

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)

2009

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For the 2009 calendar year, or tax year beginning , 2009, and ending ,

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See specific instructions.	C Name of organization The Monroe Institute Number and street (or P.O. box if mail is not delivered to street addr) Room/suite 365 Roberts Mountain Road City, town or country State ZIP code + 4 Faber VA 22938	D Employer Identification Number 54-1824173 E Telephone number (434) 361-1252 G Gross receipts \$ 2,186,833.
F Name and address of principal officer: Frederick H. Atwa 365 Roberts Mountain Ro Faber VA 22938		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ www.monroeinstitute.org H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of Formation: 1985 M State of legal domicile: VA	

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>Education and Research</u>		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	5
	5 Total number of employees (Part V, line 2a)	5	24
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total gross unrelated business revenue from Part VIII, Icolumn (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	140,717.	112,604.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,556,747.	2,038,382.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	14,804.	15,432.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,976.	20,415.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,727,244.	2,186,833.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	876,700.	832,696.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,658,491.	1,568,280.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,535,191.	2,400,976.	
19 Revenue less expenses. Subtract line 18 from line 12	192,053.	-214,143.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	3,219,182.	3,001,160.
	22 Net assets or fund balances. Subtract line 21 from line 20	532,439.	431,657.
22 Net assets or fund balances. Subtract line 21 from line 20	2,686,743.	2,569,503.	

Part II Signature Block

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

Sign Here	Signature of officer _____ Date _____ Frederick H. Atwater Type or print name and title.		
Paid Preparer's Use Only	Preparer's signature ▶ Mike Kunkel Date 06/29/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ACCOUNTING CONSULTANTS, INC. 2771 ROCKFISH VALLEY HWY P O BOX 436 NELLYSFORD VA 22958-2309	EIN ▶	Phone no. ▶ (434) 361-9080

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

Education and Research

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,400,976. including grants of \$ 0.) (Revenue \$ 2,186,833.)

Education, training & research in stress reduction, personal development & accelerated learning techniques. More than 1,000 people were served. College scholarships were awarded to several local students. Donations made to a number of nonprofit organizations.

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

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

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,400,976.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If 'Yes,' complete Schedule C, Part II</i>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If 'Yes,' complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions 'Yes'? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>		
	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>		
	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X</i>		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If 'Yes,' complete Schedule D, Part X</i>		
12	Did the organization obtain separate, independent audited financial statement for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i>		X
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? <i>If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional</i>		
		Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i>	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

BAA

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1 a	26		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1 b	0		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2 a	24		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4 b	If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year		
7 e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966?		X
9 b	Did the organization make any distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12		
10 b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11 a	Gross income from other members or shareholders		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

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

Section A. Governing Body and Management

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

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

		Yes	No
10 a Does the organization have local chapters, branches, or affiliates?	10 a		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10 b		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12 c	X	
13 Does the organization have a written whistleblower policy?	13	X	
14 Does the organization have a written document retention and destruction policy?	14		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a The organization's CEO, Executive Director, or top management official	15 a	X	
b Other officers of key employees of the organization	15 b	X	
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		

Section C. Disclosures

- 17** List the states with which a copy of this Form 990 is required to be filed ► Virginia
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ► Accounting Consultants, Inc. 2771 Rockfish Valley Hwy Nellysford VA 22958 (434) 361-9080

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

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Dr. Al Dahlberg Director	0.00	X					0.	0.	0.	
Skip Atwater President/Treasurer	40.00	X		X			73,500.	0.	0.	
Dr. Brian Dailey Director	0.00	X					0.	0.	0.	
George Griffith Chairman	0.00	X					0.	0.	0.	
Dr. Darlene Miller Vice President	40.00	X		X			63,000.	0.	0.	
Virginia Colburn Director	0.00	X					0.	0.	0.	
John Herschelman Director	0.00	X					0.	0.	0.	
Paul Rademacher Executive Officer	40.00	X		X			84,000.	0.	0.	
Angie Smith Secretary	40.00			X			39,642.	0.	0.	

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a					
	b Membership dues	1 b	34,812.				
	c Fundraising events	1 c					
	d Related organizations	1 d					
	e Government grants (contributions)	1 e					
	f All other contributions, gifts, grants, and similar amounts not included above	1 f	77,792.				
	g Noncash contribns included in lns 1a-1f:		\$				
	h Total. Add lines 1a-1f			112,604.			
PROGRAM SERVICE REVENUE			Business Code				
	2 a -----						
	b -----						
	c -----						
	d -----						
	e -----						
	f All other program service revenue			2,038,382.	2,038,382.	0.	0.
g Total. Add lines 2a-2f			2,038,382.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		17,349.	17,349.	0.	0.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	20,415.				
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)	20,415.				
	d Net rental income or (loss)		20,415.	20,415.	0.	0.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	-1,917.				
		(ii) Other					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)	-1,917.				
	d Net gain or (loss)		-1,917.	-1,917.	0.	0.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code					
11 a -----							
b -----							
c -----							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			2,186,833.	2,074,229.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	260,142.	186,642.	73,500.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))	517,347.	517,347.	0.	0.
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	55,207.	55,207.	0.	0.
11 Fees for services (non-employees)				
a Management				
b Legal	32,828.	0.	32,828.	0.
c Accounting	31,111.	0.	31,111.	0.
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion	5,519.	5,519.	0.	0.
13 Office expenses	21,828.	20,082.	1,746.	0.
14 Information technology				
15 Royalties	15,892.	15,892.	0.	0.
16 Occupancy	52,467.	52,467.	0.	0.
17 Travel	48,314.	48,314.	0.	0.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	450.	0.	450.	0.
20 Interest	13,591.	13,591.	0.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	185,044.	170,691.	14,353.	0.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a -----				
b <u>Automobile</u>	10,612.	10,612.	0.	0.
c -----				
d -----				
e <u>Business Registration Fee</u>	80.	80.	0.	0.
f All other expenses	1,150,544.	1,143,571.	6,973.	0.
25 Total functional expenses. Add lines 1 through 24f	2,400,976.	2,240,015.	160,961.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
ASSETS	1 Cash — non-interest-bearing	305,780.	1	311,594.	
	2 Savings and temporary cash investments	760,202.	2	529,049.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4		
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use	116,520.	8	95,984.	
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,546,658.			
	b Less: accumulated depreciation	10b 1,486,325.	2,022,621.	10c	2,060,333.
	11 Investments — publicly-traded securities		11		
	12 Investments — other securities. See Part IV, line 11		12		
	13 Investments — program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	14,059.	15	4,200.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,219,182.	16	3,001,160.		
LIABILITIES	17 Accounts payable and accrued expenses	44,028.	17	16,902.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties	194,227.	24	185,510.	
	25 Other liabilities. Complete Part X of Schedule D	294,184.	25	229,245.	
	26 Total liabilities. Add lines 17 through 25	532,439.	26	431,657.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.				
	27 Unrestricted net assets	2,673,090.	27	2,461,212.	
	28 Temporarily restricted net assets	13,653.	28	108,291.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, and equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances.	2,686,743.	33	2,569,503.		
34 Total liabilities and net assets/fund balances.	3,219,182.	34	3,001,160.		

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b Were the organization's financial statements audited by an independent accountant?		X
2c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

BAA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: The Monroe Institute; Employer identification number: 54-1824173

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

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

- 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 [X] An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
10 An organization organized and operated exclusively to test for public safety.
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations...
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons...
f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

Table with 2 columns: Yes, No. Rows for 11g(i), 11g(ii), 11g(iii).

Table with 7 main columns: (i) Name of Supported Organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of Support. Includes a Total row at the bottom.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 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						
4 Total. Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
16b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose			2,081,294.	2,556,747.	2,038,382.	6,676,423.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5			2,081,294.	2,556,747.	2,038,382.	6,676,423.
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						6,676,423.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6			2,081,294.	2,556,747.	2,038,382.	6,676,423.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			65,469.	29,780.	35,847.	131,096.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b			65,469.	29,780.	35,847.	131,096.
11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (add lns 9, 10c, 11, and 12.)						6,807,519.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	98.07%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	97.99%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	1.93%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	2.01%

19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions**

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

Employer identification number

The Monroe Institute

54-1824173

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Yes No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

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

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

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

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

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

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

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

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

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

b If 'Yes,' explain the arrangement in Part XIV.

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

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

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1 a Land	589,286.			589,286.
b Buildings	2,235,057.		1,311,546.	923,511.
c Leasehold improvements	145,584.		10,552.	135,032.
d Equipment	224,638.		127,692.	96,946.
e Other	352,093.		36,535.	315,558.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ **2,060,333.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		

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

Part VIII Investments—Program Related (See Form 990, Part X, line 13)

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) ▶		

Part IX Other Assets (See Form 990, Part X, line 15)

(a) Description	(b) Book value
Employee Advances	4,200.
Prepaid Expenses	0.
Employee Benefits	0.
Total. (Column (b) must equal Form 990, Part X, col.(B), line 15)	4,200.

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Deferred Comp Liability	37,110.
Customer Deposits - Programs	166,815.
EE Benefits	2,100.
Sales Tax Payable	231.
Temporarily Restricted-Research	0.
Temporarily Restricted-Scholarship	0.
Accrued Vacation and Sick	14,608.
Bond Deduction	0.
Xmas Club	0.
See Part X Other Liabilities	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶	229,245.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

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

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

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

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

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

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 13,
or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**

Name of the organization

Employer identification number

The Monroe Institute

54-1824173

	YES	NO
1 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?	X	
2 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?	X	
3 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 had no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe. If 'No,' please explain. If you need more space, use Schedule O (Form 990)	X	
<u>Policy is published on the company website</u>		
<u>www.monroeinstitute.org</u>		

4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered 'No,' to any of the above, please explain. If you need more space, use Schedule O (Form 990). ----- -----		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered 'Yes,' to any of the above, please explain. If you need more space, use Schedule O (Form 990). ----- -----		
6a Does the organization receive any financial aid or assistance from a governmental agency?		X
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990). ----- -----		
7 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,' explain on Schedule O (Form 990).	X	

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

**Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

The Monroe Institute

54-1824173

Pt VI-A, Line 8a the governing body has the authority to act upon and

Pt VI-A, Line 8b document the meetings.

Pt VI-B, Line 10b a copy of form 990 (2009) was provided to the Board

Pt VI-B, Line 11A of Directors for information and for the purposes of

Pt VI-B, Line 12c review and comment if necessary before it was filed.

Pt VI-B, Line 15 Compensation for the Monroe Institute's Executive director

and officers was approved in advance by disinterested

members of the Board of Directors without interrelated

conflicts of interest. The disinterested board members

determined relevant compensation based on comparisons

with compensation data for similarly qualified persons

in functionally comparable positions at smilarly situated

organizations provided by ERI Economic Research Institute, Inc.

8575 164th Ave NE Suite 100, Redmond, WA 98052.

Pt VI-C, Line 19 The Monroe Institute makes its governing documents,

conflict-of-interest policy, and financial statement

available to the public during normal business hours in

the business office at 365 Roberts Mountain Road, Faber, VA

22938 and online at www.monroeinstitute.org.

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

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

Name(s) shown on return

The Monroe Institute

Business or activity to which this form relates

Form 990 / Form 990EZ

Identifying number

54-1824173

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	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
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 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	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 2010. 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 depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	12,598.
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 2009	17	163,618.
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 2009 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		1,418.	5.0 yrs	HY	200 DB	284.
c 7-year property		5,181.	7.0 yrs	HY	200 DB	740.
d 10-year property						
e 15-year property		5,995.	15.0 yrs	HY	150 DB	300.
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 2009 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	1,875.
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	179,415.
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No								24b If 'Yes,' is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25									
26 Property used more than 50% in a qualified business use:									
2003 E350 Club Ford W	03/29/04	100.00	16,515.	16,515.	5.00	SL-HY	1,875.		
27 Property used 50% or less in a qualified business use:									
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28								1,875.	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29									

Section B – Information on Use of Vehicles

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

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

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

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

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
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? (See instructions.)		

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year (see instructions):					
TMI Website -- additions	11/10/09	197,565.	197	5.00 yrs	5,629.
43 Amortization of costs that began before your 2009 tax year 43					
44 Total. Add amounts in column (f). See the instructions for where to report 44					5,629.

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).

A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization The Monroe Institute	Employer identification number 54-1824173
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. 365 Roberts Mountain Road	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Faber VA 22938	

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 (section 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 ▶ Accounting Consultants, Inc. -----

Telephone No. ▶ (434) 361-9080 ----- 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.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 16 ____, 20 10 ____, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:
▶ calendar year 20 09 __ or
▶ tax year beginning _____, 20 _____, and ending _____, 20 _____.

2 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	3a	\$	0.
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	3b	\$	0.
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	3c	\$	0.

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.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**990-EZ, 990, 990-T and 990-PF
Information Worksheet**

2009

Part I – Identifying Information

Employer Identification Number 54-1824173
 Name The Monroe Institute
 Address 365 Roberts Mountain Road Room/Suite
 City Faber State ... VA ZIP Code ... 22938
 Foreign Country
 Telephone Number (434) 361-1252 Extension
 Fax E-Mail Address

Eligible for hurricane tax relief legislation benefits, check here

Part II – Type of Return

- | | |
|--|---|
| <input type="checkbox"/> Form 990-EZ only | <input type="checkbox"/> Form 990-EZ with Form 990-T |
| <input checked="" type="checkbox"/> Form 990 only | <input type="checkbox"/> Form 990 with Form 990-T |
| <input type="checkbox"/> Form 990-PF only | <input type="checkbox"/> Form 990-PF with Form 990-T |
| <input type="checkbox"/> Form 990-T only | <input type="checkbox"/> Form 990-N (gross receipts \$25,000 or less) for Electronic Filing only |

QuickBooks Import Users & 990 to 990-EZ Data Transfer Option: Check if you're filing the EZ & want 990 imported data copied to the EZ **OR** for those not importing from QuickBooks who transferred from prior year 990 and now qualify to file the EZ this year, check this box to transfer 990 data to the EZ.

IMPORTANT

Before transferring data from Form 990 to Form 990-EZ, refer to "How to transfer data from filing Form 990 to 990-EZ" listed above in the Most Common Support Questions or Tax Help for this line.

Part III – Type of Organization

- | | | |
|--|------------------------------|---|
| <input checked="" type="checkbox"/> 501(c) Corporation/Association | <u>3</u> (subsection number) | <input type="checkbox"/> 220(e) Trust |
| <input type="checkbox"/> 501(c) Trust | _____ (subsection number) | <input type="checkbox"/> 408A Trust |
| <input type="checkbox"/> 4947(a)(1) Trust | | <input type="checkbox"/> 529(a) Corporation |
| <input type="checkbox"/> 408(e) Trust | | <input type="checkbox"/> 529(a) Trust |
| <input type="checkbox"/> 401(a) Trust | | <input type="checkbox"/> 530(a) Trust |
| <input type="checkbox"/> Other _____ (describe) | | <input type="checkbox"/> 527 Organization |
| | | <input type="checkbox"/> 501(c) Association |

Part IV – Tax Year and Filing Information

- Calendar year
 Fiscal year – Ending month
 Short year – Beginning date Ending date

Check this box if the organization is enrolled in the Electronic Federal Tax Payment System (EFTPS)

Part V – 2009 Estimated Taxes Paid

Check this box if the organization is a private foundation

Form 990-T Form 990-PF

Amount of 2008 overpayment credited to 2009 estimated tax

Payment Quarters	Due Date	Form 990-T		Form 990-PF	
		Date Paid	Amount Paid	Date Paid	Amount Paid
1st Quarter Payment	<u>04/15/09</u>				
2nd Quarter Payment	<u>06/15/09</u>				
3rd Quarter Payment	<u>09/15/09</u>				
4th Quarter Payment	<u>12/15/09</u>				
Additional Payment 1					
Additional Payment 2					
Additional Payment 3					
Additional Payment 4					

Part VI – Electronic Filing Information

Electronic Filing:

File the federal return electronically

Practitioner PIN program:

Sign this return electronically using the Practitioner PIN

ERO entered PIN

Officer's PIN (enter any 5 numbers) 12345

Date PIN entered

Electronic Filing of Extensions:

Check this box to file **Form 8868** (application for extension of time to file return) electronically

Information required for Electronic Filing:

Officer's Name Frederick H. Atwater

Electronic Filing of Amended Return:

Check this box to file **amended return** electronically

Part VII – Electronic Funds Withdrawal Information (Form 990PF filers only)

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of federal balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of Form 8868 balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of amended return balance due (EF only)? |

If any options selected above, enter information below, **(Review transferred information for accuracy)**

Bank Information

Name of Financial Institution (optional)

Check the appropriate box Checking Savings

Routing number

Account number

Payment Information

Enter the payment date to withdraw tax payment

Balance due amount from this return

Enter an amount to withdraw tax payment

If partial payment is made, the remaining balance due

Part VIII – Information for Client Letter

	Form 990-EZ or Form 990	Form 990-PF	Form 990-T
Extended Due Date	<u>08/16/10</u>		

Letter Salutation Skip Atwater

Part IX – Return Preparer

Enter preparer code from Firm/Preparer Info (See Help) mk

QuickZoom to Firm/Preparer Info

QuickZoom to Form 990-EZ, Pages 1 through 4

QuickZoom to Form 990, Page 1

QuickZoom to Form 990-PF, Page 1

QuickZoom to Form 990-T, Page 1

QuickZoom to Form 990-N, e-PostCard

QuickZoom to Client Status

Form 4562

The Monroe Institute
Form 990 - / Form 990EZ

Depreciation and Amortization Report

Tax Year 2009
► Keep for your records

2009

54-1824173

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Lab Equipment		02/16/09	2,422		100.00		1,211	1,211	7.00	200DB/HY		173
Office Equipment		02/27/09	2,643		100.00		1,322	1,321	7.00	200DB/HY		189
Computer (Katie)		03/06/09	691		100.00		346	345	5.00	200DB/HY		69
Video Tutorial		05/07/09	5,298		100.00		2,649	2,649	7.00	200DB/HY		378
LHI		07/28/09	11,991		100.00		5,996	5,995	15.00	150DB/HY		300
Computer w/monitor		10/15/09	2,147		100.00		1,074	1,073	5.00	200DB/HY		215
SUBTOTAL CURRENT YEAR			25,192	0		0	12,598	12,594			0	1,324
Air Conditioning		07/01/87	9,485		100.00			9,485	31.50	SL/MM	5,159	431
Fire Symm		08/13/89	1,869		100.00			1,869	31.50	SL/MM	915	79
Air Conditioning		11/19/89	2,795		100.00			2,795	31.50	SL/MM	1,349	117
Bl Ridge Phones		06/15/90	1,195		100.00			1,195	31.50	SL/MM	558	49
Center Buildings		09/30/94	520,980		100.00			520,980	25.00	SL/HY	297,411	21,292
Center Buildings		02/01/95	378,006		100.00			378,006	25.00	SL/HY	209,919	14,616
Lab Bldg Roof		05/30/95	1,730		100.00			1,730	15.00	SL/HY	1,563	111
Lab Heating System		11/09/95	3,462		100.00			3,462	15.00	SL/HY	3,070	261
Heat AC		04/24/96	2,920		100.00			2,920	15.00	SL/HY	2,456	186
Water Heater		12/01/97	737		100.00			737	10.00	SL/HY	737	0
Baby Grand Piano		07/08/98	1,306		100.00			1,306	10.00	SL/HY	1,306	0
NPC Brick Walkway		08/25/98	900		100.00			900	10.00	SL/HY	900	0
RMRC Pool and Landscape		11/01/98	41,840		100.00			41,840	10.00	SL/HY	41,840	0
RMRC Buildings		11/01/98	850,492		100.00			850,492	20.00	SL/HY	433,684	43,875
NPC Deck Addition		11/02/98	3,705		100.00			3,705	10.00	SL/HY	3,705	0
Gatehouse Deck		12/30/98	4,725		100.00			4,725	10.00	SL/HY	4,725	0
NPC Landscaping		12/31/98	1,037		100.00			1,037	10.00	SL/HY	1,037	0
DR Round Pedestal		02/26/99	1,367		100.00			1,367	10.00	SL/HY	1,314	53
Seed on Pool Pump		03/29/99	1,630		100.00			1,630	10.00	SL/HY	1,562	68
Beverage Air Refrigerator		03/29/99	2,482		100.00			2,482	10.00	SL/HY	2,378	104
DFH Roof		04/12/99	4,050		100.00			4,050	15.00	SL/HY	2,623	259
DFH Siding		05/15/99	2,933		100.00			2,933	15.00	SL/HY	1,885	191
Fox Den Sect Couch		06/07/99	6,156		100.00			6,156	10.00	SL/HY	5,865	291
Remodel GH		06/15/99	6,209		100.00			6,209	10.00	SL/HY	5,916	293
Orme Fence Gates		07/27/99	853		100.00			853	10.00	SL/HY	808	45
Lab Siding		09/03/99	4,000		100.00			4,000	15.00	SL/HY	2,496	273
Gatehouse Bldg		12/06/99	129,958		100.00			129,958	20.00	SL/HY	59,258	6,733
New GH Siding		12/22/99	9,517		100.00			9,517	15.00	SL/HY	5,758	683

Code: S = Sold, A = Auto, L = Listed, C = COGS

Form 4562

The Monroe Institute
Form 990 - / Form 990EZ

Depreciation and Amortization Report

Tax Year 2009
► Keep for your records

2009

54-1824173

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
GH Roof		12/22/99	4,500		100.00			4,500	15.00	SL/HY	2,723	323
NPC Siding		02/11/00	5,950		100.00			5,950	15.00	SL/HY	3,516	374
NPC Roof		03/07/00	5,811		100.00			5,811	15.00	SL/HY	3,404	370
NPC Skylight		03/08/00	940		100.00			940	7.00	SL/HY	940	0
NPC Capt Chairs		04/01/00	5,197		100.00			5,197	7.00	SL/HY	5,197	0
RMR Carpet		04/01/00	3,061		100.00			3,061	7.00	SL/HY	3,061	0
True Refrigerator		04/05/00	1,920		100.00			1,920	7.00	SL/HY	1,920	0
GE Freezer-RMR		04/07/00	532		100.00			532	7.00	SL/HY	532	0
True Freezer		04/12/00	2,386		100.00			2,386	7.00	SL/HY	2,386	0
NPC Dek Roof		05/03/00	7,232		100.00			7,232	15.00	SL/HY	4,167	472
RMR Cabin Heat Pump		08/15/00	2,923		100.00			2,923	10.00	SL/HY	2,470	302
Isolation Booth		09/10/00	2,588		100.00			2,588	7.00	SL/HY	2,588	0
Dishwasher		10/01/00	3,470		100.00			3,470	7.00	SL/HY	3,470	0
Waterbed & Trim		10/12/00	1,935		100.00			1,935	7.00	SL/HY	1,935	0
Millenium Booth		10/13/00	52,370		100.00			52,370	20.00	SL/HY	21,656	2,671
HVAC-Millenium		10/15/00	975		100.00			975	10.00	SL/HY	814	107
NPC Carpet		11/27/00	2,597		100.00			2,597	7.00	SL/HY	2,597	0
Telephone System		12/01/00	13,906		100.00			13,906	7.00	SL/HY	13,906	0
Mirror at RMTT		01/12/01	457		100.00			457	10.00	SL/HY	359	39
Weatherize Gatehouse		02/14/01	2,639		100.00			2,639	10.00	SL/HY	2,058	232
RMR Cabinet & Back		03/19/01	490		100.00			490	7.00	SL/HY	490	0
NPC Tower Glass		03/26/01	3,350		100.00			3,350	15.00	SL/HY	1,724	217
NPC Rewire		04/18/01	3,000		100.00			3,000	10.00	SL/HY	2,286	286
NPC Septic Repair		07/09/01	5,150		100.00			5,150	10.00	SL/HY	3,863	515
14VAC-Gatehouse		07/17/01	1,511		100.00			1,511	10.00	SL/HY	1,124	155
NPC Deck renovation		10/02/01	1,696		100.00			1,696	10.00	SL/HY	1,242	182
Lateral File - Lynn		11/20/01	400		100.00			400	10.00	SL/HY	288	45
John Deere 18S		05/01/02	941		100.00			941	5.00	SL/HY	941	0
Carpet 1664 Robots		05/07/02	4,700		100.00			4,700	5.00	SL/HY	4,700	0
HVAC NPC West Wing		07/22/02	3,896		100.00			3,896	10.00	SL/HY	2,508	397
Refrigerator-RMR		07/29/02	1,170		100.00			1,170	10.00	SL/HY	753	119
File Cabinet		12/23/02	209		100.00			209	5.00	SL/HY	209	0
Lab - J & J Engineering		12/31/02	2,865		100.00			2,865	5.00	SL/HY	2,865	0
HP 1200 Laser Printer		01/03/03	482		100.00			482	7.00	SL/HY	399	55
Carpet NPC Dining Room		02/06/03	3,928		100.00			3,928	7.00	SL/HY	3,227	467
250 sq ft beded ceiling		03/09/03	975		100.00			975	15.00	SL/HY	377	63
CHEC Unit in Meditation		03/09/03	1,275		100.00			1,275	15.00	SL/HY	493	82

Code: S = Sold, A = Auto, L = Listed, C = COGS

Form 4562

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Form 990 - / Form 990EZ

Depreciation and Amortization Report

Tax Year 2009
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2009

54-1824173

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
AC Compressor		06/19/03	1,650		100.00			1,650	10.00	SL/HY	908	165
AC Unit		08/07/03	1,970		100.00			1,970	10.00	SL/HY	1,070	200
100 gallon LP Hot Water		08/18/03	4,198		100.00			4,198	10.00	SL/HY	2,252	432
FM-850 Stereo FM		10/07/03	1,731		100.00			1,731	5.00	SL/HY	1,731	0
Carpet		02/09/04	4,383		100.00			4,383	5.00	SL/HY	4,067	316
Telephone System		03/11/04	4,260		100.00			4,260	5.00	SL/HY	3,929	331
2003 E350 Club Ford Wagon	A	03/29/04	16,515		100.00			16,515	5.00	SL/HY	14,261	1,875
Yamaha FLX-7-21		04/14/04	1,756		100.00			1,756	5.00	SL/HY	1,610	146
Tower Renovations		07/19/04	50,680		100.00			50,680	20.00	SL/HY	11,205	2,547
Yamaha CDR-HD		08/24/04	1,087		100.00			1,087	5.00	SL/HY	966	121
Range		08/31/04	388		100.00			388	5.00	SL/HY	345	43
Dryer		08/31/04	448		100.00			448	5.00	SL/HY	398	50
Refrigerator		08/31/04	479		100.00			479	5.00	SL/HY	426	53
Washer		08/31/04	770		100.00			770	5.00	SL/HY	684	86
Refrigerator		08/31/04	479		100.00			479	5.00	SL/HY	426	53
Dell Dimension 3000		10/26/04	606		100.00			606	5.00	SL/HY	532	74
Desk (lab)		02/20/05	346		100.00			346	5.00	SL/HY	256	60
Washer-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY	218	51
Dryer-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY	218	51
Elec-Range-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY	218	51
Lab Carpet & Vinyl Floor		02/28/05	1,573		100.00			1,573	7.00	SL/HY	845	208
Dell 4100MP Projector		03/25/05	2,266		100.00			2,266	5.00	SL/HY	1,654	408
Lab Remodel		03/31/05	931		100.00			931	10.00	SL/HY	346	90
Dell Equipment		04/19/05	692		100.00			692	5.00	SL/HY	498	129
Lab Carpet		05/15/05	880		100.00			880	7.00	SL/HY	457	121
Paving		08/16/05	38,000		100.00			38,000	15.00	SL/HY	8,478	2,567
RMR Roofing		09/08/05	5,450		100.00			5,450	15.00	SL/HY	1,215	368
Dell Computer		09/13/05	785		100.00			785	5.00	SL/HY	534	167
Dell Computer		09/13/05	800		100.00			800	5.00	SL/HY	484	211
RMR Furniture		09/15/05	840		100.00			840	7.00	SL/HY	404	125
Ionic Breeze Machine		09/30/05	448		100.00			448	5.00	SL/HY	300	99
NPC Roofing		12/08/05	4,900		100.00			4,900	15.00	SL/HY	1,019	337
QuickBoosk Pro 2006		12/10/05	630		100.00			630	3.00	SL/HY	630	0
Dell Dimension 3100		01/22/06	892		100.00			892	5.00	SL/HY	499	157
4 Inspirion		04/13/06	2,197		100.00			2,197	5.00	SL/HY	1,176	408
Dell Computer NPC		05/18/06	626		100.00			626	5.00	SL/HY	320	122
Gatehouse Fencing		06/27/06	602		100.00			602	10.00	SL/HY	150	60

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Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
RMR Improvements		06/30/06	12,115		100.00			12,115	20.00	SL/HY	1,515	606
Barn Improvements		06/30/06	10,282		100.00			10,282	20.00	SL/HY	1,285	514
Various Building Improvements		07/11/06	2,051		100.00			2,051	20.00	SL/HY	257	103
Gas Heater		07/19/06	1,000		100.00			1,000	5.00	SL/HY	488	205
Various Building Improvements		07/19/06	3,313		100.00			3,313	20.00	SL/HY	401	166
2 Dell E6600 Computers		08/31/06	2,618		100.00			2,618	5.00	SL/HY	1,247	548
Meade ETX-125PE		10/02/06	1,298		100.00			1,298	5.00	SL/HY	603	278
Dell Option GX 520		11/06/06	921		100.00			921	5.00	SL/HY	417	202
60" Gas Range		05/29/07	5,525		100.00			5,525	5.00	SL/HY	1,750	1,105
Denon Casette		08/07/07	1,911		100.00			1,911	5.00	SL/HY	541	382
Generator		08/15/07	35,000		100.00			35,000	10.00	SL/HY	4,958	3,500
Upright Freezer		09/19/07	648		100.00			648	5.00	SL/HY	173	129
Generator		09/19/07	16,771		100.00			16,771	10.00	SL/HY	2,236	1,677
Office Equipment		12/04/07	2,168		100.00			2,168	5.00	SL/HY	470	433
Generator		12/04/07	2,589		100.00			2,589	10.00	SL/HY	281	259
Dual Core 3050		12/04/07	1,613		100.00			1,613	3.00	SL/HY	583	537
Windows for Patio		12/20/07	3,962		100.00			3,962	20.00	SL/HY	206	198
Mattresses		12/21/07	10,000		100.00			10,000	7.00	SL/HY	1,548	1,429
Mattresses		12/21/07	6,884		100.00			6,884	7.00	SL/HY	1,065	983
DFH-Office, Computer Monitors		01/30/08	1,088		100.00			1,088	5.00	SL/MQ	190	218
DFH-Laserjet Printer		02/18/08	945		100.00			945	5.00	SL/MQ	165	189
NPC-Property Improvement		03/11/08	16,893		100.00			16,893	20.00	SL/MQ	739	845
Restaurant Range		03/24/08	5,261		100.00			5,261	10.00	SL/MQ	460	526
LawnMower		04/23/08	5,144		100.00			5,144	10.00	SL/MQ	322	514
Computer XPS		05/20/08	1,183		100.00			1,183	5.00	SL/MQ	148	237
General Property Improvements		06/23/08	59,686		100.00			59,686	20.00	SL/MQ	1,865	2,984
Lab-Office Computers/Equipment		07/09/08	2,660		100.00			2,660	10.00	SL/MQ	100	266
DFH Conference Equipment		07/22/08	10,519		100.00			10,519	10.00	SL/MQ	394	1,052
Lab Offices		09/22/08	5,434		100.00			5,434	10.00	SL/MQ	204	543
Lab-Office, Property Improv		09/30/08	13,531		100.00			13,531	20.00	SL/MQ	254	677
DFH-Property Improvement		10/21/08	33,016		100.00			33,016	20.00	SL/MQ	206	1,651
NPC-Video Equipment		11/04/08	5,020		100.00			5,020	10.00	SL/MQ	63	502
Lab-Office Equipment		11/25/08	4,467		100.00			4,467	10.00	SL/MQ	56	447
Gate House-Property Improv		12/15/08	10,467		100.00			10,467	20.00	SL/MQ	65	523
NPC-Kitchen		12/31/08	3,943		100.00			3,943	10.00	SL/MQ	49	394
TMI Website		12/31/08	154,528		100.00			154,528	5.00	SL/MQ	3,863	30,906
SUBTOTAL PRIOR YEAR			2,763,363	0		0	0	2,763,363			1,301,281	165,493

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Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation	Adjustment/Preference
DEPRECIATION													
Lab Equipment		02/16/09	2,422		100.00		1,211	1,211	7.00	200DB/HY		173	0.
Office Equipment		02/27/09	2,643		100.00		1,322	1,321	7.00	200DB/HY		189	0.
Computer (Katie)		03/06/09	691		100.00		346	345	5.00	200DB/HY		69	0.
Video Tutorial		05/07/09	5,298		100.00		2,649	2,649	7.00	200DB/HY		378	0.
LHI		07/28/09	11,991		100.00		5,996	5,995	15.00	150DB/HY		300	0.
Computer w/monitor		10/15/09	2,147		100.00		1,074	1,073	5.00	200DB/HY		215	0.
SUBTOTAL CURRENT YEAR			25,192	0		0	12,598	12,594			0	1,324	0.
Air Conditioning		07/01/87	9,485		100.00			9,485	40.00	SL/MM		237	194.
Fire Syrm		08/13/89	1,869		100.00			1,869	40.00	SL/MM		46	33.
Air Conditioning		11/19/89	2,795		100.00			2,795	40.00	SL/MM		70	47.
Bl Ridge Phones		06/15/90	1,195		100.00			1,195	40.00	SL/MM		30	19.
Center Buildings		09/30/94	520,980		100.00			520,980	50.00	SL/HY		10,419	10,873.
Center Buildings		02/01/95	378,006		100.00			378,006	50.00	SL/HY		7,560	7,056.
Lab Bldg Roof		05/30/95	1,730		100.00			1,730	15.00	SL/HY		115	-4.
Lab Heating System		11/09/95	3,462		100.00			3,462	15.00	SL/HY		231	30.
Heat AC		04/24/96	2,920		100.00			2,920	15.00	SL/HY		194	-8.
Water Heater		12/01/97	737		100.00			737	10.00	SL/HY		0	0.
Baby Grand Piano		07/08/98	1,306		100.00			1,306	10.00	SL/HY		0	0.
NPC Brick Walkway		08/25/98	900		100.00			900	10.00	SL/HY		0	0.
RMRC Pool and Landscape		11/01/98	41,840		100.00			41,840	10.00	SL/HY		0	0.
RMRC Buildings		11/01/98	850,492		100.00			850,492	20.00	SL/HY		42,525	1,350.
NPC Deck Addition		11/02/98	3,705		100.00			3,705	10.00	SL/HY		0	0.
Gatehouse Deck		12/30/98	4,725		100.00			4,725	10.00	SL/HY		0	0.
NPC Landscaping		12/31/98	1,037		100.00			1,037	10.00	SL/HY		0	0.
DR Round Pedestal		02/26/99	1,367		100.00			1,367	10.00	SL/HY		68	-15.
Seed on Pool Pump		03/29/99	1,630		100.00			1,630	10.00	SL/HY		81	-13.
Beverage Air Refrigera		03/29/99	2,482		100.00			2,482	10.00	SL/HY		124	-20.
DFH Roof		04/12/99	4,050		100.00			4,050	15.00	SL/HY		270	-11.
DFH Siding		05/15/99	2,933		100.00			2,933	15.00	SL/HY		195	-4.
Fox Den Sect Couch		06/07/99	6,156		100.00			6,156	10.00	SL/HY		308	-17.
Remodel GH		06/15/99	6,209		100.00			6,209	10.00	SL/HY		310	-17.
Orme Fence Gates		07/27/99	853		100.00			853	10.00	SL/HY		43	2.
Lab Siding		09/03/99	4,000		100.00			4,000	15.00	SL/HY		267	6.
Gatehouse Bldg		12/06/99	129,958		100.00			129,958	20.00	SL/HY		6,498	235.
New GH Siding		12/22/99	9,517		100.00			9,517	15.00	SL/HY		635	48.

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GH Roof		12/22/99	4,500		100.00			4,500	15.00	SL/HY		300	23.
NPC Siding		02/11/00	5,950		100.00			5,950	15.00	SL/HY		396	-22.
NPC Roof		03/07/00	5,811		100.00			5,811	15.00	SL/HY		388	-18.
NPC Skylight		03/08/00	940		100.00			940	7.00	SL/HY		0	0.
NPC Capt Chairs		04/01/00	5,197		100.00			5,197	7.00	SL/HY		0	0.
RMR Carpet		04/01/00	3,061		100.00			3,061	7.00	SL/HY		0	0.
True Refrigerator		04/05/00	1,920		100.00			1,920	7.00	SL/HY		0	0.
GE Freezer-RMR		04/07/00	532		100.00			532	7.00	SL/HY		0	0.
True Freezer		04/12/00	2,386		100.00			2,386	7.00	SL/HY		0	0.
NPC Dek Roof		05/03/00	7,232		100.00			7,232	15.00	SL/HY		482	-10.
RMR Cabin Heat Pump		08/15/00	2,923		100.00			2,923	10.00	SL/HY		293	9.
Isolation Booth		09/10/00	2,588		100.00			2,588	7.00	SL/HY		0	0.
Dishwasher		10/01/00	3,470		100.00			3,470	7.00	SL/HY		0	0.
Waterbed & Trim		10/12/00	1,935		100.00			1,935	7.00	SL/HY		0	0.
Millenium Booth		10/13/00	52,370		100.00			52,370	20.00	SL/HY		2,619	52.
HVAC-Millenium		10/15/00	975		100.00			975	10.00	SL/HY		97	10.
NPC Carpet		11/27/00	2,597		100.00			2,597	7.00	SL/HY		0	0.
Telephone System		12/01/00	13,906		100.00			13,906	7.00	SL/HY		0	0.
Mirror at RMTT		01/12/01	457		100.00			457	10.00	SL/HY		46	-7.
Weatherize Gatehouse		02/14/01	2,639		100.00			2,639	10.00	SL/HY		264	-32.
RMR Cabinet & Back		03/19/01	490		100.00			490	7.00	SL/HY		0	0.
NPC Tower Glass		03/26/01	3,350		100.00			3,350	15.00	SL/HY		223	-6.
NPC Rewire		04/18/01	3,000		100.00			3,000	10.00	SL/HY		300	-14.
NPC Septic Repair		07/09/01	5,150		100.00			5,150	10.00	SL/HY		515	0.
14VAC-Gatehouse		07/17/01	1,511		100.00			1,511	10.00	SL/HY		151	4.
NPC Deck renovation		10/02/01	1,696		100.00			1,696	10.00	SL/HY		170	12.
Lateral File - Lynn		11/20/01	400		100.00			400	10.00	SL/HY		40	5.
John Deere 18S		05/01/02	941		100.00			941	5.00	SL/HY		0	0.
Carpet 1664 Robets		05/07/02	4,700		100.00			4,700	5.00	SL/HY		0	0.
HVAC NPC West Wing		07/22/02	3,896		100.00			3,896	10.00	SL/HY		389	8.
Refrigerator-RMR		07/29/02	1,170		100.00			1,170	10.00	SL/HY		117	2.
File Cabinet		12/23/02	209		100.00			209	5.00	SL/HY		0	0.
Lab - J & J Engineering		12/31/02	2,865		100.00			2,865	5.00	SL/HY		0	0.
HP 1200 Laser Printer		01/03/03	482		100.00			482	7.00	SL/HY		69	-14.
Carpet NPC Dining Room		02/06/03	3,928		100.00			3,928	7.00	SL/HY		561	-94.
250 sq ft beded ceiling		03/09/03	975		100.00			975	15.00	SL/HY		65	-2.
CHEC Unit in Meditation		03/09/03	1,275		100.00			1,275	15.00	SL/HY		85	-3.

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AC Compressor		06/19/03	1,650		100.00			1,650	10.00	SL/HY		165	0.
AC Unit		08/07/03	1,970		100.00			1,970	10.00	SL/HY		197	3.
100 gallon LP Hot Water		08/18/03	4,198		100.00			4,198	10.00	SL/HY		420	12.
FM-850 Stereo FM		10/07/03	1,731		100.00			1,731	5.00	SL/HY		0	0.
Carpet		02/09/04	4,383		100.00			4,383	5.00	SL/HY		438	-122.
Telephone System		03/11/04	4,260		100.00			4,260	5.00	SL/HY		426	-95.
2003 E350 Club Ford Wa	A	03/29/04	16,515		100.00			16,515	5.00	SL/HY		1,875	0.
Yamaha FLX-7-21		04/14/04	1,756		100.00			1,756	5.00	SL/HY		176	-30.
Tower Renovations		07/19/04	50,680		100.00			50,680	20.00	SL/HY		2,534	13.
Yamaha CDR-HD		08/24/04	1,087		100.00			1,087	5.00	SL/HY		109	12.
Range		08/31/04	388		100.00			388	5.00	SL/HY		39	4.
Dryer		08/31/04	448		100.00			448	5.00	SL/HY		45	5.
Refrigerator		08/31/04	479		100.00			479	5.00	SL/HY		48	5.
Washer		08/31/04	770		100.00			770	5.00	SL/HY		77	9.
Refrigerator		08/31/04	479		100.00			479	5.00	SL/HY		48	5.
Dell Dimension 3000		10/26/04	606		100.00			606	5.00	SL/HY		61	13.
Desk (lab)		02/20/05	346		100.00			346	5.00	SL/HY		69	-9.
Washer-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY		59	-8.
Dryer-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY		59	-8.
Elec-Range-Gatehouse		02/22/05	295		100.00			295	5.00	SL/HY		59	-8.
Lab Carpet & Vinyl Floor		02/28/05	1,573		100.00			1,573	7.00	SL/HY		225	-17.
Dell 4100MP Projector		03/25/05	2,266		100.00			2,266	5.00	SL/HY		453	-45.
Lab Remodel		03/31/05	931		100.00			931	10.00	SL/HY		93	-3.
Dell Equipment		04/19/05	692		100.00			692	5.00	SL/HY		139	-10.
Lab Carpet		05/15/05	880		100.00			880	7.00	SL/HY		125	-4.
Paving		08/16/05	38,000		100.00			38,000	15.00	SL/HY		2,533	34.
RMR Roofing		09/08/05	5,450		100.00			5,450	15.00	SL/HY		363	5.
Dell Computer		09/13/05	785		100.00			785	5.00	SL/HY		157	10.
Dell Computer		09/13/05	800		100.00			800	5.00	SL/HY		160	51.
RMR Furniture		09/15/05	840		100.00			840	7.00	SL/HY		120	5.
Ionic Breeze Machine		09/30/05	448		100.00			448	5.00	SL/HY		89	10.
NPC Roofing		12/08/05	4,900		100.00			4,900	15.00	SL/HY		327	10.
QuickBoosk Pro 2006		12/10/05	630		100.00			630	3.00	SL/HY		0	0.
Dell Dimension 3100		01/22/06	892		100.00			892	5.00	SL/HY		178	-21.
4 Inspirion		04/13/06	2,197		100.00			2,197	5.00	SL/HY		440	-32.
Dell Computer NPC		05/18/06	626		100.00			626	5.00	SL/HY		125	-3.
Gatehouse Fencing		06/27/06	602		100.00			602	10.00	SL/HY		60	0.

Code: S = Sold, A = Auto, L = Listed, C = COGS, P = Passive

Form 4562

The Monroe Institute
Form 990 - / Form 990EZ

Alternative Minimum Tax Depreciation Report

Tax Year 2009
► Keep for your records

2009

54-1824173

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation	Adjustment/Preference
RMR Improvements		06/30/06	12,115		100.00			12,115	20.00	SL/HY		606	0.
Barn Improvements		06/30/06	10,282		100.00			10,282	20.00	SL/HY		514	0.
Various Building Impro		07/11/06	2,051		100.00			2,051	20.00	SL/HY		103	0.
Gas Heater		07/19/06	1,000		100.00			1,000	5.00	SL/HY		200	5.
Various Building Impro		07/19/06	3,313		100.00			3,313	20.00	SL/HY		166	0.
2 Dell E6600 Computers		08/31/06	2,618		100.00			2,618	5.00	SL/HY		524	24.
Meade ETX-125PE		10/02/06	1,298		100.00			1,298	5.00	SL/HY		260	18.
Dell Option GX 520		11/06/06	921		100.00			921	5.00	SL/HY		184	18.
60" Gas Range		05/29/07	5,525		100.00			5,525	5.00	SL/HY	1,658	1,105	0.
Denon Casette		08/07/07	1,911		100.00			1,911	5.00	SL/HY	573	382	0.
Generator		08/15/07	35,000		100.00			35,000	10.00	SL/HY	5,250	3,500	0.
Upright Freezer		09/19/07	648		100.00			648	5.00	SL/HY	195	129	0.
Generator		09/19/07	16,771		100.00			16,771	10.00	SL/HY	2,516	1,677	0.
Office Equipment		12/04/07	2,168		100.00			2,168	5.00	SL/HY	651	433	0.
Generator		12/04/07	2,589		100.00			2,589	10.00	SL/HY	388	259	0.
Dual Core 3050		12/04/07	1,613		100.00			1,613	3.00	SL/HY	807	537	0.
Windows for Patio		12/20/07	3,962		100.00			3,962	20.00	SL/HY	297	198	0.
Mattresses		12/21/07	10,000		100.00			10,000	7.00	SL/HY	2,143	1,429	0.
Mattresses		12/21/07	6,884		100.00			6,884	7.00	SL/HY	1,475	983	0.
DFH-Office, Computer M		01/30/08	1,088		100.00			1,088	5.00	SL/MQ	190	218	0.
DFH-Laserjet Printer		02/18/08	945		100.00			945	5.00	SL/MQ	165	189	0.
NPC-Property Improve		03/11/08	16,893		100.00			16,893	20.00	SL/MQ	739	845	0.
Restaurant Range		03/24/08	5,261		100.00			5,261	10.00	SL/MQ	460	526	0.
LawnMower		04/23/08	5,144		100.00			5,144	10.00	SL/MQ	322	514	0.
Computer XPS		05/20/08	1,183		100.00			1,183	5.00	SL/MQ	148	237	0.
General Property Impro		06/23/08	59,686		100.00			59,686	20.00	SL/MQ	1,865	2,984	0.
Lab-Office Computers/E		07/09/08	2,660		100.00			2,660	10.00	SL/MQ	100	266	0.
DFH Conference Equipm		07/22/08	10,519		100.00			10,519	10.00	SL/MQ	394	1,052	0.
Lab Offices		09/22/08	5,434		100.00			5,434	10.00	SL/MQ	204	543	0.
Lab-Office, Property I		09/30/08	13,531		100.00			13,531	20.00	SL/MQ	254	677	0.
DFH-Property Improve		10/21/08	33,016		100.00			33,016	20.00	SL/MQ	206	1,651	0.
NPC-Video Equipment		11/04/08	5,020		100.00			5,020	10.00	SL/MQ	63	502	0.
Lab-Office Equipment		11/25/08	4,467		100.00			4,467	10.00	SL/MQ	56	447	0.
Gate House-Property Im		12/15/08	10,467		100.00			10,467	20.00	SL/MQ	65	523	0.
NPC-Kitchen		12/31/08	3,943		100.00			3,943	10.00	SL/MQ	49	394	0.
TMI Website		12/31/08	154,528		100.00			154,528	5.00	SL/MQ	3,863	30,906	0.
SUBTOTAL PRIOR YEAR			2,763,363	0		0	0	2,763,363			25,096	145,950	19,543.

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Schedule D, Supplemental Financial Statements

Part X Other Liabilities

(a) Description of Liability	Beg of Year Amount (990-EZ ONLY)	(b) End of Year Amount
401K ER/EE		3,214.
Interstate Industries, Inc, current		4,693.
Royalties Due		474.