

Leopold Galliera
Certified Public Accountant
1822 East Cambria Street
Philadelphia, PA 19134
(215) 291 0400

Accountant's Review Report

The American Institute of Chemists, Inc.
315 Chestnut Street, 4th Floor
Philadelphia, PA 19106

I have reviewed the accompanying statement of financial position of the American Institute of Chemists, Inc. (a nonprofit corporation) as of December 31, 2005, and the related statements of activities and cash flows for the year then ended, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of the American Institute of Chemists, Inc.

A review consists principally of inquiries of organizational personnel and analytical procedures applied to financial data. It is substantially less in scope than an audit in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, I do not express such an opinion.

Based on my review, I am not aware of any material modifications that should be made to the accompanying financial statements in order to be in conformity with generally accepted accounting principles.



June 16, 2006

The American Institute of Chemists, Inc.
Statement of Financial Position
See Notes to Financial Statements
December 31, 2005

Assets

Cash in Banks	\$ 11,237
Note Receivable – David Shamer	19,605
Total Assets	<u>\$ 30,842</u>

Liabilities

Line of Credit	\$ 10,061
Deferred Revenues	37,609

Total Liabilities **\$ 47,670**

Net (Deficit)

Unrestricted 16,828

Total Net (Deficit) (16,828)

Total Liabilities and Net (Deficit) **\$ 30,842**

See Accompanying Accountant's Review Report

The American Institute of Chemists, Inc.
Statement of Activities
See Notes to Financial Statements
For the Year Ended December 31, 2005

**Unrestricted Net Assets, Revenue, and
Other Support**

Subscriptions	\$ 681
Contributions	4,395
Dues	62,326
Interest Income	8
Royalties Income	2,942
Professional Activities	50
Student Award Fees	4,997

Total Revenues and Other Support \$ 75,399

Expenses:

Administrative Expenses

Interest Expense	\$ 954
Management Fees Expense	38,882
Office Supplies Expense	2,136
Rent Expense	6,622
Travel Expense	2,301
Telephone Expense	728
Casualty Loss Expense	4,500
Accounting & Legal Expense	3,737
Insurance Expense	450
Election Expense	971
Bad Debt Expense	426

Total Administrative Expenses \$ 61,707

Program Expenses

Rent Expense	\$ 6,623
Credit Card Fees & Bank Charges	1,237
Printing & Mailing Expense	2,375
General Meetings Expense	6,640

Total Program Expenses \$ 16,875

The American Institute of Chemists, Inc.
Statement of Activities (Page 2 of 2)
See Notes To Financial Statements
For the Year Ended December 31, 2005

Total Expenses	<u>\$ 78,582</u>
Decrease in Unrestricted Net Assets	3,183
Net (Deficit), at beginning of year	21,620
Net (Deficit) at end of year.	<u>\$ 24,803</u>

See Accompanying Accountant's Review Report

The American Institute of Chemists, Inc.
Statement of Cash Flows
See Notes to Financial Statements
For the Year Ended December 31, 2005

Cash Flows from Operating Activities

Change in Net (Deficit) \$ (3,183)

Adjustments

Increase (Decrease) in

Accounts Receivable \$ 150
Accounts Payable & Accrued Expenses (20,078)
Institution Dues (294)
Deferred Dues 30,345

Total Adjustments \$ 10,123

Net Cash Provided by Operating Activities \$ 6,940

Cash Flows from Financing Activities

Net Repayments on Line of Credit Borrowings (7,756)

Net Decrease in Cash \$ 861

Cash and Cash Equivalents, at Beginning of Year \$ 12,053

Cash and Cash Equivalents, at End of Year \$ 11,237

See Accompanying Accountant's Review Report

The American Institute of Chemists, Inc.
Notes to Financial Statements
For the Year Ended December 31, 2005

1. Summary of Significant Accounting Policies – Nature of Activities

The American Institute of Chemists, Inc. (AIC) is a not-for-profit corporation whose objectives are to advance the chemical professions in the United States of American and other countries; to promote and protect the public welfare by establishing high professional standards of practice for these professions; and to promote the professional, social, and/or economic interests of its members for the benefit of society at large. AIC derives revenues primarily from membership dues, contributions and publication sales and advertising.

Basis of Accounting

The Financial Statements of AIC have been prepared on the accrual basis of accounting and, accordingly, reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

Financial Statement presentation follows the recommendations of the Financial Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117, Financial Statements for Not-for-Profit Organizations. Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Membership Dues and Subscription Revenues

Membership dues and subscription revenues are recognized as revenue in the period during which membership benefits are to be provided. Dues and subscription revenues received applicable to future membership periods are included as a liability in deferred revenue at the end of each calendar year. This deferred revenue is then allocated to the appropriate membership period. At December 31, 2005, deferred revenue aggregated \$ 37,609 and is applicable to calendar year 2006.

By agreement, AIC collects dues on behalf of its local institutes (See Note 4). These collections are recognized as current liabilities as received and periodically are paid to the appropriate local institute after presentation of required annual reporting. Dues not claimed by local institutes within a prescribed time period, established by AIC's Board of Directors, revert to AIC.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

Cash and Cash Equivalents

For purposes of the Statement of Cash Flows, the Organization considers all unrestricted highly liquid investments with an initial maturity of twelve months or less to be cash equivalents.

Contributions

The Organization accounts for contributions in accordance with the recommendations of the Financial Accounting Standards Board SFAS No. 116, Accounting for Contributions Received and Contributions Made. In accordance with SFAS No. 116, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence of any donor restrictions.

Donor-restricted support is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. When a donor's restrictions are met in the same reporting period as the receipt of the contribution, such contributions are reported as unrestricted support.

Functional Allocation of Expenses

The costs of providing the various programs and activities have been summarized on a functional basis in the Statement of Activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income Tax Status

The Organization is exempt from federal income taxes, except on the earnings from unrelated business activities, under Internal Revenue Code Section 501 (c) (6). Directory and magazine advertising are considered income that may be subject to corporate income tax if revenue from these activities exceeds expenses from the activities. For the period ending December 31, 2005, AIC did not have any revenues or expenses from these activities.

2. Note Receivable – David Shamer

During calendar year 2004, AIC incurred a theft casualty loss of \$ 35,961. \$ 19,605 of this sum will be repaid to AIC as restitution as directed by the Court of Common Pleas in the City of Philadelphia.

During calendar year 2005, AIC made a complete restitution payment of \$ 4,500 to United Check Cashing Agency to avoid litigation related to this casualty loss.

3. Bank Line of Credit

The Organization has a \$ 40,000 revolving line of credit, of which \$ 10,061 was outstanding as December 31, 2005. Bank advances of the credit line are payable on demand and carry an interest rate of 1% over prime. The credit line is unsecured.

4. Contractual Commitments

Effective December 1, 2002, AIC has contracted with The Chemical Heritage Foundation under which the Foundation will provide AIC with office and meeting space at 315 Chestnut Street, Philadelphia, Pennsylvania. During calendar year 2005, AIC paid the Foundation \$ 12,195 to lease this space. Either party may terminate this rental arrangement, without cause, by giving the other party 30 days notice.

5. Local Institutes Related Party Transactions

The Board of Directors of AIC is empowered to recognize one organization of at least fifteen members of AIC in good standing in a discreet geographical area as a constituent local institute and a division of AIC.

The bylaws of AIC state that the local institutes have full autonomy in all matters of concern to their particular geographical areas, but may call upon AIC for advice, counsel, and assistance. All policies and procedures of local institutes shall conform to the bylaws of AIC.

AIC collects and subsequently remits local dues back to the local institutes upon that local institutes completion and filing of required financial and operating reports. A local institute, that fails to submit the required reports for a three-year period, is subject to being declared "inactive" by AIC. This inactive status may be cleared within a two-year period by notifying the National Office, electing officers and filing an annual report for the most recent year. After the two-year period or for other cause, AIC may dissolve a local institute at which time any monies held on behalf of the local institute will revert to AIC after first being applied to any obligations of the local institute. For the year ended December 31, 2005, no such monies reverted to AIC.

End of Notes to Financial Statements

COPY

Leopold Galliera
Certified Public Accountant
1822 East Cambria Street
Philadelphia, PA 19134
(215) 291 0400

May 12, 2006

Dr. David Riley
The American Institute of Chemists, Inc.
315 Chestnut Street – 4th Floor
Philadelphia, PA 19106

Dear Dr. Riley:

Please sign and return the enclosed Management Representation Letter to me as soon as possible. I need this Letter to issue the Review Report for 2005.

I have enclosed an Envelope for your convenience.

Sincerely,

Leopold Galliera

The American Institute of Chemists, Inc.
315 Chestnut Street – 4th Floor
Philadelphia, PA 19106

May 12, 2006

Mr. Leopold Galliera CPA
1822 East Cambria Street
Philadelphia, PA 19134
(215) 291 0400

Dear Mr. Galliera:

In connection with your review of the Statement of Financial Position as of December 31, 2005 and the Statement of Activities and Statement of Cash Flows of The American Institute of Chemists, Inc. for the year ended December 31, 2005 for the purpose of expressing limited assurance that there are no material modifications that should be made to the statements in order for them to be in conformity with generally accepted accounting principles, we confirm, to the best of our knowledge and belief, the following representations made to you during your review.

1. The financial statements referred to above present the financial position, results of operations and changes in financial position of The American Institute of Chemists, Inc. in conformity with generally accepted accounting principles. In that connection, we specifically confirm that:
 - a) The Organization's accounting principles and the practices and methods followed in applying them, are as disclosed in the financial statements.
 - b) There have been no changes during calendar year 2005 in the Organization's accounting principles and practices.
 - c) We have no plans or intentions that may materially affect the carrying value of assets, liabilities or fund balance.
 - d) There are no material transactions that have not been properly reflected in the financial statements.
 - e) There are no material losses or potential expenses that have not been properly accrued or disclosed in the financial statements.
 - f) There are no violations or possible violations of laws or regulations whose effects should be considered for disclosure in the financial statements or as a basis for recording a loss contingency, and there are no other material liabilities or gain or loss contingencies that are required to be accrued or disclosed.

- g) The Organization has satisfactory title to all owned assets, and there are no liens or encumbrances on such assets nor has any asset been pledged.
 - h) There are no transfers or designations of fund balance or interfund borrowings that were not properly authorized and approved or uncollectible interfund loans that have not been properly reflected in the financial statements or disclosed by you.
 - i) There are no related party transactions or related amounts receivable or payable that have not been properly disclosed in the financial statements.
 - j) We have complied with all aspects of contractual and grant agreements that would have a material effect on the financial statements in the event of noncompliance.
 - k) No events have occurred subsequent to the Statement of Financial Position date that would require adjustment to, or disclosure in, the financial statements.
 - l) There are no unasserted claims or assessments that our lawyer has advised us are probable of assertion and must be disclosed in accordance with Statement of Financial Accounting Standards No.5.
 - m) We have identified all accounting estimates that could be material to the financial statements, including the bases for allocation of indirect costs by function are reasonable in the circumstances.
 - n) There are no such estimates that may be subject to material change in the near term that have not been properly disclosed in the financial statements. We understand that near term means the period within one year of the date of the financial statements.
2. We have advised you of all actions taken at Management and Board of Directors meetings that may affect the financial statements.
3. We have responded fully to all inquiries made to us by you during your review.

Sincerely,

Dr. David Reilly
President

Return of Organization Exempt From Income Tax

2005

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the 2005 calendar year, or tax year beginning

, and ending

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

The American Institute of Chemists, Inc.

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

315 Chestnut Street

City or town

State or country

ZIP + 4

Philadelphia

PA

19106-2702

D Employer identification number

13-1525325

E Telephone number

215-873-8824

F Accounting method: Cash 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

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? Yes No

(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

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

G Website: ▶ www.theaic.org

J Organization type (check only one) ▶ 501(c) (6) ◀ (Insert no.) 4947(a)(1) or 527

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 75,399

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

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a		4,395	
	b Indirect public support	1b		0	
	c Government contributions (grants)	1c		0	
	d Total (add lines 1a through 1c) (cash \$ 4,395 noncash \$ 0)	1d			4,395
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			5,728
	3 Membership dues and assessments	3			62,326
	4 Interest on savings and temporary cash investments	4			8
	5 Dividends and interest from securities	5			0
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			0
7 Other investment income (describe ▶)	7			0	
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	0	8a	0		
	0	8b	0		
	0	8c	0		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			0	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ 0 of contributions reported on line 1a)	9a		0	
	b Less: direct expenses other than fundraising expenses	9b		0	
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			0
10 a Gross sales of inventory, less returns and allowances		10a		0	
	b Less: cost of goods sold	10b		0	
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			0
11 Other revenue (from Part VII, line 103)	11			2,942	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			75,399	
Expenses	13 Program services (from line 44, column (B))	13		16,875	
	14 Management and general (from line 44, column (C))	14		61,707	
	15 Fundraising (from line 44, column (D))	15		0	
	16 Payments to affiliates (attach schedule)	16		0	
	17 Total expenses (add lines 16 and 44, column (A))	17			78,582
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		-3,183	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		-21,620	
	20 Other changes in net assets or fund balances (attach explanation)	20			
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			-24,803

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22	0	0		
23	Specific assistance to individuals (attach schedule)	23	0	0		
24	Benefits paid to or for members (attach schedule)	24	0			
25	Compensation of officers, directors, etc.	25	0			
26	Other salaries and wages	26	0			
27	Pension plan contributions	27	0			
28	Other employee benefits	28	0			
29	Payroll taxes	29	0			
30	Professional fundraising fees	30	0			
31	Accounting fees	31	2,750	2,750		
32	Legal fees	32	987	987		
33	Supplies	33	2,136	2,136		
34	Telephone	34	728	728		
35	Postage and shipping	35	0			
36	Occupancy	36	13,245	6,623	6,622	
37	Equipment rental and maintenance	37	0			
38	Printing and publications	38	0			
39	Travel	39	2,301	2,301		
40	Conferences, conventions, and meetings	40	6,640	6,640		
41	Interest	41	954	954		
42	Depreciation, depletion, etc. (attach schedule)	42	0			
43	Other expenses not covered above (itemize):					
a	See attached statement	43a	48,841	3,612	45,229	0
b	-----	43b	0	0	0	0
c	-----	43c	0	0	0	0
d	-----	43d	0	0	0	0
e	-----	43e	0	0	0	0
f	-----	43f	0	0	0	0
g	-----	43g	0	0	0	0
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	44	78,582	16,875	61,707	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 \$ 0; (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? **Statement One (1)**

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.)

Program Service Expenses

(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a **Statement Two (2)**

(Grants and allocations \$) If this amount includes foreign grants, check here

b

(Grants and allocations \$) If this amount includes foreign grants, check here

c

(Grants and allocations \$) If this amount includes foreign grants, check here

d

(Grants and allocations \$) If this amount includes foreign grants, check here

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here

f Total of Program Service Expenses (should equal line 44, column (B), Program services) **0**

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	10,214	45	8,977	
	46 Savings and temporary cash investments	1,839	46	2,260	
	47 a Accounts receivable	47a 0			
	b Less: allowance for doubtful accounts	47b 0	150	47c 0	
	48 a Pledges receivable	48a 0			
	b Less: allowance for doubtful accounts	48b 0	0	48c 0	
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		19,605	50	19,605
	51 a Other notes and loans receivable (attach schedule)	51a 0			
	b Less: allowance for doubtful accounts	51b 0	0	51c 0	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54	0
	55 a Investments—land, buildings, and equipment: basis	55a 0			
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0	
56 Investments—other (attach schedule)		0	56	0	
57 a Land, buildings, and equipment: basis	57a 0				
b Less: accumulated depreciation (attach schedule)	57b 0	0	57c 0		
58 Other assets (describe _____)		0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58		31,808	59	30,842	
Liabilities	60 Accounts payable and accrued expenses	27,778	60		
	61 Grants payable		61		
	62 Deferred revenue	7,834	62	45,584	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0	
	64 a Tax-exempt bond liabilities (attach schedule)	0	64a	0	
	b Mortgages and other notes payable (attach schedule)	17,816	64b	10,061	
	65 Other liabilities (describe _____)	0	65	0	
66 Total liabilities. Add lines 60 through 65		53,428	66	55,645	
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	-21,620	67	-24,803	
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	-21,620	73	-24,803		
74 Total liabilities and net assets/fund balances. Add lines 66 and 73.	31,808	74	30,842		

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	N/A
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	0	
	Add lines b1 through b4		b	0
c	Subtract line b from line a		c	0
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2	0	
	Add lines d1 and d2		d	0
e	Total revenue (Part I, line 12). Add lines c and d		e	0

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

a	Total expenses and losses per audited financial statements		a	N/A
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	0	
	Add lines b1 through b4		b	0
c	Subtract line b from line a		c	0
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2	0	
	Add lines d1 and d2		d	0
e	Total expenses (Part I, line 17). Add lines c and d		e	0

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 & deferred compensation plans	(E) Expense account and other allowances
Name Dr. David Riley City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title Vice Chairman Hr/WK 5	0	0	0
Name Lawrence Duffy City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title President Hr/WK 5	0	0	0
Name Kenneth Abace City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title President - Elec Hr/WK 0	0	0	0
Name Edmond Malka City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title Treasurer Hr/WK 5	0	0	0
Name David Manuta City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title Secretary Hr/WK 5	0	0	0
Name Martin Apple City Philadelphia Str 315 Chestnut Street ST PA ZIP 19106	Title Chairman Hr/WK 5	0	0	0
Name City Str ST ZIP	Title Hr/WK			
Name City Str ST ZIP	Title Hr/WK			
Name City Str ST ZIP	Title Hr/WK			
Name City Str ST ZIP	Title Hr/WK			

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

Table with 3 columns: Question (75a-d), Yes, No. 75a: Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings. 75b: 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? 75c: Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? 75d: Does the organization have a written conflict of interest policy?

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

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Includes rows for Name, City, Str, ST, ZIP.

Part VI Other Information (See the instructions.)

Table with 3 columns: Question (76-81b), Yes, No. 76: Did the organization engage in any activity not previously reported to the IRS? 77: Were any changes made in the organizing or governing documents but not reported to the IRS? 78a: Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78b: If "Yes," has it filed a tax return on? 79: Was there a liquidation, dissolution, termination, or substantial contraction during the year? 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? 80b: If "Yes," enter the name of the organization and check whether it is exempt or nonexempt. 81a: Enter direct and indirect political expenditures. 81b: Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, organization received a waiver for proxy tax owed for the prior year.		X
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f 0	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> ; section 4912 <input type="checkbox"/> ; section 4955 <input type="checkbox"/>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		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	
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> PA		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b 0	
91 a	The books are in care of <input type="checkbox"/> Name Dr. David Riley Telephone no. <input type="checkbox"/> 215-873-8824 Located at <input type="checkbox"/> 315 Chestnut Street City Philadelphia ST PA ZIP + 4 <input type="checkbox"/> 19106		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="checkbox"/>	Yes	No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <input type="checkbox"/>		X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 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 Subscription Income					681
b Student Award Fees					4,997
c Processing Income					50
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					62,326
95 Interest on savings and temporary cash investments			14	8	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than invento					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b Royalty Income			15	2,942	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		2,950	68,054
105 Total (add line 104, columns (B), (D), and (E))					71,004

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	Statement Three (3)

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
	%		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).

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: David W. Riley Signature of officer Date May 12, 2006
David W. Riley, Vice Chairman of the Board Type or print name and title.

Paid Preparer's Use Only: Preparer's signature Leopold Galliera CPA Date 5/5/2006 Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. W) 26-0500116
 Firm's name (or yours if self-employed), address, and ZIP + 4 Leopold Galliera CPA EIN 26-0500116
1822 E Cambria Street, Philadelphia, PA 19134 Phone no. (215) 291 0400

Line 43 (990) - Other Deductions

48,841

3,612

45,229

0

		(A) Total	(B) Program	(C) Management and general	(D) Fundraising
1	Bank Charges and Credit Card Fees	1,237	1,237		
2	Casualty Loss: Restitution Payment	4,500		4,500	
3	Administrative Support: Temporary Employment	0			
4	Agency Fees	38,882		38,882	
5	Insurance	450		450	
6	Subscription Expense	2,375	2,375		
7	Election Expense	971		971	
8	Bad Debt Expense	426		426	
9		0			
10		0			
11		0			
12		0			
13		0			
14		0			
15		0			
16		0			
17		0			
18		0			
19		0			
20		0			

Line 47 (990) - Accounts receivable

				Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1 Mailing List	1	150	0		
2	2				
3	3				
4	4				
5	5				
6	6				
7	7				
8	8				
9	9				
10	10				
11 Total accounts receivable	11	150	0	0	0

Line 50 (990) - Receivables from officers, directors, trustees and key employees

Borrower's name	Title	Original amount	Balance due beginning of year	Balance due end of year
1 David Shamer			19,605	19,605
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14 Totals		14 0	19,605	19,605

	Date of note	Maturity date	Repayment terms	Interest rate
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

Purpose of loan	Description	FMV of consideration
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		

Line 64b (990) - Mortgages and other notes payable

Lender's name		is a business	Original amount	Balance due beginning of year	Balance due end of year
1	Bank of America Loan	<input type="checkbox"/>	40,000	17,816	10,061
19	Totals	19	40,000	17,816	10,061

Line 22 (Sch A (990/990-EZ)) - Other Income

Description	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
1 Program Service Revenue					0
2 Royalty Income	3,038	5,752	6,398		15,188
3					0
4					0
5					0
6					0
7					0
8					0
9					0
10					0
Total of Other Income	3,038	5,752	6,398	0	15,188

American Institute of Chemists, Inc. 13-1525325
IRS Form 990, Federal Statements One (1) Through Three (3)
Calendar Year 2005

Statement One (1) – Part III – Organization’s Primary Exempt Purpose:

To advance the chemical professions in the United States and other countries; To promote and protect the public welfare by establishing high professional standards of practice for the professions; and To promote the professional, social, and/or economic interests of its members for the benefit of society at large.

Statement Two (2) – Part III, Line A, Statement of Program Service Accomplishments:

The Institute’s printed magazine, “The Chemist” gives a complete account of the Institute’s activities. Copies of the magazine will be furnished upon request.

Details concerning contributions are on hand and are available for inspection at the Institute’s Offices.

Program Service Expenses were \$ 16,875 for calendar year 2005.

Statement Three (3) – Part VIII, Relationship of Activities to the Accomplishment of Exempt Purposes:

These programs serve to keep chemistry professional informed of developments within related fields and provide professional with a vehicle for pursuit of common interests. In addition, chemistry students are able to obtain information that helps them in their pursuit of a career in various chemical related fields.

These programs also promote membership among chemical professionals.

End of Notes to IRS Form 990 for calendar year 2005.

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

2005

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: **The American Institute of Chemists, Inc.** Employer identification number: **13-1525325**

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

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. Schedule A (Form 990 or 990-EZ) 2005

(HTA)

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Contains questions 1 through 4b regarding lobbying activities, property transactions, and grants.

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

- The organization is not a private foundation because it is: (Please check only ONE applicable box.)
5 [] A church, convention of churches, or association of churches.
6 [] A school.
7 [] A hospital or a cooperative hospital service organization.
8 [] A Federal, state, or local government or governmental unit.
9 [] A medical research organization operated in conjunction with a hospital.
10 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit.
11 a [] An organization that normally receives a substantial part of its support from a governmental unit or from the general public.
11 b [] A community trust.
12 [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 charitable, etc., functions...
13 [] An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).

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

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,635	19,855	11,391	23,392	56,273
16 Membership fees received	65,374	84,769	89,201	102,344	341,688
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	30,733	28,713	44,265	39,442	143,153
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	55	125	143	559	882
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	3,038	5,752	6,398	0	15,188
23 Total of lines 15 through 22	100,835	139,214	151,398	165,737	557,184
24 Line 23 minus line 17	70,102	110,501	107,133	126,295	414,031
25 Enter 1% of line 23	1,008	1,392	1,514	1,657	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a 0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts . . . ▶					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c 0
d Add: Amounts from column (e) for lines: 18 <u>0</u> 19 <u>0</u> ▶					26d 0
22 <u>0</u> 26b <u>0</u> ▶					26e 0
e Public support (line 26c minus line 26d total) ▶					26f 0.00%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					
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: (2004) <u>97,742</u> (2003) <u>133,337</u> (2002) <u>144,857</u> (2001) <u>165,178</u>					
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: (2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add: Amounts from column (e) for lines: 15 <u>56,273</u> 16 <u>341,688</u> 17 <u>143,153</u> 20 <u>0</u> 21 <u>0</u> ▶					27c 541,114
d Add: Line 27a total <u>541,114</u> and line 27b total <u>0</u> ▶					27d 541,114
e Public support (line 27c total minus line 27d total) ▶					27e 0
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27f 557,184
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 96.04%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					27h 0.16%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 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.) ----- -----		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? 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 discrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

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

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

Limits on Lobbying Expenditures

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

Table with 3 columns: Line number, Description, (a) Affiliated group totals, (b) To be completed for ALL electing organizations. Rows include lines 36-44 for lobbying expenditures and nontaxable amounts.

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 on page 11 of the instructions.

Table titled 'Lobbying Expenditures During 4-Year Averaging Period' with columns for years 2005, 2004, 2003, 2002, and Total. Rows include lines 45-50 for nontaxable and ceiling amounts.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

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

- a Volunteers
b Paid staff or management (Include compensation in expenses reported on lines 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.)

Table with 3 columns: Yes, No, Amount. Rows correspond to items a-i from the list above.

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

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2005

Name of organization

Employer identification number

The American Institute of Chemists, Inc.

13-1525325

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(6) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

General Rule—

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3 % support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
The American Institute of Chemists, Inc.

Employer identification number
13-1525325

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization
 The American Institute of Chemists, Inc.

Employer identification number
 13-1525325

Part II Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____
____	_____ _____ _____	\$ _____	_____

Name of organization
The American Institute of Chemists, Inc.

Employer identification number
13-1525325

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.)
For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once—see instructions.) ► \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
For. Prov. _____ Country _____			
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
For. Prov. _____ Country _____			
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
For. Prov. _____ Country _____			
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
For. Prov. _____ Country _____			

Line 1 (990) - Public Support and Contributions

	Cash	Non Cash
Line 1a - Direct public support		
1 Contributions	4,395	1
2 Membership dues and assessments (contributions from the public)	2	2
3 Commercial co-venture	3	3
4 Special events contributions (Line 9 - Special Events)	0	4
5 _____	5	5
6 _____	6	6
7 _____	7	7
8 _____	8	8
9 _____	9	9
10 Total	4,395	10 0
Line 1b - Indirect public support	_____	_____
Line 1c - Government contributions (grants)	_____	_____

Filing Instructions

1. Sign Tax Return where indicated
2. Mail by the 15th of May, 2006

Thank you

Charitable Organization Registration Statement – Form BCO – 10

For the Fiscal Year Which Ended : 12 / 31 / 2005

Employer Identification # 13-1525325 Certificate # _____

Check if registering voluntarily. (See note under "Important Information".)

1. Legal name of organization: The American Institute of Chemists, Inc.
 Check if name change. Previous name: _____

2. c/o _____
Street address 315 Chestnut Street - 4th Floor
City Philadelphia State PA Zip Code 19106
County Philadelphia
Phone # 215-873-8229 800 # _____ Fax # 215-925-1954

3. All other names used to solicit contributions: _____
N/A

4. Organizations described in Section 162.7(a) of the Act, check section which describes organization (See footnote #2 of Instructions. Volunteer registrants do not respond.):
162.7(a)(1) 162.7(a)(2) 162.7(a)(3) 162.7(a)(4) Not Applicable

5. List type of organization (e.g. corporation, association, etc.), where established, and date established. See Attached Documents

(Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution, or other organizational instrument, and by-laws.)

6. Date organization first solicited contributions from Pennsylvania residents: 1 / 1 / 2003

7. If organization solicited and received gross national contributions totaling more than \$25,000 during the fiscal year covered by this registration statement or during its current fiscal year, give date contributions first totaled more than \$25,000. / / N/A

8. Is any person compensated or do you intend to compensate any person for soliciting contributions from Pennsylvania? Yes No If "yes", give date person started or will start soliciting contributions from Pennsylvania residents. / / (Do not check "yes" if you only use or intend to only use a professional fund raising counsel.)

See Documents Attached

AMERICAN INSTITUTE OF CHEMISTS
315 CHESTNUT ST
PHILADELPHIA, PA 19106
215-873-9224

07/05/2006

TO THE COMMONWEALTH OF PENNSYLVANIA
ORDER OF

**15.00
\$

Fifteen and 00/100

DOLLARS

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF CHARITABLE ORGANIZATION
207 NORTH OFFICE BUILDING
HARRISBURG, PA 17120
FORM BCO - 10 FOR 12/31/2005

MEMO

⑈008806⑈ ⑆052001633⑆ 002550005730⑈

AMERICAN INSTITUTE OF CHEMISTS

COMMONWEALTH OF PENNSYLVANIA

07/05/2006

8806

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/5/2006	Bill	FOR 12/31/2005	15.00	15.00		15.00
				Check Amount		15.00

BANK OF AMERICA / FORM BCO - 10 FOR 12/31/2005

15.00

AMERICAN INSTITUTE OF CHEMISTS

COMMONWEALTH OF PENNSYLVANIA

07/05/2006

8806

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/5/2006	Bill	FOR 12/31/2005	15.00	15.00		15.00
				Check Amount		15.00

BANK OF AMERICA / FORM BCO - 10 FOR 12/31/2005

15.00



submit copy of IRS exemption letter if not previously submitted.) If "yes", were you required to file an IRS 990 Return and Schedule A for your immediate preceding fiscal year? Yes No . (If "no", attach explanation of why organization is exempt from filing an IRS 990 Return.)

10. Has organization's tax-exempt status ever been denied, revoked, or modified? Yes No (If "yes", attach copy of denial, revocation, or modification.)

11. Purposes and programs for which contributions are, or will be, used:

See Attached Documents

12. Manner in which contributions are solicited (eg. direct mail, telephone, etc.):

By mail to Members only.

13. Is organization registered to solicit contributions in any other state or municipality? Yes No (If "yes", list all states and municipalities. Attach separate sheet if necessary.)

Maryland and Washington D.C.

14. Names, addresses, and telephone numbers of all professional solicitors you use or intend to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates Pennsylvania residents were first solicited, or will be solicited. (Attach separate sheet if necessary.)

N/A

15. Names, addresses, and telephone numbers of all professional fund raising counsels you use or intend to use to provide services with respect to the solicitation of contributions from Pennsylvania residents. For each entry, include beginning and ending dates of all contracts and dates services began, or will begin, with respect to soliciting contributions from Pennsylvania residents. (Attach separate sheet if necessary.)

N/A

16. Attach names, addresses, and telephone numbers of any commercial coventurers under contract with your organization.

N/A

registration covering all of your Pennsylvania affiliates? Yes No Not Applicable
(See note under "Important Information".)

18. Are you a Pennsylvania affiliate of a parent organization which has elected to file a combined registration on your behalf? Yes No (If "yes", give the name and, if available, certificate # of your parent organization. See note under "Important Information".)

(Legal name of parent organization)

(Certificate #)

19. Does your organization share revenue or formal governance with any other nonprofit corporation or unincorporated association? Yes No (If "yes", attach explanation listing name, address, type of organization, and relationship to your organization.)

20. Does any other domestic or foreign organization own a 10% or greater interest in your organization or does your organization own a 10% or greater interest in any other domestic or foreign organization? Yes No (If "yes", attach the following information for each other domestic or foreign organization: name and type of organization, whether organization is for-profit or nonprofit, and relationship of organization to your organization.)

21. Names, addresses, and telephone numbers of all offices, chapters, branches, auxiliaries, affiliates, or other subordinate units located in Pennsylvania: (Attach separate sheet if necessary.)

N/A

22. Names and addresses for: (Attach separate sheet if necessary.)

Individual(s) responsible for the custody and/or distribution of contributions:

Dr. David Riley
315 Chestnut Street
Philadelphia, PA 19106

Individual(s) responsible for solicitation activities:

Dr. David Riley
858 Princeton Courter
Neshanic Station, NJ 08853

Individual(s) responsible for custody of financial records:

Dr. David Riley

23. Attach names and addresses of all officers, directors, trustees, and executive staff officers.

None (Not Applicable)

...business, and residence addresses of related parties. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:

Any other officer, director, trustee, or employee? Yes No

Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? Yes No

Any supplier or vendor providing goods or services? Yes No

25. If you answer "Yes" to any of the following, please attach full written explanations and copies of all relevant documents. Has organization or any of its officers, directors, employees, or fundraisers:

A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or are such proceedings pending in this or any other jurisdiction? Yes No

B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency? Yes No

C. Entered into any legally enforceable agreement such as an assurance of voluntary compliance or discontinuance with any District Attorney, Office of Attorney General, or local or state governmental agency? Yes No

I certify that the information provided in this registration, including all statements and documentation, is true and correct. I understand that the falsification of any statement or documentation is subject to criminal penalties for unsworn falsifications pursuant to 18 Pa. C.S. § 4904.

Signature of Chief Fiscal Officer

Date _____

David Riley

Type or Print Name and Title of Chief Fiscal Officer

Signature of Another Authorized Office

Date _____

Type or Print Name and Title of Another Authorized Officer

INSTRUCTIONS

So your registration can be approved, please enclose the following:

- A properly completed and signed BCO-10 registration statement.
- A completed and signed copy of your organization's IRS 990 Return and Schedule A. (An organization which is not required to file an IRS 990 Return must file a BCO-23 Form. An organization which files a 990EZ, 990PF, 990T, or an affiliate whose financial information is reported to the IRS on its parent organization's 990 Return must file a BCO-23 Form in addition to filing a copy of the organization's IRS 990 Return and Schedule A. You may request a BCO-23 Form from the Bureau or print the form from our Web site at: www.dos.state.pa.us/char)
- Internally prepared, compiled, reviewed, or audited financial statements. (See chart below). Compiled financial statements must be prepared by a licensed certified public accountant or licensed public accountant. Reviews and audits must be performed by an independent, licensed public accountant or an independent, licensed certified public accountant.)
- Additional Filings: Copies of IRS exemption letter and organizational documents such as charter, articles of incorporation, and by-laws. (Initial registrants only.)
- Registration fee payable to "Commonwealth of Pennsylvania". (See chart below.) For renewal registrants, please include your Certificate number on your check or money order to expedite the processing of your filing.

Gross Contributions ¹	Type of Financial Statements Required	Fee
Section 162.7(a) Organizations ²	None	\$15
\$25,000 or less	Internally Prepared, Compiled, Reviewed, or Audited	\$15
\$25,001 to less than \$50,000	Internally Prepared, Compiled, Reviewed, or Audited	\$100
\$50,000 to \$100,000	Reviewed or Audited ³	\$100
\$100,001 to less than \$125,000	Reviewed or Audited ³	\$150
\$125,000 to \$500,000	Audited	\$150
\$500,001 and over	Audited	\$250

¹ Gross annual contributions are total national contributions from all sources. They are not just contributions received from Pennsylvania. To determine "gross annual contributions" add lines 1a, 1b, and 9a from your organization's IRS 990 return or the line 6 from your BCO-23 Form if not required to file a 990. If your organization filed a 990 EZ, add lines 1 and 6a and subtract any government grants.

² Section 162.7(a): (1) Persons or organizations which solicit contributions for the relief of a specific individual which turn over all contributions collected without any deductions whatsoever to the specific individual; (2) organizations which only use their own members to solicit other bona fide members of the organization; (3) organizations which solicit no more than \$25,000 per year whose fund-raising activities are carried on solely by permanent employees; and (4) veterans organizations chartered under Federal law, organizations of volunteer firemen, ambulance associations, rescue squad associations and their auxiliaries or affiliates which are not exempt from registration, did not receive contributions in excess of \$100,000, and did not use a professional solicitor.

³ Veterans organizations chartered under Federal law, organizations of volunteer firemen, ambulance associations, rescue squad associations and their auxiliaries or affiliates which are not exempt from registration and are not described under Section 7(a)(4) may file either internally prepared, compiled, reviewed, or audited financial statements.

Filing Instructions

COPY

Dr. Riley:

1. Please sign where indicated and mail with a check for \$ 15 payable to the Commonwealth of Pennsylvania.
2. Call me if you have any questions.
3. A copy is enclosed for your records.

Thank you

Leopold Galliera
6/16/2006

(215) 291 0400