPTION                                  |                                  | AMOUNT    |   |
| OTHER MISCELLANEOUS COSTS                    |                                  | 16,578.   |   |
| TOTAL INCLUDED ON FORM 990, PART I, LINE 10B |                                  | 16,578.   |   |

| FORM 990                           | OTHER CHANGES IN NET ASSETS OR FUND BALANCES | STATEMENT | 5 |
|------------------------------------|--|-----------|---|
| DESCRIPTION                        |  | AMOUNT    |   |
| UNREALIZED GAINS ON SECURITIES     |  | 38,367.   |   |
| TOTAL TO FORM 990, PART I, LINE 20 |  | 38,367.   |   |

| FORM 990                            | OTHER EXPENSES |                            |                                  |                    | STATEMENT | 6 |
|-------------------------------------|----------------|----------------------------|----------------------------------|--------------------|-----------|---|
| DESCRIPTION                         | (A)<br>TOTAL   | (B)<br>PROGRAM<br>SERVICES | (C)<br>MANAGEMENT<br>AND GENERAL | (D)<br>FUNDRAISING |           |   |
| ADVERTISING EXPENSE                 | 28,791.        | 17,018.                    | 11,603.                          | 170.               |           |   |
| OFFICE EXPENSE                      | 30,491.        | 13,080.                    | 2,020.                           | 15,391.            |           |   |
| OUTSIDE SERVICE<br>EXPENSE          | 7,828.         | 6,548.                     | 1,216.                           | 64.                |           |   |
| LIABILITY INSURANCE<br>EXPENSE      | 19,497.        | 15,734.                    | 3,529.                           | 234.               |           |   |
| SURGICAL AND<br>VACCINATION EXPENSE | 147,236.       | 147,236.                   | 0.                               | 0.                 |           |   |
| OTHER MISCELLANEOUS<br>EXPENSES     | 70,284.        | 17,894.                    | 26,129.                          | 26,261.            |           |   |
| ANIMAL COST EXPENSE                 | 15,043.        | 15,043.                    | 0.                               | 0.                 |           |   |
| BUILDING REPAIR                     | 20,899.        | 14,692.                    | 5,997.                           | 210.               |           |   |
| UTILITIES                           | 66,853.        | 54,487.                    | 11,610.                          | 756.               |           |   |
| TOTAL TO FM 990, LN 43              | 406,922.       | 301,732.                   | 62,104.                          | 43,086.            |           |   |

FORM 990 OTHER PROGRAM SERVICES STATEMENT 7

| DESCRIPTION                         | GRANTS AND ALLOCATIONS | EXPENSES |
|-------------------------------------|------------------------|----------|
| EDUCATION                           |                        | 54,757.  |
| TOTAL TO FORM 990, PART III, LINE E |                        | 54,757.  |

FORM 990 OTHER SECURITIES STATEMENT 8

| SECURITY DESCRIPTION               | COST/FMV | OTHER SECURITIES |
|------------------------------------|----------|------------------|
| MARKETABLE SECURITIES              | FMV      | 1,289,567.       |
| BENEFICIAL INTEREST IN ASSETS HELD | FMV      | 361,296.         |
| TO FORM 990, LINE 54, COL B        |          | 1,650,863.       |

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 9

| DESCRIPTION   | AMOUNT  |
|---|---------|
| RECLASSIFICATION OF PROGRAM REVENUE TO GROSS SALES OF INVENTORY | 16,578. |
| TOTAL TO FORM 990, PART IV-A                                    | 16,578. |

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 10

| DESCRIPTION  | AMOUNT  |
|--|---------|
| RECLASSIFICATION OF PROGRAM EXPENSES TO COST OF GOODS SOLD | 16,578. |
| TOTAL TO FORM 990, PART IV-B                               | 16,578. |

FORM 990 PART V-A - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 11

| NAME AND ADDRESS   | TITLE AND<br>AVRG HRS/WK    | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE<br>ACCOUNT |
|--|-----------------------------|-------------------|---------------------------------|--------------------|
| PAUL W CHAPIN<br>8350 S TOP OF THE WORLD DR<br>SLC, UT             | VETERNARIAN<br>40.00        | 69,525.           | 0.                              | 0.                 |
| ERIC D BELNAP<br>845 E 500 S<br>BOUNTIFUL, UT                      | DIRECTOR/ OFFICER<br>0.00   | 0.                | 0.                              | 0.                 |
| MICHELLE LYNN CHRISTENSEN<br>601 E WALNUT BROOK DRIVE<br>MURRAY UT | DIRECTOR<br>0.00            | 0.                | 0.                              | 0.                 |
| CRAIG S COOK<br>3645 E 3100 S<br>SLC, UT                           | DIRECTOR/ PRESIDENT<br>0.00 | 0.                | 0.                              | 0.                 |
| JANET E HASKELL<br>7108 E KILLYONS CANYON<br>SLC, UT               | DIRECTOR<br>0.00            | 0.                | 0.                              | 0.                 |
| RANDY JOHN<br>9070 S NEWCASTLE CIRCLE<br>SANDY, UT                 | DIRECTOR/ TREASURER<br>0.00 | 0.                | 0.                              | 0.                 |
| JOANN SEGHINI<br>7890 PIONEER STREET<br>MIDVALE, UT                | DIRECTOR/ SECRETARY<br>0.00 | 0.                | 0.                              | 0.                 |
| LYNN WARD<br>480 NORTH HILLS DRIVE<br>SLC, UT                      | DIRECTOR<br>0.00            | 0.                | 0.                              | 0.                 |
| TIM J WILLIAMS<br>992 S VISTA VIEW DR<br>SLC, UT                   | DIRECTOR<br>0.00            | 0.                | 0.                              | 0.                 |
| GENE BAERSCHMIDT<br>4242 S 300 W<br>MURRAY, UT 84107               | EXECUTIVE DIRECTOR<br>40.00 | 55,000.           | 0.                              | 0.                 |
| SHAMA CHAPIN<br>4242 S 300 W<br>MURRAY UT 84107                    | VETERNARIAN<br>40.00        | 45,000.           | 0.                              | 0.                 |

STEVE STARLEY  
2445 SUGAR PLACE  
WEST JORDAN UT 84088

DIRECTOR

0.00

0.

0.

0.

TOTALS INCLUDED ON FORM 990, PART V-A

169,525.

0.

0.

Form **4562**

(Rev. January 2006)  
Department of the Treasury  
Internal Revenue Service

**Depreciation and Amortization 990**  
**(Including Information on Listed Property)**

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

OMB No 1545-0172

**2005**

Attachment  
Sequence No 67

|  |   |   |
|--|---|---|
| Name(s) shown on return<br><b>HUMANE SOCIETY OF UTAH</b> | Business or activity to which this form relates<br><b>FORM 990 PAGE 2</b> | Identifying number<br><b>87-0256350</b> |
|--|---|---|

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

|  |    |          |
|--|----|----------|
| 1 Maximum amount See the instructions for a higher limit for certain businesses  | 1  | 105,000. |
| 2 Total cost of section 179 property placed in service (see instructions)  | 2  |          |
| 3 Threshold cost of section 179 property before reduction in limitation  | 3  | 420,000. |
| 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-  | 4  |          |
| 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5  |          |
| 6 (a) Description of property (b) Cost (business use only) (c) Elected cost  |    |          |
| 7 Listed property Enter the amount from line 29  | 7  |          |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7  | 8  |          |
| 9 Tentative deduction Enter the smaller of line 5 or line 8  | 9  |          |
| 10 Carryover of disallowed deduction from line 13 of your 2004 Form 4562   | 10 |          |
| 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5  | 11 |          |
| 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11  | 12 |          |
| 13 Carryover of disallowed deduction to 2006 Add lines 9 and 10, less line 12  | 13 |          |

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

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

|   |    |  |
|---|----|--|
| 14 Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year | 14 |  |
| 15 Property subject to section 168(f)(1) election   | 15 |  |
| 16 Other depreciation (including ACRS)  | 16 |  |

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

**Section A**

|  |    |                          |
|--|----|--------------------------|
| 17 MACRS deductions for assets placed in service in tax years beginning before 2005  | 17 | 119,146.                 |
| 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here |    | <input type="checkbox"/> |

**Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System**

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property            |                                      |  |                     |                |            |                            |
| b 5-year property              |                                      |  |                     |                |            |                            |
| c 7-year property              |                                      |  |                     |                |            |                            |
| d 10-year property             |                                      |  |                     |                |            |                            |
| e 15-year property             |                                      |  |                     |                |            |                            |
| f 20-year property             |                                      |  |                     |                |            |                            |
| g 25-year property             |                                      |  | 25 yrs              |                | S/L        |                            |
| h Residential rental property  | /                                    |  | 27 5 yrs            | MM             | S/L        |                            |
|                                | /                                    |  | 27 5 yrs            | MM             | S/L        |                            |
| i Nonresidential real property | /                                    |  | 39 yrs              | MM             | S/L        |                            |
|                                | /                                    |  |                     | MM             | S/L        |                            |

**Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (see instructions)**

|  |    |          |
|--|----|----------|
| 21 Listed property Enter amount from line 28   | 21 |          |
| 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr | 22 | 119,146. |
| 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs   | 23 |          |

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)  
 Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

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

| 24a Do you have evidence to support the business/investment use claimed?  |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |                            | 24b If "Yes," is the evidence written?                       |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No |                               |                                 |
|---|-------------------------------|--|----------------------------|--|------------------------|--|-------------------------------|---------------------------------|
| (a)<br>Type of property<br>(list vehicles first)  | (b)<br>Date placed in service | (c)<br>Business/investment use percentage                | (d)<br>Cost or other basis | (e)<br>Basis for depreciation (business/investment use only) | (f)<br>Recovery period | (g)<br>Method/Convention                                 | (h)<br>Depreciation deduction | (i)<br>Elected section 179 cost |
| 25 Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use |                               |  |                            |  |                        |  | 25                            |                                 |
| 26 Property used more than 50% in a qualified business use  |                               |  |                            |  |                        |  |                               |                                 |
|   |                               | %  |                            |  |                        |  |                               |                                 |
|   |                               | %  |                            |  |                        |  |                               |                                 |
|   |                               | %  |                            |  |                        |  |                               |                                 |
| 27 Property used 50% or less in a qualified business use  |                               |  |                            |  |                        |  |                               |                                 |
|   |                               | %  |                            |  |                        | S/L -  |                               |                                 |
|   |                               | %  |                            |  |                        | S/L -  |                               |                                 |
|   |                               | %  |                            |  |                        | S/L -  |                               |                                 |
| 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1   |                               |  |                            |  |                        |  | 28                            |                                 |
| 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1  |                               |  |                            |  |                        |  |                               | 29                              |

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
 If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

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

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

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

|   | Yes | No |
|---|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  |     |    |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners |     |    |
| 39 Do you treat all use of vehicles by employees as personal use?   |     |    |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?   |     |    |
| 41 Do you meet the requirements concerning qualified automobile demonstration use?<br>Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles                          |     |    |

**Part VI Amortization**

| (a)<br>Description of costs  | (b)<br>Date amortization begins | (c)<br>Amortizable amount | (d)<br>Code section | (e)<br>Amortization period or percentage | (f)<br>Amortization for this year |
|--|---------------------------------|---------------------------|---------------------|--|-----------------------------------|
| 42 Amortization of costs that begins during your 2005 tax year               |                                 |                           |                     |  |                                   |
|  |                                 |                           |                     |  |                                   |
| 43 Amortization of costs that began before your 2005 tax year                |                                 |                           |                     |  | 43                                |
| 44 Total. Add amounts in column (f) See the instructions for where to report |                                 |                           |                     |  | 44                                |

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

## Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

|   |   |   |
|---|---|---|
| Type or print<br><br>File by the due date for filing your return See instructions | Name of Exempt Organization<br><b>HUMANE SOCIETY OF UTAH</b>  | Employer identification number<br><b>87-0256350</b> |
|   | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>4242 S 300 W</b>                       |   |
|   | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>MURRAY, UT 84107</b> |   |

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **GENE BAIERSCHMIDT**  
Telephone No. ▶ **801-2612919** FAX No. ▶ \_\_\_\_\_
- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole** group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

- I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **AUGUST 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
  - ▶  calendar year **2005** or
  - ▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions ..... \$ \_\_\_\_\_
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ..... \$ \_\_\_\_\_
- c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions ..... \$ **N/A**

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

If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy. Table with fields: Name of Exempt Organization (HUMANE SOCIETY OF UTAH), Employer identification number (87-0256350), Address (4242 S 300 W, MURRAY, UT 84107).

Check type of return to be filed (File a separate application for each return):

- Form 990 (checked), Form 990-EZ, Form 990-T (sec. 401(a) or 408(a) trust), Form 1041-A, Form 5227, Form 8870, Form 990-BL, Form 990-PF, Form 990-T (trust other than above), Form 4720, Form 6069.

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of GENE BAIERSCHMIDT, Telephone No. 801-2612919, FAX No.
If the organization does not have an office or place of business in the United States, check this box.
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN).

- 4 I request an additional 3-month extension of time until NOVEMBER 15, 2006.
5 For calendar year 2005, or other tax year beginning and ending.
6 If this tax year is for less than 12 months, check reason: Initial return, Final return, Change in accounting period.

7 State in detail why you need the extension. ADDITIONAL INFORMATION IS NEEDED IN ORDER TO PROCESS AN ACCURATE RETURN.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature: [Handwritten Signature] Title: CPA Date: 8/14/06

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
Other

Director By: Date

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Name: TANNER, LC CPAS
Number and street (include suite, room, or apt no.) or a P.O. box number: 215 SOUTH STATE STREET, SUITE 800
City or town, province or state, and country (including postal or ZIP code): SALT LAKE CITY, UT 84111

01/01/2005 - 12/31/2005

Depreciation Schedule for the Humane Society of Utah Note that this schedule was prepared & received by Tanner LC's tax department

| System No                        | S | Description  | Date In Service | Method / Conv. | Life    | Cost / Other Basis  | Bus / Inv. % | Sec. 179/ Bonus | Salvage/ Basis Adj. | Beg. Accum. Depreciation | Current Depreciation | Total Depreciation |
|----------------------------------|---|--------------|-----------------|----------------|---------|---------------------|--------------|-----------------|---------------------|--------------------------|----------------------|--------------------|
| <b>Auto Equipment</b>            |   |              |                 |                |         |                     |              |                 |                     |                          |                      |                    |
| 6                                |   | Auto         | 1/1/1989        | MSL / HY       | 5 0000  | 48,796.00           | 100 0000     | 0.00            | 0.00                | 48,796.00                | 0.00                 | 48,796.00          |
| 7                                |   | Pickup, 1997 | 4/18/1997       | SL / N/A       | 5 0000  | 19,463.59           | 100 0000     | 0.00            | 0.00                | 6,644.29                 | 0.00                 | 6,644.29           |
| 8                                |   | 2 Bed Shell  | 5/5/1997        | SL / N/A       | 5 0000  | 445.00              | 100 0000     | 0.00            | 0.00                | 445.00                   | 0.00                 | 445.00             |
| 9                                |   | Box          | 1/31/1998       | SL / N/A       | 5 0000  | 9,000.00            | 100 0000     | 0.00            | 0.00                | 9,000.00                 | 0.00                 | 9,000.00           |
| 115                              |   | Penske       | 7/1/2005        | M / HY         | 5 0000  | 8,198.00            | 100 0000     | 0.00            | 0.00                | 0.00                     | 1,639.60             | 1,639.60           |
| Subtotal Auto Equipment          |   |              |                 |                |         | 85,902.59           |              | 0.00            | 0.00                | 64,885.29                | 1,639.60             | 66,524.89          |
| Less dispositions and exchanges  |   |              |                 |                |         | 0.00                |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| <b>Net for: Auto Equipment</b>   |   |              |                 |                |         | <b>85,902.59</b>    |              | <b>0.00</b>     | <b>0.00</b>         | <b>64,885.29</b>         | <b>1,639.60</b>      | <b>66,524.89</b>   |
| <b>Auto-Outreach</b>             |   |              |                 |                |         |                     |              |                 |                     |                          |                      |                    |
| 4                                |   | Adopt-o-     | 8/16/2001       | SL / N/A       | 5 0000  | 67,216.85           | 100 0000     | 0.00            | 0.00                | 45,412.81                | 13,443.37            | 58,856.18          |
| 5                                |   | 1998 Ford    | 1/27/2003       | SL / N/A       | 5.0000  | 13,605.50           | 100 0000     | 0.00            | 0.00                | 5,248.37                 | 2,721.10             | 7,969.47           |
| Subtotal Auto-Outreach           |   |              |                 |                |         | 80,822.35           |              | 0.00            | 0.00                | 50,661.18                | 16,164.47            | 66,825.65          |
| Less dispositions and exchanges  |   |              |                 |                |         | 0.00                |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| <b>Net for: Auto-Outreach</b>    |   |              |                 |                |         | <b>80,822.35</b>    |              | <b>0.00</b>     | <b>0.00</b>         | <b>50,661.18</b>         | <b>16,164.47</b>     | <b>66,825.65</b>   |
| <b>Buildings</b>                 |   |              |                 |                |         |                     |              |                 |                     |                          |                      |                    |
| 10                               |   | Murry        | 1/1/1992        | SL / N/A       | 30 0000 | 1,793,735.00        | 100 0000     | 0.00            | 0.00                | 777,625.81               | 59,791.17            | 837,416.98         |
| 11                               |   |              | 2/10/2001       | SL / N/A       | 30 0000 | 23,451.62           | 100 0000     | 0.00            | 0.00                | 3,041.21                 | 781.72               | 3,822.93           |
| Subtotal Buildings               |   |              |                 |                |         | 1,817,186.62        |              | 0.00            | 0.00                | 780,667.02               | 60,572.89            | 841,239.91         |
| Less dispositions and exchanges  |   |              |                 |                |         | 0.00                |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| <b>Net for: Buildings</b>        |   |              |                 |                |         | <b>1,817,186.62</b> |              | <b>0.00</b>     | <b>0.00</b>         | <b>780,667.02</b>        | <b>60,572.89</b>     | <b>841,239.91</b>  |
| <b>Clinic Equipment</b>          |   |              |                 |                |         |                     |              |                 |                     |                          |                      |                    |
| 12                               |   | Various      | 1/1/1984        | SL / N/A       | 10 0000 | 49,302.00           | 100 0000     | 0.00            | 0.00                | 49,302.00                | 0.00                 | 49,302.00          |
| 13                               |   | Computer     | 10/18/1994      | SL / N/A       | 5 0000  | 911.80              | 100 0000     | 0.00            | 0.00                | 911.80                   | 0.00                 | 911.80             |
| 14                               |   | Clinic       | 12/4/1995       | SL / N/A       | 10 0000 | 1,168.00            | 100 0000     | 0.00            | 0.00                | 1,060.16                 | 107.07               | 1,167.23           |
| 15                               |   | Anesthesia   | 11/3/1995       | SL / N/A       | 10 0000 | 2,890.00            | 100 0000     | 0.00            | 0.00                | 2,647.72                 | 240.83               | 2,888.55           |
| 16                               |   | Mobile Exam  | 7/11/1996       | SL / N/A       | 7 0000  | 406.50              | 100 0000     | 0.00            | 0.00                | 406.50                   | 0.00                 | 406.50             |
| 17                               |   | X-ray        | 8/7/1998        | SL / N/A       | 5 0000  | 4,990.00            | 100 0000     | 0.00            | 0.00                | 4,990.00                 | 0.00                 | 4,990.00           |
| 18                               |   | Telephone    | 12/29/1998      | SL / N/A       | 5 0000  | 238.78              | 100 0000     | 0.00            | 0.00                | 238.78                   | 0.00                 | 238.78             |
| 19                               |   | Hitachi 17"  | 2/20/2001       | SL / N/A       | 5 0000  | 259.90              | 100 0000     | 0.00            | 0.00                | 200.80                   | 51.98                | 252.78             |
| 20                               |   | Replaced 3   | 6/11/2003       | SL / N/A       | 5 0000  | 193.70              | 100 0000     | 0.00            | 0.00                | 60.39                    | 38.74                | 99.13              |
| 21                               |   | Desk         | 8/22/2003       | SL / N/A       | 7 0000  | 230.00              | 100 0000     | 0.00            | 0.00                | 44.74                    | 32.86                | 77.60              |
| Subtotal Clinic Equipment        |   |              |                 |                |         | 60,590.68           |              | 0.00            | 0.00                | 59,862.89                | 471.48               | 60,334.37          |
| Less dispositions and exchanges  |   |              |                 |                |         | 0.00                |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| <b>Net for: Clinic Equipment</b> |   |              |                 |                |         | <b>60,590.68</b>    |              | <b>0.00</b>     | <b>0.00</b>         | <b>59,862.89</b>         | <b>471.48</b>        | <b>60,334.37</b>   |
| <b>Equipment &amp; Machinery</b> |   |              |                 |                |         |                     |              |                 |                     |                          |                      |                    |
| 22                               |   | Commercial   | 9/5/1997        | SL / N/A       | 7 0000  | 1,886.00            | 100 0000     | 0.00            | 0.00                | 1,883.29                 | 0.00                 | 1,883.29           |
| 23                               |   | Water        | 6/25/2001       | SL / N/A       | 5 0000  | 9,481.31            | 100 0000     | 0.00            | 0.00                | 6,675.88                 | 1,896.26             | 8,572.14           |
| 24                               |   | Float        | 7/18/2001       | SL / N/A       | 5 0000  | 1,445.00            | 100 0000     | 0.00            | 0.00                | 999.23                   | 289.00               | 1,288.23           |

01/01/2005 - 12/31/2005

| System No. | S | Description | Date In Service | Method / Conv. | Life | Cost / Other Basis | Bus./ Inv. % | Sec. 179/ Bonus | Salvage/ Basis Adj. | Beg Accum. Depreciation | Current Depreciation | Total Depreciation |
|------------|---|-------------|-----------------|----------------|------|--------------------|--------------|-----------------|---------------------|-------------------------|----------------------|--------------------|
|------------|---|-------------|-----------------|----------------|------|--------------------|--------------|-----------------|---------------------|-------------------------|----------------------|--------------------|

|   |                  |             |             |                 |                 |                  |
|---|------------------|-------------|-------------|-----------------|-----------------|------------------|
| Subtotal Equipment & Machinery            | 12,812.31        | 0.00        | 0.00        | 9,558.40        | 2,185.26        | 11,743.66        |
| Less dispositions and exchanges           | 0.00             | 0.00        | 0.00        | 0.00            | 0.00            | 0.00             |
| <b>Net for: Equipment &amp; Machinery</b> | <b>12,812.31</b> | <b>0.00</b> | <b>0.00</b> | <b>9,558.40</b> | <b>2,185.26</b> | <b>11,743.66</b> |

|                                     |             |           |               |         |           |          |             |             |                  |                 |                  |
|-------------------------------------|-------------|-----------|---------------|---------|-----------|----------|-------------|-------------|------------------|-----------------|------------------|
| <b>Investment Property</b>          |             |           |               |         |           |          |             |             |                  |                 |                  |
| 29                                  | Butterfield | 1/1/1993  | No Calc / N/A | 5 0000  | 38,100.00 | 100 0000 | 0.00        | 0.00        | 0.00             | 0.00            | 0.00             |
| 30                                  | Butterfield | 1/10/1993 | SL / N/A      | 27 0000 | 98,700.00 | 100 0000 | 0.00        | 0.00        | 43,866.56        | 3,655.56        | 47,522.12        |
| Subtotal Investment Property        |             |           |               |         |           |          | 0.00        | 0.00        | 43,866.56        | 3,655.56        | 47,522.12        |
| Less dispositions and exchanges     |             |           |               |         |           |          | 0.00        | 0.00        | 0.00             | 0.00            | 0.00             |
| <b>Net for: Investment Property</b> |             |           |               |         |           |          | <b>0.00</b> | <b>0.00</b> | <b>43,866.56</b> | <b>3,655.56</b> | <b>47,522.12</b> |

|                                   |               |            |          |         |            |          |             |             |                  |                  |                   |
|-----------------------------------|---------------|------------|----------|---------|------------|----------|-------------|-------------|------------------|------------------|-------------------|
| <b>Land Improvements</b>          |               |            |          |         |            |          |             |             |                  |                  |                   |
| Ties to final TB, WP              |               |            |          |         |            |          |             |             |                  |                  |                   |
| 221                               |               |            |          |         |            |          |             |             |                  |                  |                   |
| 31                                | Various Land  | 1/1/1965   | SL / N/A | 5 0000  | 23,470.00  | 100 0000 | 0.00        | 0.00        | 0.00             | 0.00             | 23,470.00         |
| 32                                | Message       | 10/10/1993 | SL / N/A | 30 0000 | 30,752.00  | 100 0000 | 0.00        | 0.00        | 11,788.77        | 1,025.07         | 12,813.84         |
| 33                                | Sprinkler     | 1/1/1993   | SL / N/A | 30 0000 | 8,978.00   | 100 0000 | 0.00        | 0.00        | 1,945.62         | 299.27           | 2,244.89          |
| 34                                | Lawn Hydro-   | 1/1/1993   | SL / N/A | 30 0000 | 4,500.00   | 100 0000 | 0.00        | 0.00        | 975.00           | 150.00           | 1,125.00          |
| 35                                | Puppy         | 1/15/1999  | SL / N/A | 10 0000 | 25,699.00  | 100 0000 | 0.00        | 0.00        | 15,320.83        | 2,569.90         | 17,890.73         |
| 36                                | Sprinkler     | 8/27/2001  | SL / N/A | 10 0000 | 5,565.00   | 100 0000 | 0.00        | 0.00        | 1,863.13         | 556.50           | 2,419.63          |
| 37                                | Sprinkler     | 4/29/2003  | SL / N/A | 15 0000 | 8,492.42   | 100 0000 | 0.00        | 0.00        | 949.29           | 566.16           | 1,515.45          |
| 38                                | New Sod on    | 5/20/2003  | SL / N/A | 15 0000 | 2,768.29   | 100 0000 | 0.00        | 0.00        | 298.82           | 184.55           | 483.37            |
| 39                                | Electric Sign | 2/7/2003   | SL / N/A | 15 0000 | 272,343.11 | 100 0000 | 0.00        | 0.00        | 34,471.93        | 18,156.21        | 52,628.14         |
| 40                                | Constructed   | 7/9/2003   | SL / N/A | 15 0000 | 3,200.00   | 100 0000 | 0.00        | 0.00        | 316.20           | 213.33           | 529.53            |
| 41                                | Parking Lot   | 9/22/2003  | SL / N/A | 15 0000 | 6,333.63   | 100 0000 | 0.00        | 0.00        | 539.08           | 422.24           | 961.32            |
| 110                               | Sign          | 8/6/2004   | SL / N/A | 15 0000 | 75,897.00  | 100 0000 | 0.00        | 0.00        | 2,108.25         | 5,059.80         | 7,168.05          |
| Subtotal Land Improvements        |               |            |          |         |            |          | 0.00        | 0.00        | 94,046.92        | 29,203.03        | 123,249.95        |
| Less dispositions and exchanges   |               |            |          |         |            |          | 0.00        | 0.00        | 0.00             | 0.00             | 0.00              |
| <b>Net for: Land Improvements</b> |               |            |          |         |            |          | <b>0.00</b> | <b>0.00</b> | <b>94,046.92</b> | <b>29,203.03</b> | <b>123,249.95</b> |

|                         |              |            |          |         |            |          |      |      |            |       |            |
|-------------------------|--------------|------------|----------|---------|------------|----------|------|------|------------|-------|------------|
| <b>Office Equipment</b> |              |            |          |         |            |          |      |      |            |       |            |
| 1                       | Printer      | 5/5/2003   | SL / N/A | 5 0000  | 495.43     | 100 0000 | 0.00 | 0.00 | 164.51     | 99.09 | 263.60     |
| 2                       | CD-Rom       | 12/31/2003 | SL / N/A | 5 0000  | 180.00     | 100 0000 | 0.00 | 0.00 | 36.00      | 36.00 | 72.00      |
| 3                       | Desk         | 2/18/2003  | SL / N/A | 7 0000  | 229.98     | 100 0000 | 0.00 | 0.00 | 61.38      | 32.85 | 94.23      |
| 42                      | Various      | 1/1/1988   | SL / N/A | 10 0000 | 124,222.00 | 100 0000 | 0.00 | 0.00 | 124,222.00 | 0.00  | 124,222.00 |
| 43                      | Info Center  | 1/1/1993   | SL / N/A | 10 0000 | 2,500.00   | 100 0000 | 0.00 | 0.00 | 2,375.00   | 0.00  | 2,375.00   |
| 44                      | Building     | 1/1/1993   | SL / N/A | 10 0000 | 3,799.00   | 100 0000 | 0.00 | 0.00 | 3,609.10   | 0.00  | 3,609.10   |
| 45                      | Computer     | 11/17/1994 | SL / N/A | 5 0000  | 1,000.00   | 100 0000 | 0.00 | 0.00 | 1,000.00   | 0.00  | 1,000.00   |
| 46                      | Mail Machine | 8/24/1994  | SL / N/A | 5 0000  | 567.25     | 100 0000 | 0.00 | 0.00 | 510.53     | 0.00  | 510.53     |
| 47                      | Computer     | 8/12/1994  | SL / N/A | 5 0000  | 649.00     | 100 0000 | 0.00 | 0.00 | 584.10     | 0.00  | 584.10     |
| 48                      | Computer     | 2/10/1994  | SL / N/A | 5 0000  | 4,221.00   | 100 0000 | 0.00 | 0.00 | 3,891.60   | 0.00  | 3,891.60   |
| 49                      | Folding      | 12/4/1995  | SL / N/A | 10 0000 | 339.90     | 100 0000 | 0.00 | 0.00 | 308.52     | 31.16 | 339.68     |
| 50                      | Voice Mail   | 11/21/1995 | SL / N/A | 5 0000  | 6,000.00   | 100 0000 | 0.00 | 0.00 | 6,000.00   | 0.00  | 6,000.00   |
| 51                      | Macintosh    | 3/17/1995  | SL / N/A | 5 0000  | 6,000.00   | 100 0000 | 0.00 | 0.00 | 6,000.00   | 0.00  | 6,000.00   |
| 52                      | Server       | 2/6/1995   | SL / N/A | 5 0000  | 4,994.00   | 100 0000 | 0.00 | 0.00 | 4,994.00   | 0.00  | 4,994.00   |
| 53                      | Storage      | 5/1/1996   | SL / N/A | 5 0000  | 191.85     | 100 0000 | 0.00 | 0.00 | 191.85     | 0.00  | 191.85     |

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**[17-3539]**  
 Financial  
**Depreciation Expense**  
 01/01/2005 - 12/31/2005  
 5/12/2006  
 12:01:20 PM

| System No.                 | S | Description | Date In Service | Life   | Method / Conv. | Cost / Other Basis | Bus./ Inv. % | Sec. 179/ Bonus | Salvage/ Basis Adj. | Beg. Accum. Depreciation | Current Depreciation | Total Depreciation |
|----------------------------|---|-------------|-----------------|--------|----------------|--------------------|--------------|-----------------|---------------------|--------------------------|----------------------|--------------------|
| 87-0256350                 |   | Computer    | 8/9/1996        | 5 0000 | SL / N/A       | 1,233.46           | 100 0000     | 0.00            | 0.00                | 1,233.46                 | 0.00                 | 1,233.46           |
| 01/01/2005 - 12/31/2005    |   | Okidata     | 9/5/1996        | 5 0000 | SL / N/A       | 498.00             | 100 0000     | 0.00            | 0.00                | 498.00                   | 0.00                 | 498.00             |
| Sorted: General - category |   | Office Desk | 11/19/1996      | 7 0000 | SL / N/A       | 1,273.34           | 100 0000     | 0.00            | 0.00                | 1,273.34                 | 0.00                 | 1,273.34           |
|                            |   | Computer    | 11/1/1996       | 5 0000 | SL / N/A       | 1,200.00           | 100 0000     | 0.00            | 0.00                | 1,200.00                 | 0.00                 | 1,200.00           |
|                            |   | Phones,     | 1/1/1997        | 5 0000 | SL / N/A       | 0.00               | 100 0000     | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |

|                                 |              |            |          |         |            |          |      |      |            |          |            |          |            |
|---------------------------------|--------------|------------|----------|---------|------------|----------|------|------|------------|----------|------------|----------|------------|
| 59                              | Computer     | 6/11/1997  | SL / N/A | 5 0000  | 7,794.00   | 100 0000 | 0.00 | 0.00 | 7,794.00   | 0.00     | 7,794.00   | 0.00     | 7,794.00   |
| 60                              | Computer     | 6/30/1997  | SL / N/A | 5 0000  | 6,334.00   | 100 0000 | 0.00 | 0.00 | 6,334.00   | 0.00     | 6,334.00   | 0.00     | 6,334.00   |
| 61                              | Cellular     | 9/2/1997   | SL / N/A | 5 0000  | 244.02     | 100 0000 | 0.00 | 0.00 | 244.02     | 0.00     | 244.02     | 0.00     | 244.02     |
| 62                              | Computer     | 11/20/1997 | SL / N/A | 5 0000  | 339.00     | 100 0000 | 0.00 | 0.00 | 339.00     | 0.00     | 339.00     | 0.00     | 339.00     |
| 63                              | Office       | 7/14/1998  | SL / N/A | 5 0000  | 800.00     | 100 0000 | 0.00 | 0.00 | 800.00     | 0.00     | 800.00     | 0.00     | 800.00     |
| 64                              | Blackbaud    | 11/17/1999 | SL / N/A | 3 0000  | 11,590.00  | 100 0000 | 0.00 | 0.00 | 11,590.00  | 0.00     | 11,590.00  | 0.00     | 11,590.00  |
| 65                              | Copy         | 8/9/2000   | SL / N/A | 5 0000  | 1,063.49   | 100 0000 | 0.00 | 0.00 | 935.07     | 124.07   | 1,059.14   | 124.07   | 1,059.14   |
| 66                              | Copy         | 10/5/2000  | SL / N/A | 5 0000  | 1,063.49   | 100 0000 | 0.00 | 0.00 | 901.94     | 159.52   | 1,061.46   | 159.52   | 1,061.46   |
| 67                              | HP DeskJet   | 2/10/2001  | SL / N/A | 5 0000  | 265.96     | 100 0000 | 0.00 | 0.00 | 218.49     | 47.47    | 265.96     | 47.47    | 265.96     |
| 68                              | Fiat Bed     | 11/19/2001 | SL / N/A | 5 0000  | 129.00     | 100 0000 | 0.00 | 0.00 | 80.44      | 25.80    | 106.24     | 25.80    | 106.24     |
| 69                              | FujiFilm     | 3/26/2001  | SL / N/A | 5 0000  | 1,000.00   | 100 0000 | 0.00 | 0.00 | 753.97     | 200.00   | 953.97     | 200.00   | 953.97     |
| 70                              | Pnnter       | 3/1/2002   | SL / N/A | 5 0000  | 399.00     | 100 0000 | 0.00 | 0.00 | 226.50     | 79.80    | 306.30     | 79.80    | 306.30     |
| 71                              | Work Station | 3/20/2002  | SL / N/A | 5 0000  | 1,051.62   | 100 0000 | 0.00 | 0.00 | 586.02     | 210.32   | 796.34     | 210.32   | 796.34     |
| 72                              | Software     | 10/31/2002 | SL / N/A | 3 0000  | 320.00     | 100 0000 | 0.00 | 0.00 | 231.46     | 88.54    | 320.00     | 88.54    | 320.00     |
| 73                              | Work Station | 3/1/2002   | SL / N/A | 5 0000  | 738.00     | 100 0000 | 0.00 | 0.00 | 418.94     | 147.60   | 566.54     | 147.60   | 566.54     |
| 74                              | HP Laserjet  | 5/31/2003  | SL / N/A | 5 0000  | 399.00     | 100 0000 | 0.00 | 0.00 | 126.81     | 79.80    | 206.61     | 79.80    | 206.61     |
| 75                              | Cash         | 1/1/2003   | SL / N/A | 5 0000  | 199.99     | 100 0000 | 0.00 | 0.00 | 80.00      | 40.00    | 120.00     | 40.00    | 120.00     |
| 109                             | Clinic       | 7/10/2004  | SL / N/A | 5 0000  | 3,960.18   | 100 0000 | 0.00 | 0.00 | 396.02     | 792.04   | 1,188.06   | 792.04   | 1,188.06   |
| 111                             | Dell Laptop  | 2/1/2005   | M / HY   | 5 0000  | 1,141.00   | 100 0000 | 0.00 | 0.00 | 0.00       | 228.20   | 228.20     | 228.20   | 228.20     |
| 112                             | Education    | 8/1/2005   | M / HY   | 5 0000  | 798.00     | 100 0000 | 0.00 | 0.00 | 0.00       | 159.60   | 159.60     | 159.60   | 159.60     |
| 113                             | Vet office   | 8/1/2005   | M / HY   | 5 0000  | 1,089.00   | 100 0000 | 0.00 | 0.00 | 0.00       | 217.80   | 217.80     | 217.80   | 217.80     |
| 114                             | Volunteer    | 10/1/2005  | M / HY   | 5 0000  | 827.00     | 100 0000 | 0.00 | 0.00 | 0.00       | 165.40   | 165.40     | 165.40   | 165.40     |
| Subtotal Office Equipment       |              |            |          |         | 201,139.86 |          | 0.00 | 0.00 | 180,210.07 | 2,965.06 | 183,175.13 | 2,965.06 | 183,175.13 |
| Less dispositions and exchanges |              |            |          |         | 0.00       |          | 0.00 | 0.00 | 0.00       | 0.00     | 0.00       | 0.00     | 0.00       |
| Net for: Office Equipment       |              |            |          |         | 201,139.86 |          | 0.00 | 0.00 | 180,210.07 | 2,965.06 | 183,175.13 | 2,965.06 | 183,175.13 |
| Office Furniture                |              |            |          |         |            |          |      |      |            |          |            |          |            |
| 76                              | Various      | 1/1/1991   | SL / N/A | 10 0000 | 6,458.00   | 100 0000 | 0.00 | 0.00 | 6,429.60   | 0.00     | 6,429.60   | 0.00     | 6,429.60   |
| 77                              | Auditorium   | 1/1/1993   | SL / N/A | 10 0000 | 2,100.00   | 100 0000 | 0.00 | 0.00 | 1,995.00   | 0.00     | 1,995.00   | 0.00     | 1,995.00   |
| 78                              | Executive    | 6/4/1997   | SL / N/A | 7 0000  | 285.00     | 100 0000 | 0.00 | 0.00 | 284.79     | 0.00     | 284.79     | 0.00     | 284.79     |
| 79                              | CockTail     | 6/4/1997   | SL / N/A | 7 0000  | 229.00     | 100 0000 | 0.00 | 0.00 | 228.83     | 0.00     | 228.83     | 0.00     | 228.83     |
| 80                              | Side Chairs  | 6/4/1997   | SL / N/A | 7 0000  | 220.00     | 100 0000 | 0.00 | 0.00 | 219.84     | 0.00     | 219.84     | 0.00     | 219.84     |
| 81                              | Filing       | 7/31/1997  | SL / N/A | 5 0000  | 239.90     | 100 0000 | 0.00 | 0.00 | 239.90     | 0.00     | 239.90     | 0.00     | 239.90     |
| 82                              | Filing       | 7/31/1997  | SL / N/A | 5 0000  | 199.99     | 100 0000 | 0.00 | 0.00 | 199.99     | 0.00     | 199.99     | 0.00     | 199.99     |
| 83                              | Chairs For   | 1/13/1999  | SL / N/A | 7 0000  | 2,384.04   | 100 0000 | 0.00 | 0.00 | 1,867.59   | 340.56   | 2,208.15   | 340.56   | 2,208.15   |
| 84                              | 3 Chairs &   | 2/22/2001  | SL / N/A | 7 0000  | 615.21     | 100 0000 | 0.00 | 0.00 | 339.04     | 87.89    | 426.93     | 87.89    | 426.93     |
| 85                              | Computer     | 11/30/2003 | SL / N/A | 5 0000  | 868.00     | 100 0000 | 0.00 | 0.00 | 188.82     | 173.60   | 362.42     | 173.60   | 362.42     |
| Subtotal Office Furniture       |              |            |          |         | 13,599.14  |          | 0.00 | 0.00 | 11,993.40  | 602.05   | 12,595.45  | 602.05   | 12,595.45  |
| Less dispositions and exchanges |              |            |          |         | 0.00       |          | 0.00 | 0.00 | 0.00       | 0.00     | 0.00       | 0.00     | 0.00       |
| Net for: Office Furniture       |              |            |          |         | 13,599.14  |          | 0.00 | 0.00 | 11,993.40  | 602.05   | 12,595.45  | 602.05   | 12,595.45  |
| Outreach-Equipment              |              |            |          |         |            |          |      |      |            |          |            |          |            |
| 25                              | Work Station | 11/13/2002 | SL / N/A | 5 0000  | 738.00     | 100 0000 | 0.00 | 0.00 | 315.01     | 147.60   | 462.61     | 147.60   | 462.61     |
| 26                              | Computer     | 1/31/2003  | SL / N/A | 5 0000  | 1,596.00   | 100 0000 | 0.00 | 0.00 | 612.16     | 319.20   | 931.36     | 319.20   | 931.36     |
| 27                              | New          | 1/31/2003  | SL / N/A | 5 0000  | 400.00     | 100 0000 | 0.00 | 0.00 | 153.42     | 80.00    | 233.42     | 80.00    | 233.42     |
| 28                              | HP7660       | 12/31/2003 | SL / N/A | 5 0000  | 148.72     | 100 0000 | 0.00 | 0.00 | 29.74      | 29.74    | 59.48      | 29.74    | 59.48      |
| Subtotal Outreach-Equipment     |              |            |          |         | 2,882.72   |          | 0.00 | 0.00 | 1,110.33   | 576.54   | 1,686.87   | 576.54   | 1,686.87   |
| Less dispositions and exchanges |              |            |          |         | 0.00       |          | 0.00 | 0.00 | 0.00       | 0.00     | 0.00       | 0.00     | 0.00       |
| Net for: Outreach-Equipment     |              |            |          |         | 2,882.72   |          | 0.00 | 0.00 | 1,110.33   | 576.54   | 1,686.87   | 576.54   | 1,686.87   |

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[17-3539]  
**Depreciation Expense**  
Financial

01/01/2005 - 12/31/2005

87-0256350  
01/01/2005 - 12/31/2005  
Sorted: General - category

| System No.                      | S | Description  | Date In Service | Method / Conv. | Life   | Cost / Other Basis | Bus./ Inv. % | Sec. 179/ Bonus | Salvage/ Basis Adj. | Beg. Accum. Depreciation | Current Depreciation | Total Depreciation |
|---------------------------------|---|--------------|-----------------|----------------|--------|--------------------|--------------|-----------------|---------------------|--------------------------|----------------------|--------------------|
| Subtotal Office Furniture       |   |              |                 |                |        | 13,599.14          |              | 0.00            | 0.00                | 11,993.40                | 602.05               | 12,595.45          |
| Less dispositions and exchanges |   |              |                 |                |        | 0.00               |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| Net for: Office Furniture       |   |              |                 |                |        | 13,599.14          |              | 0.00            | 0.00                | 11,993.40                | 602.05               | 12,595.45          |
| Outreach-Equipment              |   |              |                 |                |        |                    |              |                 |                     |                          |                      |                    |
| 25                              |   | Work Station | 11/13/2002      | SL / N/A       | 5 0000 | 738.00             | 100 0000     | 0.00            | 0.00                | 315.01                   | 147.60               | 462.61             |
| 26                              |   | Computer     | 1/31/2003       | SL / N/A       | 5 0000 | 1,596.00           | 100 0000     | 0.00            | 0.00                | 612.16                   | 319.20               | 931.36             |
| 27                              |   | New          | 1/31/2003       | SL / N/A       | 5 0000 | 400.00             | 100 0000     | 0.00            | 0.00                | 153.42                   | 80.00                | 233.42             |
| 28                              |   | HP7660       | 12/31/2003      | SL / N/A       | 5 0000 | 148.72             | 100 0000     | 0.00            | 0.00                | 29.74                    | 29.74                | 59.48              |
| Subtotal Outreach-Equipment     |   |              |                 |                |        | 2,882.72           |              | 0.00            | 0.00                | 1,110.33                 | 576.54               | 1,686.87           |
| Less dispositions and exchanges |   |              |                 |                |        | 0.00               |              | 0.00            | 0.00                | 0.00                     | 0.00                 | 0.00               |
| Net for: Outreach-Equipment     |   |              |                 |                |        | 2,882.72           |              | 0.00            | 0.00                | 1,110.33                 | 576.54               | 1,686.87           |

**Shelter Equipment**

|     |              |            |          |         |           |          |      |           |        |           |
|-----|--------------|------------|----------|---------|-----------|----------|------|-----------|--------|-----------|
| 86  | Various      | 1/1/1985   | SL / N/A | 10 0000 | 58,411.00 | 100 0000 | 0.00 | 58,411.00 | 0.00   | 58,411.00 |
| 87  | Computer     | 4/28/1994  | SL / N/A | 5 0000  | 425.95    | 100 0000 | 0.00 | 383.36    | 0.00   | 383.36    |
| 88  | Computer     | 12/8/1994  | SL / N/A | 5 0000  | 314.13    | 100 0000 | 0.00 | 282.73    | 0.00   | 282.73    |
| 89  | Dog Carriers | 10/7/1996  | SL / N/A | 5 0000  | 170.00    | 100 0000 | 0.00 | 170.00    | 0.00   | 170.00    |
| 90  | High         | 4/30/1997  | SL / N/A | 5 0000  | 209.52    | 100 0000 | 0.00 | 209.52    | 0.00   | 209.52    |
| 91  | Kodak 120    | 4/23/1997  | SL / N/A | 5 0000  | 949.00    | 100 0000 | 0.00 | 949.00    | 0.00   | 949.00    |
| 92  | Hand Dryer   | 6/6/1997   | SL / N/A | 5 0000  | 1,020.00  | 100 0000 | 0.00 | 1,020.00  | 0.00   | 1,020.00  |
| 93  | Mobile Cage  | 11/21/1997 | SL / N/A | 5 0000  | 785.20    | 100 0000 | 0.00 | 785.20    | 0.00   | 785.20    |
| 94  | Washing      | 9/16/1998  | SL / N/A | 5 0000  | 1,640.00  | 100 0000 | 0.00 | 1,640.00  | 0.00   | 1,640.00  |
| 95  | Dryer        | 11/20/1998 | SL / N/A | 5 0000  | 725.51    | 100 0000 | 0.00 | 725.51    | 0.00   | 725.51    |
| 96  | File Server  | 12/31/1999 | SL / N/A | 5 0000  | 1,075.00  | 100 0000 | 0.00 | 1,075.00  | 0.00   | 1,075.00  |
| 97  | Novell       | 12/31/1999 | SL / N/A | 3 0000  | 994.00    | 100 0000 | 0.00 | 994.00    | 0.00   | 994.00    |
| 98  | Cat Colony   | 7/8/2002   | SL / N/A | 5 0000  | 350.00    | 100 0000 | 0.00 | 173.95    | 70.00  | 243.95    |
| 99  | Work Station | 9/9/2002   | SL / N/A | 5 0000  | 1,073.00  | 100 0000 | 0.00 | 496.23    | 214.60 | 710.83    |
| 100 | HP Desk Jet  | 9/18/2002  | SL / N/A | 5 0000  | 320.00    | 100 0000 | 0.00 | 146.41    | 64.00  | 210.41    |
| 101 | Royal Alpha  | 12/16/2002 | SL / N/A | 5 0000  | 199.00    | 100 0000 | 0.00 | 81.34     | 39.80  | 121.14    |
| 102 | North        | 4/29/2003  | SL / N/A | 5 0000  | 1,170.00  | 100 0000 | 0.00 | 392.35    | 234.00 | 626.35    |
| 103 | Receiving    | 5/31/2003  | SL / N/A | 5 0000  | 1,238.00  | 100 0000 | 0.00 | 393.45    | 247.60 | 641.05    |
| 104 | Replaced 3   | 8/26/2003  | SL / N/A | 5 0000  | 213.70    | 100 0000 | 0.00 | 57.73     | 42.74  | 100.47    |
| 105 | Replaced 3   | 12/4/2003  | SL / N/A | 5 0000  | 213.70    | 100 0000 | 0.00 | 46.02     | 42.74  | 88.76     |
| 106 | CR-Rom       | 7/31/2003  | SL / N/A | 5 0000  | 245.00    | 100 0000 | 0.00 | 69.67     | 49.00  | 118.67    |
| 107 | Hub Switch   | 9/9/2003   | SL / N/A | 5 0000  | 210.00    | 100 0000 | 0.00 | 55.12     | 42.00  | 97.12     |
| 108 | New Dryer    | 1/1/2003   | SL / N/A | 5 0000  | 319.80    | 100 0000 | 0.00 | 127.92    | 63.96  | 191.88    |

Subtotal Shelter Equipment  
Less dispositions and exchanges

72,271.51  
0.00

**Net for: Shelter Equipment**

72,271.51  
1,110.44

Subtotal

68,685.51  
1,110.44

Less dispositions and exchanges

0.00

Grand Totals

2,952,006.33  
0.00  
2,952,006.33

**LESS BUTTERFIELD**  
Less 2005 additions (unrecorded)

(136,800.00)  
(12,053.00)

**NET**

2,803,153.33  
(3,655.56)  
115,490.82

Ties to final TB, WP  
221

Ties to final TB, WP  
221

Ties to final TB, WP  
221

1,331,681.01  
119,146.38  
119,146.38  
1,494,693.95  
0.00  
1,494,693.95