

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)

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 2007 calendar year, or tax year beginning , 2007, and ending , 20

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

C Name of organization, number and street, city, town, state, and ZIP code
 ST LAWRENCE COUNTY HISTORICAL ASSOCIATION INC
 3 EAST MAIN STREET
 Canton NY 13617-

D Employer identification number
 23-7072537

E Telephone number
 315-386-8133

F Acctg. method: Cash Accrual
 Other (specify) ▶

G Website: ▶

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

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 461,646.

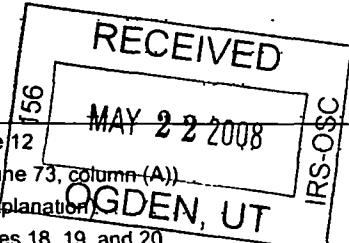
H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? (If "No," attach a list. See instructions.) Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b	261,956.		
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d	36,500.		
	e Total (add lines 1a through 1d) (cash \$ 298,456. noncash \$)	1e			298,456.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			26,832.
	4 Interest on savings and temporary cash investments	4			26,010.
	5 Dividends and interest from securities	5			
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c				
7 Other investment income (describe)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	38,453.	8a			
	b Less: cost or other basis & sales expenses	36,357.	8b		
	c Gain or (loss) (attach schedule)	2,096.	8c		
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			2,096.	
9 a Gross revenue (not including \$ of contributions reported on line 1b)	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	12,974.			
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c			12,974.
11 Other revenue (from Part VII, line 103)	11			58,921.	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			425,289.	
Expenses	13 Program services (from line 44, column (B))	13			71,416.
	14 Management and general (from line 44, column (C))	14			129,978.
	15 Fundraising (from line 44, column (D))	15			10,740.
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses. Add lines 16 and 44, column (A)	17			212,134.
Net Assets	18 Excess or (deficit) for the year Subtract line 17 from line 12	18			213,155.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			1,968,923.
	20 Other changes in net assets or fund balances (attach explanation)	20			
	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	21			2,182,078.



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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. (See the instructions.)

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	43027.	23665.	17211.	2151.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b			
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	39172.	21545.	15668.	1959.
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28			
29 Payroll taxes	13657.	7512.	5463.	682.
30 Professional fundraising fees	5167.			5167.
31 Accounting fees	3575.		3575.	
32 Legal fees	32			
33 Supplies	7025.	2106.	4919.	
34 Telephone	3729.		3729.	
35 Postage and shipping	35			
36 Occupancy	15626.	3126.	11719.	781.
37 Equipment rental and maintenance	37			
38 Printing and publications	8787.	3962.	4825.	
39 Travel	1698.		1698.	
40 Conferences, conventions, and meetings	655.		655.	
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	43121.		43121.	
43 Other expenses not covered above (itemize):				
a PROFESSIONAL SRVS	43a 201.		201.	
b ADVERTISING	43b 970.	485.	485.	
c DUES AND SUBS	43c 867.		867.	
d GRANT PASS THROUGH	43d 3000.		3000.	
e INSURANCE	43e 12943.	6471.	6472.	
f MISCELLANEOUS	43f 1282.		1282.	
g REPAIRS AND MAINT	43g 7632.	2544.	5088.	
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44 212134.	71416.	129978.	10740.

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 \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

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	54,443.	45	61,185.
	46 Savings and temporary cash investments		46	
	47a Accounts receivable			
	b Less: allowance for doubtful accounts		47c	
	48a Pledges receivable			
	b Less: allowance for doubtful accounts		48c	
	49 Grants receivable	30,953.	49	4,013.
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54a Investments - publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		54a	
	b Investments - other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	810,748.	54b	1,068,558.
	55a Investments - land, buildings, and equipment: basis			
	b Less: accumulated depreciation (attach schedule)		55c	
	56 Investments - other (attach schedule)		56	
	57a Land, buildings, and equipment: basis	1,396,795.		
b Less: accumulated depreciation (attach schedule)	331,542.	1,088,224.	57c 1,065,253.	
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)		58		
59 Total assets (must equal line 74) Add lines 45 through 58	1,984,368.	59	2,199,009.	
Liabilities	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue	13,500.	62	14,900.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> ACCRUED PAYROLL TAXES)	1,945.	65	2,031.
	66 Total liabilities. Add lines 60 through 65	15,445.	66	16,931.
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.	1,935,827.	67	2,177,079.
	68 Temporarily restricted	33,096.	68	4,999.
	69 Permanently restricted		69	
	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 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	1,968,923.	73	2,182,078.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.	1,984,368.	74	2,199,009.

Part VI Other Information (continued)

		Yes	No
82a	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		
83a	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?		
83b			
84a	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?		
84b			
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
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.		
85b			
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	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?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88a	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	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	501(c)(3) and 501(c)(4) orgs. 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	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a	List the states with which a copy of this return is filed ▶ NY		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	3
91a	The books are in care of ▶ TRENT TRULOCK Telephone no ▶ 315-386-8133 Located at ▶ 3 EAST MAIN ST CANTON NY ZIP + 4 ▶ 13617-		
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)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? . . .	91c	Yes	No
If "Yes," enter the name of the foreign country ▶ _____			

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92**

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					26,832.
95 Interest on savings and temporary cash investments			14	26,010.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory . . .			14	2,096.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					12,974.
103 Other revenue: a MISC INC					840.
b UNREALIZED GAIN			14	58,081.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), & (E))				86,187.	40,646.
105 Total (add line 104, columns (B), (D), and (E))					126,833.

Note: Line 105 plus line 1e, 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).
▼	N/A

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership int	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

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

(a) Did the organization, during the yr., 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).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code?
 If "Yes," complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code?
 If "Yes," complete the schedule below for each controlled entity.

Yes	No
	X

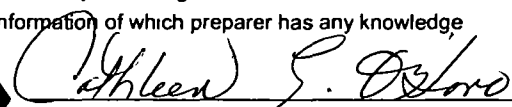
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?


Yes	No

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.


5/13/08
 Signature of officer Date

Kathleen E. O'Horo Secretary
 Type or print name and title

Paid Preparer's Use Only	Preparer's signature 	Date 05/13/2008	Check if self employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst X) 106-40-8754
	Firm's name (or yours if self-employed), address, and ZIP + 4 Hopper and VanHouse CPAs 202 Ford St Ogdensburg NY 13669-			EIN 16-1284312 Phone no. 315-393-7502

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

2007

Name of the organization ST LAWRENCE COUNTY HISTORICAL	Employer identification number 23-7072537
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See 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
NONE				

Total number of other employees paid over \$50,000	▶
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Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See 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
NONE		

Total number of others receiving over \$50,000 for professional services	▶
--	---

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 the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of other contractors receiving over \$50,000 for other services	▶
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See the instructions.)

	Yes	No
<p>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.)</p> <p>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.</p>		X
<p>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.)</p>		
<p>a Sale, exchange, or leasing of property?</p>		X
<p>b Lending of money or other extension of credit?</p>		X
<p>c Furnishing of goods, services, or facilities?</p>		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	X	
<p>e Transfer of any part of its income or assets?</p>		X
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)</p>		X
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>		X
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement</p>		X
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		X
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g</p>		X
<p>b Did the organization make any taxable distributions under section 4966?</p>		
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>		
<p>d Enter the total number of donor advised funds owned at the end of the tax year ► _____</p>		
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____</p>		
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____</p>		
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____</p>		

Part IV Reason for Non-Private Foundation Status (See the instructions.)

I certify that 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

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

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety Section 509(a)(4). (See 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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	133194	254240	82540	360667	830641
16 Membership fees received.	28075	30295	26295	26006	110671
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	13280	15557	12926	14846	56609
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)) rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	99260	48325	51158	46962	245705
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	1290	1140	3199	2553	8182
23 Total of lines 15 through 22	275099	349557	176118	451034	1251808
24 Line 23 minus line 17	261819	334000	163192	436188	1195199
25 Enter 1% of line 23	2751	3496	1761	4510	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	23904
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 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts	26b	199595
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	1195199
d Add Amounts from column (e) for lines: 18 <u>245705</u> 19 _____	26d	453482
22 <u>8182</u> 26b <u>199595</u>		
e Public support (line 26c minus line 26d total)	26e	741717
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	62.06 %

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.
 (2006) _____ (2005) _____ (2004) _____ (2003) _____

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 (1) or (2), enter the sum of these differences (the excess amounts) for each year:
 (2006) _____ (2005) _____ (2004) _____ (2003) _____

c Add Amounts from column (e) for lines: 15 _____ 16 _____	27c	
17 _____ 20 _____ 21 _____		
d Add Line 27a total _____ and line 27b total _____	27d	
e Public support (line 27c total minus line 27d total)	27e	
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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

Part VI-A Lobbying Expenditures by Electing Public Charities (See the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table -		
If the amount on line 40 is -		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is -		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000	41	
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41).	42	
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36.	43	
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means.
- i Total lobbying expenditures (Add lines through h.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Depreciation and Amortization (Including Information on Listed Property)

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

Name(s) shown on return ST LAWRENCE COUNTY HISTORICAL	Business or activity to which this form relates INDIRECT DEPRECIATION	Identifying number 23-7072537
---	---	---

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
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
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

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		

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 2006 Form 4562	10
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	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 2008. 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) (See instructions)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14
15 Property subject to section 168(f)(1) election	15
16 Other depreciation (including ACRS)	16

43,121.

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 2007	17
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>	

Section B-Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (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	
i Nonresidential real property			27 5 yrs.	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2007 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 instructions	22
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

43,121.

SLCHA Board of Trustees - 2007

SLCHA, 3 East Main Street, PO Box 8, Canton, NY 13617
 ph. 315/386-8133 fax 315/386-8134 email <slcha@northnet.org>

<u>Name</u>	<u>Address</u>		<u>Phone (w)</u>	<u>Phone (h)</u>	<u>Email</u>
Blanchard Kip	6846 Route 11	Potsdam NY		315/265-5070	
Carson Patricia	4 Cleaveland Ave.	Canton NY		315/386-8892	carharr@northnet.org
Colton Mary	3 Jay Street	Canton NY		315-386-3744	ccolton@twcny.rr.com
Foster Richard	327 Chisholm Rd.	Antwerp NY		315/287-1875	dfoster@northnet.org
Johnson (Treas.) Carol M.	4 Hammond Drive	Canton NY		315/379-9709	cjohnson101@twcny.rr.com
Stanley Stanley	2296 River Rd.	Potsdam NY		315/265-9637	smaine@northnet.org
Anne Anne	41 East Main Street	Canton NY		315-386-4122	mazzottas@hotmail.com
Lowell Lowell	5364 County Route 10	Heuvelton NY		315/344-2427	lashway@northnet.org
Joe Joe	PO Box 219	Morristown NY		315/375-8926	david@twcny.rr.com
Todd Moe (VP)	69 N. Main St.	Norwood NY	315/229-5356	315/353-2389	todd@ncpr.org
Terry Terry	1189 State Rt. 11B	Brushton NY		518/529-0112	nambrush@northnet.org
Cathleen Cathleen	267 O'Horo Rd	Canton NY	315/386-4595	315/386-4992	olawfirm@twcny.rr.com
Chris Chris	9 Pleasant St.	Canton NY		315/386-3409	rediehs@northnet.org
Judith Ryan (pres 7/07)	PO Box 883	Ogdensburg NY	315/393-3780	315/393-6853	tryan8@twcny.rr.com
Marilyn Scozzafava	251 Rowley Street	Gouverneur NY		315/287-0271	
Susan Smeby	1298 State Highway 345	Potsdam NY		315/322-4411	ssmeby@twcny.rr.com
Carlton Stickney	2959 County Rt. 49	Norwood NY		315/384-4764	stockhmhistorg@slc.com
Jane Subramanian (Pres.)	63 Bay Street	Potsdam NY	315/267-3326	315/265-4793	subramjim@potsdam.edu

(06/05/07)

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14 14.38

Cat: SILAS WRIGHT HOUSE

Book: BOOK

FY 1/99

Year: 2007 Period All

Fed ID

State ID.

()

Methods. (1=s1) (2=ddb) (3=syd) (4=1 25db) (5=1 5db) (6N=acrs) (6Y=macrs/acrs s/l option) (7=macrs200 db) (8=macrs150 db) (9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6)

ASSET NO.	DESCRIPTION	YEARS DEPR DEPR METH	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR.	CURRENT DEPR	ACCUMULATED DEPR
1-0001	SILAS WRIGHT HOUSE	50 0 1	176,100 05	00	00	59,874 00	3,522 00 Y	63,396 00
	Aq. 1/01/90 St. 1/01/90 New Real		176,100.05	00			293 50 M	
1-0002	Roof	30 0 1	59,376 32	.00	.00	4,948 03	1,979.21 Y	6,927 24
	Aq 7/01/04 St 7/01/04 New Real		59,376 32	.00			164.93 M	
* SILAS WRIGHT HOUSE PRE-1987 ASSETS.			.00	00	00	00	00 Y	00
			00	00			00 M	
POST-86 ASSETS			235,476 37	.00	00	64,822 03	5,501 21 Y	70,323.24
			235,476 37	00			458 43 M	
			235,476.37	00	.00	64,822.03	5,501.21 Y	70,323 24
			235,476 37	00			458 43 M	

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14:14 38

Cat CAPITAL IMPROVEMNETS

Book BOOK

FY: 1/99

Year. 2007 Period: All

Fed ID

State ID

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Methods (1=s1)(2=ddb)(3=syd)(4=1 25db)(5=1 5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6)

ASSET NO.	DESCRIPTION	YEARS DEPR DEPR METH.	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR.	ACCUMULATED DEPR
2-0001	CAPITAL IMPROVEMENTS	50 0 1	115,726.48	00	.00	39,347 01	2,314 53 Y	41,661.54
	Aq 1/01/86 St 1/01/90 New Real		115,726 48	00			192.88 M	
2-0002	Period Room Renovations	50 0 1	3,909.44	00	00	91 22	78 19 Y	169.41
	Aq 11/11/05 St 11/11/05 New Real		3,909 44	.00			6 52 M	
2-0003	Study Renovations	50 0 1	1,578 00	00	00	.00	26.30 Y	26.30
	Aq 3/16/07 St 3/16/07 New Real		1,578.00	00			2.63 M	
* CAPITAL IMPROVEMNETS PRE-1987 ASSETS			115,726 48	.00	.00	39,347.01	2,314 53 Y	41,661 54
			115,726 48	00			192.88 M	
POST-86 ASSETS			5,487 44	00	.00	91 22	104 49 Y	195 71
			5,487.44	.00			9 15 M	
			121,213.92	00	00	39,438 23	2,419 02 Y	41,857.25
			121,213.92	00			202.03 M	

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14.14 38

Cat. CONTENTS

Book BOOK FY 1/99

Year. 2007 Period All

Fed ID: State ID ()

Methods (1=s1)(2=ddb)(3=syd)(4=1 25db)(5=1 5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6.)

ASSET NO	DESCRIPTION	YEARS DEPR DEPR METH	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR	ACCUMULATED DEPR.
3-0002	CONTENTS - RED BARN Aq: 1/01/02 St: 1/01/02 New Personal	15.0 1	19,291 61	.00	00	6,430 55	1,286.11 Y 107 18 M	7,716.66
3-0003	CONTENTS - RED BARN Aq 7/01/02 St 7/01/02 New Personal	15 0 1	4,741 65	.00	.00	1,422.50	316 11 Y 26 34 M	1,738.61
3-0004	Red Barn Furnishings Aq 7/01/03 St 7/01/03 New Personal	7 0 1	51,265 91	00	00	25,632 95	7,323 70 Y 610.31 M	32,956 65
3-0005	Red Barn Lanescaping Aq. 7/01/03 St: 7/01/03 New Real	10 0 1	8,737.93	00	00	3,058.27	873.79 Y 72 82 M	3,932 06
3-0006	Red Barn Furnishings Aq 7/01/04 St 7/01/04 New Personal	10 0 1	2,630 17	00	00	657.55	263 02 Y 21 92 M	920.57
* CONTENTS								
	PRE-1987 ASSETS		.00	.00	00	00	00 Y 00 M	00
	POST-86 ASSETS		86,667 27	00	00	37,201 82	10,062 73 Y 838.57 M	47,264 55
			86,667 27	00	.00	37,201 82	10,062 73 Y 838.57 M	47,264.55

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14 14-38

Cat OFFICE EQUIPMENT

Book. BOOK

FY 1/99

Year 2007 Period All

Fed ID

State ID

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Methods (1=s1)(2=ddb)(3=syd)(4=1 25db)(5=1 5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6)

ASSET NO	DESCRIPTION	YEARS DEPR DEPR METH	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR	ACCUMULATED DEPR
4-0002	CANNON NP 1020 COPIER Aq 7/31/91 St 7/31/91 New Personal	7 0 1	1,247 25	.00	.00	1,247.25	.00 Y	1,247 25
			1,247 25	00			00 M	
4-0004	MCINTOSH COMPUTER SYS Aq 4/16/93 St 4/16/93 New Personal	7 0 1	12,305 00	.00	.00	12,305.00	.00 Y	12,305.00
			12,305 00	.00			.00 M	
4-0005	Copiers Aq 10/03/03 St 10/03/03 New Personal	7 0 1	1,216.82	.00	.00	564.95	173.83 Y	738.78
			1,216 82	.00			14 49 M	
4-0006	Computer Software & Hardware Aq 3/15/03 St 3/15/03 New Personal	5 0 1	1,051 45	.00	.00	806.11	210.29 Y	1,016.40
			1,051.45	.00			17 52 M	
4-0007	New Computer Aq. 2/16/07 St 2/16/07 New Personal	5.0 1	1,417 20	.00	.00	.00	259.82 Y	259.82
			1,417 20	.00			23.62 M	
* OFFICE EQUIPMENT		PRE-1987 ASSETS	.00	.00	.00	.00	.00 Y	.00
			.00	.00			.00 M	
		POST-86 ASSETS.	17,237 72	.00	.00	14,923.31	643 94 Y	15,567 25
			17,237 72	.00			55 63 M	
			17,237 72	.00	.00	14,923 31	643.94 Y	15,567.25
			17,237 72	.00			55 63 M	

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14 14.38

Cat EQUIPMENT

Book- BOOK FY 1/99

Year: 2007 Period All

Fed ID State ID ()

Methods (1=s1)(2=ddb)(3=syd)(4=1 25db)(5=1.5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6)

ASSET NO	DESCRIPTION	YEARS DEPR DEPR METH	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR	ACCUMULATED DEPR
5-0001	CARRIER GAS FURNACE Aq 1/02/96 St 1/02/96 New Personal	10.0 1	8,292 59	.00	00	7,877 97	.00 Y 00 M	7,877 97
5-0002	CONDENSER FOR AC SYSTEM Aq 7/23/96 St 7/23/96 New Personal	10.0 1	1,472 30	00	.00	1,472 30	00 Y 00 M	1,472.30
5-0003	Furnace Aq 1/21/05 St 1/21/05 New Personal	10 0 1	1,950.00	.00	00	390.00	195 00 Y 16 25 M	585 00
5-0004	New Furnace & Repair Materials Aq 4/13/07 St 4/13/07 New Personal	10 0 1	2,600 00	00	.00	00	195 00 Y 21 67 M	195 00
5-0005	A/C Condenser Replacements Aq. 8/02/07 St 8/02/07 New Personal	10 0 1	7,746 90	00	.00	00	322.79 Y 64.56 M	322 79
5-0006	Modificatons To Heating System Aq 12/21/07 St 12/21/07 New Personal	10 0 1	4,600.00	.00	00	00	38 33 Y 38 33 M	38 33
5-0007	Tensabarrier Posts for Study Aq 3/16/07 St 3/16/07 New Personal	10 0 1	2,207.20	.00	00	.00	183 93 Y 18 39 M	183 93
* EQUIPMENT		PRE-1987 ASSETS:	00	00	00	00	.00 Y .00 M	.00
		POST-86 ASSETS	28,868 99	00	00	9,740 27	935.05 Y 159 20 M	10,675 32
			28,868 99	00	00	9,740.27	935.05 Y 159 20 M	10,675 32

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14 14.38

Cat: FENCE

Book BOOK FY 1/99

Year 2007 Period: All

Fed ID

State ID

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Methods (1=s1)(2=ddb)(3=syd)(4=1 25db)(5=1.5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6.)

ASSET NO	DESCRIPTION	YEARS DEPR. DEPR METH.	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR	ACCUMULATED DEPR
6-0001	FENCE	25 0 1	20,463 71	00	00	8,594 78	818 55 Y	9,413 33
	Aq 11/13/96 St-11/13/96 New Personal		20,463 71	00			68.21 M	
<hr/>								
* FENCE	PRE-1987 ASSETS		00	00	00	00	00 Y	00
			00	00			.00 M	
	POST-86 ASSETS.		20,463 71	00	.00	8,594 78	818 55 Y	9,413 33
			20,463.71	00			68 21 M	
<hr/>								
			20,463 71	.00	00	8,594 78	818 55 Y	9,413 33
			20,463 71	00			68 21 M	

DEPRECIATION REPORT

SLC HISTORICAL ASSOCIATION

(33)

14 14.39

Cat: RED BARN

Book BOOK

FY. 1/99

Year: 2007 Period All

Fed ID.

State ID

()

Methods (1=sl)(2=ddb)(3=syd)(4=1.25db)(5=1.5db)(6N=acrs)(6Y=macrs/acrs s/l option)(7=macrs200 db)(8=macrs150 db)(9=macrs175 db)
 (Y=convert to straight line if declining balance or Y=straight line option if method 6)

ASSET NO	DESCRIPTION	YEARS DEPR DEPR METH	COST/ BASIS	REDUCTION/ SALVAGE	BONUS OR EXPENSE	PRIOR DEPR	CURRENT DEPR	ACCUMULATED DEPR
7-0001		39 0 1Y	886,866 77	.00	.00	113,700 85	22,740 17 Y	136,441 02
Aq	1/01/02 St. 1/01/02 New Rcal		886,866 77	.00			1,895 01 M	
* RED BARN		PRE-1987 ASSETS:	00	.00	00	00	00 Y	00
			.00	.00			00 M	
		POST-86 ASSETS:	886,866.77	.00	.00	113,700 85	22,740 17 Y	136,441.02
			886,866 77	.00			1,895 01 M	
			886,866.77	00	00	113,700 85	22,740 17 Y	136,441 02
			886,866.77	00			1,895 01 M	
TOTALS PRE-1987 ASSETS:			115,726.48	00	.00	39,347 01	2,314.53 Y	41,661 54
			115,726 48	00			192.88 M	
		POST-86 ASSETS	1281,068 27	00	00	249,074 28	40,806 14 Y	289,880 42
			1281,068 27	00			3,484 20 M	
			1396,794 75	00	00	288,421.29	43,120 67 Y	331,541 96
			1396,794 75	.00			3,677 08 M	