

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)

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service(7)

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

A For the 2007 calendar year, or tax year beginning 2007, and ending

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

C AMERICAN SOCIETY OF ICHTHYOLOGISTS HERPETOLOGISTS C/O M. NEIGHBORS, 633 N. PINE WAY ANAHEIM, CA 92850-2506 92805-2506 CLIENT'S COPY

D Employer identification number 95-6056946 E Telephone number 714-772-9345 F Accounting method: Cash [X] Accrual [] Other (specify)

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

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

G Web site: www.asih.org

J Organization type (check only one) [X] 501(c) 3 (insert no.) [] 4947(a)(1) or [] 527

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 780,883.

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants... 2 Program service revenue... 3 Membership dues... 4 Interest on savings... 5 Dividends... 6a Gross rents... 6b Less: rental expenses... 6c Net rental income... 7 Other investment income... 8a Gross amount from sales of assets... 8b Less: cost or other basis... 8c Gain or (loss)... 8d Net gain or (loss)... 9 Special events and activities... 9a Gross revenue... 9b Less: direct expenses... 9c Net income... 10a Gross sales of inventory... 10b Less: cost of goods sold... 10c Gross profit... 11 Other revenue... 12 Total revenue... 13 Program services... 14 Management and general... 15 Fundraising... 16 Payments to affiliates... 17 Total expenses... 18 Excess or (deficit) for the year... 19 Net assets or fund balances at beginning of year... 20 Other changes in net assets... 21 Net assets or fund balances at end of year.

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22b Other grants and allocations (att sch) See Stmt 4 (cash \$ 24,500. non-cash \$ 148.) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	24,648.	24,648.		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	0.	0.	0.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c	0.	0.	0.	0.
26 Salaries and wages of employees not included on lines 25a, b, and c	26				
27 Pension plan contributions not included on lines 25a, b, and c	27				
28 Employee benefits not included on lines 25a - 27	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31	7,016.		7,016.	
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38	157,011.	157,011.		
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize): a See Statement 5	43a	141,937.	56,642.	85,295.	
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	330,612.	238,301.	92,311.	0.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

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

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

What is the organization's primary exempt purpose? ▶ <u>See Statement 6</u>	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a <u>PRINTING AND PUBLICATION OF COPEIA JOURNAL, (DIRECTORY ONLINE) AND SPECIAL PUBLICATIONS</u> ----- ----- ----- (Grants and allocations \$ <u>213,653.</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	213,653.
b <u>FUNDS AWARDED FOR RESEARCH</u> ----- ----- ----- (Grants and allocations \$ <u>24,648.</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	24,648.
c ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services..... (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)..... ▶	238,301.

BAA

Part IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year		(B) End of year	
ASSETS	45 Cash — non-interest-bearing	193,632.	45	205,978.	
	46 Savings and temporary cash investments	288,857.	46	341,705.	
	47a Accounts receivable	39,687.			
	b Less: allowance for doubtful accounts		63,369.	47c	39,687.
	48a Pledges receivable			48c	
	b Less: allowance for doubtful accounts			48c	
	49 Grants receivable			49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b	
	51a Other notes and loans receivable (attach schedule)			51c	
	b Less: allowance for doubtful accounts			51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54a Investments — publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	626,072.	54a	670,925.
	b Investments — other securities (attach scht)	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		54b	
	55a Investments — land, buildings, & equipment: basis	55a			
	b Less: accumulated depreciation (attach schedule)	55b		55c	
	56 Investments — other (attach schedule)			56	
	57a Land, buildings, and equipment: basis	57a			
	b Less: accumulated depreciation (attach schedule)	57b		57c	
	58 Other assets, including program-related investments (describe ▶ <u>See Statement 7</u>)		2.	58	5,235.
	59 Total assets (must equal line 74). Add lines 45 through 58		1,171,932.	59	1,263,530.
	LIABILITIES	60 Accounts payable and accrued expenses	37,028.	60	48,624.
		61 Grants payable		61	
		62 Deferred revenue	125,252.	62	132,087.
63 Loans from officers, directors, trustees, and key employees (attach schedule)			63		
64a Tax-exempt bond liabilities (attach schedule)			64a		
b Mortgages and other notes payable (attach schedule)			64b		
65 Other liabilities (describe ▶			65		
66 Total liabilities. Add lines 60 through 65		162,280.	66	180,711.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	848,539.	67	918,674.	
	68 Temporarily restricted	29,113.	68	32,145.	
	69 Permanently restricted	132,000.	69	132,000.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		1,009,652.	73	1,082,819.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		1,171,932.	74	1,263,530.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	396,814.
b	Amounts included on line a but not on Part I, line 12:		
	1 Net unrealized gains on investments	b1	
	2 Donated services and use of facilities	b2	
	3 Recoveries of prior year grants	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	396,814.
d	Amounts included on Part I, line 12, but not on line a:		
	1 Investment expenses not included on Part I, line 6a	d1	6,965.
	2 Other (specify): See Stmt 8	d2	38,238.
	Add lines d1 and d2	d	45,203.
e	Total revenue (Part I, line 12). Add lines c and d	e	442,017.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	323,647.
b	Amounts included on line a but not on Part I, line 17:		
	1 Donated services and use of facilities	b1	
	2 Prior year adjustments reported on Part I, line 20	b2	
	3 Losses reported on Part I, line 20	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	323,647.
d	Amounts included on Part I, line 17, but not on line a:		
	1 Investment expenses not included on Part I, line 6b	d1	6,965.
	2 Other (specify):	d2	
	Add lines d1 and d2	d	6,965.
e	Total expenses (Part I, line 17). Add lines c and d	e	330,612.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
RICHARD MAYDEN SEE ORGANIZATION ADDRESS	President 0	0.	0.	0.
ADDITIONAL: SEE ATTACHED SEE ORGANIZATION ADDRESS	0	0.	0.	0.
DR FROST SEE ORGANIZATION ADDRESS	PAST PRESIDENT 0	0.	0.	0.
MARGARET NEIGHBORS SEE ORGANIZATION ADDRESS	Treasurer 0	0.	0.	0.
MAUREEN A. DONNELLY SEE ORGANIZATION ADDRESS	Secretary 0	0.	0.	0.
SCOTT A SCHAEFER SEE ORGANIZATION ADDRESS	EDITOR 0	0.	0.	0.

Part A Current Officers, Directors, Trustees, and Key Employees (continued)	Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings. . . ▶ 105	75a	X
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization' If 'Yes,' attach a statement that includes the information described in the instructions.	75c	X
d Does the organization have a written conflict of interest policy?	75d	X

Part B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
	None				

Part VI Other Information (See the instructions.)	Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement.	79	X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If 'Yes,' enter the name of the organization ▶ <u>N/A</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a Enter direct and indirect political expenditures. (See line 81 instructions.)	81a	0.
b Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members.	85c	N/A
d	Section 162(e) lobbying and political expenditures.	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e).	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12.	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities.	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders.	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI.	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction.	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization.		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? ...	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ▶ <u>None</u>		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	0
91 a	The books are in care of ▶ <u>MARGARET NEIGHBORS</u> Telephone number ▶ <u>714-772-9345</u> Located at ▶ <u>633 N. PINE WAY, ANAHEIM CA</u> ZIP + 4 ▶ <u>92805-2506</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	X
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.			

Part VI Other information (continued)

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

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

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a See Statement 9					186,230.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					144,931.
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	30,666.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income			14	31,088.	
100 Gain or (loss) from sales of assets other than inventory					46,989.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b MISCELLANEOUS					1,767.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				61,754.	379,917.
105 Total (add line 104, columns (B), (D), and (E))					441,671.

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 10

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

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	0%			
	0%			
	0%			
	0%			

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

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

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

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

Yes	No
	X

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

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

Yes	No
	X

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

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

Yes	No
	X

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.

Please Sign Here

Signature of officer: MARGARET NEIGHBORS, Treasurer Date: _____
 Type of print name and title.

Paid Preparer's Use Only

Preparer's signature: Richard D. Garman Date: _____
 Check if self-employed: Preparer's SSN or PTIN (See General Instruction X): P00088470
 Firm's name (or yours if self-employed), address, and ZIP + 4: Richard D. Garman & Associates, CPAs A.C.
10061 Talbert Ave Ste 200 EIN: 33-0298489
Fountain Valley, CA 92708 Phone no.: (714) 378-6019

BAA

SCHEDULE A
(Form 990 or 990-EZ)

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

OMB No. 1545-0047

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

2007

Supplementary Information — (See separate instructions.)

Department of the Treasury
Internal Revenue Service

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

Name of the organization **AMERICAN SOCIETY OF ICHTHYOLOGISTS
HERPETOLOGISTS** Employer identification number
95-6056946

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000	0			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services	0	

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services	0	

Part III Statements About Activities (See instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>N/A</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</p>	<p>1</p>		<p>X</p>
<p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p>			
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)</p>			
<p>a Sale, exchange, or leasing of property?</p>	<p>2a</p>		<p>X</p>
<p>b Lending of money or other extension of credit?</p>	<p>2b</p>		<p>X</p>
<p>c Furnishing of goods, services, or facilities?</p>	<p>2c</p>		<p>X</p>
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	<p>2d</p>	<p>X</p>	
<p>e Transfer of any part of its income or assets?</p>	<p>2e</p>		<p>X</p>
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.)</p>	<p>3a</p>	<p>X</p>	
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	<p>3b</p>		<p>X</p>
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement.</p>	<p>3c</p>		<p>X</p>
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	<p>3d</p>		<p>X</p>
<p>4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g.</p>	<p>4a</p>		<p>X</p>
<p>b Did the organization make any taxable distributions under section 4966?</p>	<p>4b</p>	<p>N/A</p>	
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	<p>4c</p>	<p>N/A</p>	
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶</p>			<p>N/A</p>
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶</p>			<p>N/A</p>
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶</p>			<p>0</p>
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . . . ▶</p>			<p>0.</p>

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

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ -----
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc. functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: ▶
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

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

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0.

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

BAA

Part IV Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in).....	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)...	4,193.	7,573.	12,433.	2,785.	26,984.
16 Membership fees received.....	163,093.	167,851.	122,088.	125,522.	578,554.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose.....	170,012.	240,698.	146,682.	126,942.	684,334.
18 Gross income from interest, dividends, arnts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975...	25,333.	26,709.	9,473.	8,930.	70,445.
19 Net income from unrelated business activities not included in line 18.....					0.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.....					0.
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.....					0.
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. See Stmt. 12	1,717.	2,863.	5,230.	3,831.	13,641.
23 Total of lines 15 through 22.....	364,348.	445,694.	295,906.	268,010.	1,373,958.
24 Line 23 minus line 17.....	194,336.	204,996.	149,224.	141,068.	689,624.
25 Enter 1% of line 23.....	3,643.	4,457.	2,959.	2,680.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24..... N/A... ▶ 26a

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts..... ▶ 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e)..... ▶ 26c

d Add: Amounts from column (e) for lines: 18 _____ 19 _____
22 _____ 26b _____ ▶ 26d

e Public support (line 26c minus line 26d total)..... ▶ 26e

f Public support percentage (line 26e (numerator) divided by line 26c (denominator))..... ▶ 26f %

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year:
(2006) _____ 0. (2005) _____ 0. (2004) _____ 0. (2003) _____ 0.

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:
(2006) _____ 0. (2005) _____ 0. (2004) _____ 0. (2003) _____ 0.

c Add: Amounts from column (e) for lines: 15 _____ 26,984. 16 _____ 578,554.
17 _____ 684,334. 20 _____ 21 _____ ▶ 27c 1,289,872.

d Add: Line 27a total..... 0. and line 27b total..... 0. ▶ 27d 0.

e Public support (line 27c total minus line 27d total)..... ▶ 27e 1,289,872.

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e).... ▶ 27f 1,373,958.

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))..... ▶ 27g 93.88 %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))..... ▶ 27h 5.13 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			

34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended?		
If you answered 'Yes' to either 34a or b, please explain using an attached statement.			

35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

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

Limits on Lobbying Expenditures

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

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50.)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

N/A

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

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:		
(i)	Cash		X
(ii)	Other assets		X
b	Other transactions:		
(i)	Sales or exchanges of assets with a noncharitable exempt organization		X
(ii)	Purchases of assets from a noncharitable exempt organization		X
(iii)	Rental of facilities, equipment, or other assets		X
(iv)	Reimbursement arrangements		X
(v)	Loans or loan guarantees		X
(vi)	Performance of services or membership or fundraising solicitations		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If 'Yes,' complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Statement 1
Form 990, Part I, Line 7
Other Investment Income

CAPITAL GAIN DIVIDENDS.....	\$	31,088.
Total	\$	<u>31,088.</u>

Statement 2
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price:	385,855.	
Cost or Other Basis:	338,866.	
Total Gain (Loss) Publicly Traded Securities	\$	<u>46,989.</u>
Total Net Gain (Loss) From Noninventory Sales	\$	<u>46,989.</u>

Statement 3
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

BOOK TAX DIFFERENCES PER 990 PART IV.....	\$	-38,238.
Total	\$	<u>-38,238.</u>

Statement 4
Form 990, Part II, Line 22b
Other Grants and Allocations

Cash Grants and Allocations

Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	BHART-ANJIN S BHULLAR	
Relationship of Donee:	NONE	
Amount Given:		\$ 500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	BRITTNEY CALSBEEK	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	KAREN M BENYO	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	KRISTA PARSLEY COQUILA	
Relationship of Donee:	NONE	

Statement 4 (continued)
Form 990, Part II, Line 22b
Other Grants and Allocations

Cash Grants and Allocations

Amount Given:		\$ 500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	JOHN PETERSON	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	HEATHER CUNNINGHAM	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	MATTHEW L NIEMILLER	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	RACHEL M GOODMAN	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GAIGE FUND AWARD	
Donee's Name:	CASEY A GILMAN	
Relationship of Donee:	NONE	
Amount Given:		500.
Class of Activity:	GIBBS FUND AWARD	
Donee's Name:	GLORIA ARRATIA	
Relationship of Donee:	NONE	
Amount Given:		5,000.
Class of Activity:	RANEY FUND AWARD	
Donee's Name:	YVETTE R ALVA	
Relationship of Donee:	NONE	
Amount Given:		1,000.
Class of Activity:	RANEY FUND AWARD	
Donee's Name:	MOLLIE F CASHNER	
Relationship of Donee:	NONE	
Amount Given:		1,000.
Class of Activity:	RANEY FUND AWARDS	
Donee's Name:	JAYNE M GARDINER	
Relationship of Donee:	NONE	
Amount Given:		1,000.
Class of Activity:	RANEY FUND AWARD	
Donee's Name:	DONOVAN P GERMAN	
Relationship of Donee:	NONE	
Amount Given:		1,000.
Class of Activity:	RANEY FUND AWARD	
Donee's Name:	STUART WILLIS	

Statement 4 (continued)
Form 990, Part II, Line 22b
Other Grants and Allocations

Cash Grants and Allocations

Relationship of Donee:	NONE	
Amount Given:		\$ 1,000.
Class of Activity:	STORER FUND AWARD	
Donee's Name:	CHRISTA WOODLEY	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STORER FUND AWARD	
Donee's Name:	KAREN KLEMNEC	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STOYE FUND AWARD	
Donee's Name:	ANGELA M PICCO	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STOYE FUND AWARD	
Donee's Name:	JAYNE M GARDINER	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STOYE FUND AWARD	
Donee's Name:	JEANNE ROBERTSON	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STOYE FUND AWARD	
Donee's Name:	MICHAEL TOBLER	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	STOYE AWARD	
Donee's Name:	JOHN PETERSON	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	MICHAEL NIEMILLER	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	CHARLES COTTOM	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	AMANDO HAPONSKI	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	

Statement 4 (continued)
Form 990, Part II, Line 22b
Other Grants and Allocations

Cash Grants and Allocations

Donee's Name:	RICHARD HARINGTON	
Relationship of Donee:	NONE	
Amount Given:		\$ 250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JARED B LEE	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	ALYSSA MACDONALD	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	MIKKI MCCOMB	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	WILLIAM T MCCRANEY	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	TRICIA MEREDITH	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	LAURA SCOTT	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	BROOKE STANFORD	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JOSEPH AGUGLIARO	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	HILLIARY HARMS	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	SUSAN HERRICK	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	LUKE MAHLER	

Statement 4 (continued)
Form 990, Part II, Line 22b
Other Grants and Allocations

Cash Grants and Allocations

Amount Given:		\$ 250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	DAVID PIKE	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JEANNE ROBERTSON	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	RALPH SAPORITO	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JENNIFER SHERIDAN	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JOHN WILLSON	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	ANTOINE FOUQUET	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	LARA DOUGLAS	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ASIH STUDENT TRAVEL AWARD	
Donee's Name:	JAMES VAN DYKE	
Relationship of Donee:	NONE	
Amount Given:		250.
Class of Activity:	ENDOWMENT	
Donee's Name:	DR. VERLAG, et al	
Amount Given:		1,500.
Class of Activity:	FITCH AWARD	
Donee's Name:	EDMUND D BRODIE JR	
Amount Given:		1,000.
Total Cash Grants and Allocations \$		24,500.

Federal Statements
AMERICAN SOCIETY OF ICHTHYOLOGISTS
HERPETOLOGISTS

Statement 4 (continued)
Form 990, Part II, Line 22b
Other Grants and Allocations

Noncash Grants and Allocations

Class of Activity:	VARIOUS		
Donee's Name:	MISC PLAQUES		
Fair Market Value:		\$	148.
	Total Noncash Grants and Allocations	\$	148.
	Total Grants and Allocations	\$	<u>24,648.</u>

Statement 5
Form 990, Part II, Line 43
Other Expenses

	(A)	(B)	(C)	(D)
	Total	Program Services	Management & General	Fundraising
ANNUAL MEETING	18,495.	18,495.		
BANK CHARGES	3,220.		3,220.	
BROKERAGE COMMISSIONS	6,965.		6,965.	
BUSINESS MANAGEMENT	37,870.		37,870.	
DUES AND SUBSCRIPTIONS	2,595.	2,595.		
OTHER MANAGEMENT EXP	277.		277.	
PUBLICATION EDITOR	32,000.	32,000.		
SECRETARY'S OFFICE	36,870.		36,870.	
TREASURER'S OFFICE	93.		93.	
WEB SITE	3,552.	3,552.		
Total	\$ 141,937.	\$ 56,642.	\$ 85,295.	\$ 0.

Statement 6
Form 990, Part III
Organization's Primary Exempt Purpose

INCREASE KNOWLEDGE OF FISH, REPTILES, AND AMPHIBIANS.

Statement 7
Form 990, Part IV, Line 58
Other Assets

DEPOSITS.....	\$	5,235.
	Total	\$ <u>5,235.</u>

AMERICAN SOCIETY OF ICHTHYOLOGISTS
 HERPETOLOGISTS

95-6056946

 Statement 8
 Form 990, Part IV-A, Line d(2)
 Other Amounts

NET UNREALIZED LOSSES.....	\$	9,329.
REALIZED TAX GAINS EXCEEDING BOOK GAINS.....		28,909.
	Total \$	<u>38,238.</u>

 Statement 9
 Form 990, Part VII, Line 93
 Program Service Revenue

Program Service Revenue	(A) Busi- ness Code	(B) Unrelated Business Amount	(C) Exclu- sion Code	(D) Excluded Amount	(E) Related or Exempt Function
ANNUAL MEETING				\$	17,544.
COPEIA BACK ISSUES					1,420.
e-COPEIA REVENUE					64,116.
LIFE MEMBERSHIPS					2,345.
MAILING LISTS					2,310.
PAGE CHARGES					7,780.
SPECIAL PUBLICATIONS					2,901.
STUDENT TRAVEL					5,613.
SUBSCRIPTIONS					82,201.
Total		<u>\$ 0.</u>		<u>\$ 0.</u>	<u>\$ 186,230.</u>

 Statement 10
 Form 990, Part VIII
 Relationship of Activities to the Accomplishment of Exempt Purposes

Line # _____ Explanation of Activities

All Lines: 93a, 94, 100, 103b

AMERICAN SOCIETY OF ICHTHYOLOGISTS AND HERPETOLOGISTS WAS INCORPORATED FOR THE PURPOSE OF INCREASING KNOWLEDGE OF ALL KINDS CONCERNING FISHES (ICHTHYOLOGY) AND REPTILES AND AMPHIBIANS (HERPETOLOGY) THROUGH THE PUBLICATION OF THE QUARTERLY JOURNAL "COPEIA", PUBLICATION OF BOOKS ON ICHTHYOLOGY AND HERPETOLOGY, AND THE RECOGNITION AND SUPPORT OF STUDENT AND PROFESSIONAL ACHIEVEMENTS IN THESE FIELDS.

 Statement 11
 Schedule A, Part III, Line 3a
 Qualifications of Recipients Receiving Grants or Loans

THE RANEY AWARD AND THE GAIGE AWARD ARE GIVEN TO HELP FUND OUTSTANDING STUDENT RESEARCH PROJECTS IN ICHTHYOLOGY AND HERPETOLOGY, RESPECTIVELY. THE TOTAL DOLLAR VALUE FOR THE AWARDS IS DETERMINED BY THE ENDOWMENT AND FINANCE COMMITTEE WITH THE GOAL OF HAVING CONSISTENT AWARD AMOUNTS OF LESS THAN 4% OF THE AWARD FUND'S ENDOWED PRINCIPAL. DETERMINATION OF AWARD RECIPIENTS IS MADE BY A REVIEW COMMITTEE OF ICHTHYOLOGISTS AND HERPETOLOGISTS FROM INSTITUTIONS ACROSS NORTH AMERICA.

THE STOYE AWARDS ARE GIVEN FOR THE OUTSTANDING STUDENT PAPER PRESENTATIONS IN UP

Statement 11 (continued)
Schedule A, Part III, Line 3a
Qualifications of Recipients Receiving Grants or Loans

TO SIX DIFFERENT STOYE AWARD CATEGORIES (ORAL) MADE AT THE ANNUAL MEETING. THE RECIPIENTS OF THESE AWARDS ARE DETERMINED BY A PANEL OF JUDGES WHO ATTEND THE ORAL PRESENTATIONS OF THE PAPERS BY THE STUDENTS ENTERING INTO THE COMPETITION. AS WITH THE RANEY AND GAIGE AWARDS, THE DOLLAR VALUE IS DETERMINED SIMILIARLY. THE STORER AWARDS ARE GIVEN FOR OUTSTANDING POSTERS AND PRESENTATIONS IN ICHTHYOLOGY AND HERPETOLOGY WHICH ARE PRESENTED AT THE ANNUAL MEETING. THE DETERMINATION OF THE RECIPIENTS AND DOLLAR VALUE IS MADE AS DESCRIBED ABOVE FOR THE STOYE AWARDS. THE GIBBS AWARD IS AWARDED FOR AN OUTSTANDING BODY OF PUBLISHED WORK IN SYSTEMATIC ICHTHYOLOGY AND BASED ON THE DECISION OF A COMMITTEE CHARGED WITH THAT RESPONSIBILITY. THE CASH AWARD IS DETERMINED SIMILIARLY TO THE ABOVE AWARDS. THE FITCH AWARD IS AWARDED ANNUALLY FOR EXCELLENCE IN HERPETOLOGY AND BASED ON THE DECISION OF A COMMITTEE CHARGED WITH THAT RESPONSIBILITY. THE CASH AWARD IS DETERMINED SIMILIARLY TO THE ABOVE AWARDS. THE STUDENT TRAVEL AWARD WINNERS ARE CHOSEN RANDOMLY BY A MEMBER OF THE COMMITTEE ON GRADUATE STUDENT PARTICIPATION FROM THOSE STUDENTS MAKING PRESENTATIONS AT THE ANNUAL MEETING WHO APPLY, WITH HALF THE AWARDS GOING TO ICHTHYOLOGY STUDENTS AND HALF THE AWARDS TO HERPETOLOGY STUDENTS. THE TOTAL CASH AWARDED IS BASED ON THE FUNDS AVAILABLE IN THE STUDENT TRAVEL AWARD FUND.

Statement 12
Schedule A, Part IV-A, Line 22
Other Income

Description	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
MISCELLANEOUS	\$ 1,717.	\$ 2,863.	\$ 5,230.	\$ 3,831.	\$ 13,641.
Total	<u>\$ 1,717.</u>	<u>\$ 2,863.</u>	<u>\$ 5,230.</u>	<u>\$ 3,831.</u>	<u>\$ 13,641.</u>

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Burr, M.B.	McDiarmid, R.W.	Gregory, P.T.	Ferraris, C.J.
Cannatella, D.C.	Page, L.M.	Mayden, R.L.	Grant, T.
Cashner, R.C.	Parenti, L.R.	Mushinsky, H.R.	Haenel, G.J.
Cohen, D.M.	Pietsch, T.W.	Neighbors, M.A.	Kizirian, D.
Collette, B.B.	Pough, F.H.	Parenti, L.R.	Lannoo, M.J.
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Gregory, P.T.	Smith, G.R.		Smith, W.L.
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Wild, E.R.	Wicus, J.J.	Wipemüller, K.	Pramuk, J.B.	Maglia, A.M.
				Walker, H.I.