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SCANNEU APR 05

Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treat

benefit trust or private foundation) Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service 2009, and ending December 31,2009 For the 2009 catendar year, or tax year beginning I while ry C Name of organization London demy D Employer identification number B Check if applicable Doing Business As 02 : 0496761 Address change tabel or print or Number and street (or P O box if mail is not delivered to street address) Telephone number Room/suite Name change type. Box 216 Initial return City or town, state or country, and ZIP ☐ Terminated Instruc NH ondonduns 03053 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for affiliates? Yes Application pending H(b) Are all affiliates included? ☐Yes ☐ No Tax-exempt status: 501(c) (3)
 (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) www.lyfs.org H(c) Group exemption number ► 6277 Website: ▶ Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ L Year of formation: M State of legal domicile: Summary Part I Briefly describe the organization's mission or most significant activities: Provide AYF Youth football and Cheerlead Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part-VI, line-1a). Activities & 4 Number of independent voting members of the governing body (Pair VI) line 1b NA 5 5 Total number of employees (Part V, line 2a). 6 Total number of volunteers (estimate if necessary) 6 Total number of volunteers (estimate if necessaly 1 MAR 2.5 9 € 7a Total gross unrelated business revenue from Part VIII, column (C), line 7a b Net unrelated business taxable income from Form 999-T-line 34-Prior Year **Current Year** 56123 41849 Contributions and grants (Part VIII, line 1h) 8 Program service revenue (Part VIII, line 2g) . 283 310 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <u>62839</u> 56318 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 118845 9847 9011 6304 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 890 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 04212 101815 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 107862 08119 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 4050 19 Revenue less expenses. Subtract line 18 from line 12 9642 9 0 Beginning of Current Yea End of Year 63,219 3578 20 Total assets (Part X, line 16) . 44713 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge ect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here PRESIDENT Type or print name and title Date Check if Preparer's identifying number Preparer's (see instructions) signature employed ▶ □ Paid Preparer's Firm's name (or yours FIN Use Only rf self-employed), address, and ZIP + 4 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)

Par	Statement of Program Service Accomplishments								
1	Briefly describe the organization's mission:								
2	Did the organization undertake any significant program services during the year which were not listed on								
	the prior Form 990 or 990-EZ?	☐ Yes ☐ No							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program								
		☐ Yes ☐ No							
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	y expenses.							
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount allocations to others, the total expenses, and revenue, if any, for each program service reported.								
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$								
	AYF Football Association Expenses	·							
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)								
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))							
		·							
		·							
		······							
	Other program services. (Describe in Schedule O.)	,, ,							
4e	(Expenses \$ including grants of \$) (Revenue \$)								
70	1 amil bi allimit ani tida aubatinan k								

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

, Form	990 (2009)		Р	age 4
Pai	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	Yes	No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	, ,	, ł	, _
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 1		

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

37

38

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	-	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		-
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a		
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	30		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c 6a		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	ba		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII line 12	1		l
a b	Initiation fees and capital contributions included on Part VIII, line 12	1		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders]		
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)	120		-
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		-

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

Sec	tion A. Governing Body and Management			
-			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5 6		
6	Does the organization have members or stockholders?	-0		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a		
	of the governing body?	7b		
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during			
8	· · · · · · · · · · · · · · · · · · ·			í
2	the year by the following: The governing body?	8a	-	
a b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		<u></u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	120		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b		
	nse to conflicts?			
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		
14	Does the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by			
-	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		L
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			ł
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sac	ction C. Disclosure	IOD		L
-	List the states with which a copy of this Form 990 is required to be filed ▶			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c			
10	available for public inspection. Indicate how you make these available. Check all that apply.	י פנטוני	oi iiy)	
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
.5	policy, and financial statements available to the public.	J. 1110		
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ▶			·

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

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

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

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

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

Check this box if the organization did not co		any c	urre	ent	offic	cer, d	irec	tor, or trustee.		
(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	6 Institutional trustee	Officer	ন Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Christopher Cole 5 Preserve DR Londonderny NH	as reeded							_	_	
Kevin Ryan 9 Saddleback Rd Londondury NH	næded								_	_
hisa Idynes 54 Fieldstone DR Londonderry NH	needed									
Lim hoiselle L'Falcon Londonderry NH	as reeded									-
Paul Hennessey 9 Sutton Place Londondery NH	needed							_		~
13 Red Deek Condonderry NH	needed								<u>-</u>	
Ochbie Pface Thoritane Londondum, NH	as needed									
1650n Jacobs 2 King George DR Londondury NH	as							_	_	<u> </u>
John Cauto Macintosh Londondiny NIT	needed								_	
Wendy Noll-Cole 5 Preserve DR Londonderry NH	needed							-		
Mary Polley-Berte 13 King arthur Dr Londonderry	as reded									-
2 King George DR Londonderry NH	as needed							_	_	
Gany Kicherd 11 Shasta Dr Londonderry NH	needed							_	_	•
Keeth Garside 12 Twin Isle Rd Londondery NH	as reeded							_	_	
Brooke Nadeau 12 Devonshire In Londonderry NH	as reeded							_		

Dours per Vest Ve	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
Pour pier Pour	(A)	T T T T T T T T T T T T T T T T T T T							(D)	(E)	(F)
week	Name and title										Estimated
1 1 1 1 1 1 1 1 1 1			Indivi	Institu	Office	Key e	Highe	Form	from	from related	other
1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization is any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization is any former of services rendered to the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual For any individual listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Name and business address			ecto dua	흏		퍨	byee	e e	organization		from the
1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization is any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization is any former of services rendered to the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual For any individual listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Name and business address		1	1 5	<u>8</u>	i	οy	ğ		(W-2/1099-MISC)		organization and related
1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization is any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization is any former of services rendered to the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual For any individual listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Name and business address			št	뚩	l	") ens				organizations
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Name and business address Description of services Compensation			,							α ποιο αιαπ φτ	
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Total number of independent contractors (including but not limited to those listed above) who received				-				\vdash			
more than \$100,000 in compensation from the organization ▶						i to	those	list	ed above) who	received	

Part	VII	Statement of Revenue					
I				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions)	1a 1b 41599 1c 1d 1e				
	f	All other contributions, gifts, grants, grands and similar amounts not included above. Noncash contributions included in lines 1a-1	1f 250			:	
<u> </u>		Total. Add lines 1a-1f		41849			
Program Service Revenue	2a b c d					-	
Progran	e f a	All other program service revenue Total. Add lines 2a-2f		-			
	3	Investment income (including divident other similar amounts)	dends, interest, and	310			
	b	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	(ii) Personal				
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	is (ii) Other	-	-	-	
Other Revenue	8a b	Gross income from fundraisir events (not including \$	9 91837 b 35711	56126			
	b	Gross income from gaming activities See Part IV, line 19	a b				
	10a b	Gross sales of inventory, les returns and allowances Less: cost of goods sold Net income or (loss) from sales of in	a 10373 b 10381 iventory	92		- <u>-</u>	
		Miscellaneous Revenue	Business Code				
	b			100			
		All other revenue		106			
	12	Total revenue. See instructions.		98477	_		

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	unin (A) but are no	or required to com	piete columns (b),	(C), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22 Schedule 3	6304			· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):	•			
	Management				
	=				
	Legal				·
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		<u> </u>		
g	Other				
12	Advertising and promotion				
13	Office expenses	2044			
14	Information technology				
15	Royalties			· · · · · · · · · · · · · · · · · · ·	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings .		<u> </u>	ļ <u>-</u>	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2856			
<u></u>	Insurance	2830			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				!
	•	201101			
а	Foutball Expenses	39406	 		
b	gheer expenses	34177			
C	Game Vay Expenses	12049		 	
d e	Cheer Expenses Game Day Expenses VE Banquet Expenses	4428			
f	All other expenses Schedule 4	4025			
25	Total functional expenses. Add lines 1 through 24f	108119			
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (A) Beginning of year End of year Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Assets Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D b Less: accumulated depreciation . . . 10b 10c Investments—publicly traded securities Investments—other securities. See Part IV. line 11 Investments—program-related. See Part IV, line 11 <u> 2859</u> Total assets. Add lines 1 through 15 (must equal line 34) . . . Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities Pavables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . Other liabilities. Complete Part X of Schedule D (41) Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . . Retained earnings, endowment, accumulated income, or other funds Total liabilities and net assets/fund balances

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

Form **990** (2009)

Londonderry Panthers EIN# 02-0496761

Schedule 1 - Contributors

Name

Amount

250.00

250.00

Schedule 2 - Special Events Detail

	Gross	Gross	Net
Event Types	Revenue	Expense	Revenue
Annual Fundraiser	20,090.00	4,045.00	16,045.00
Annual Youth Fundraiser	6,665.00	4,100.79	2,564.21
Concession	10,252.90	7,550.30	2,702.60
Gaming	0.00	0.00	0.00
Golf Tournament	8,047.09	4,373.94	3,673.15
Silent Auction	8,854.00	4,669.65	4,184.35
Sporting Events	1,503.00	500.00	1,003.00
Cheer Competition & Clinics	23,916.83	8,534.59	15,382.24
Dances	0.00	0.00	0.00
Pass, Punt n Kick & Clinics	0.00	0.00	0.00
Post Season	6,202.20	151.00	6,051.20
NHIFL	2,545.01	1,450.00	1,095.01
Miscellaneous	3,760.86	334.98	3,425.88
	91,836.89	35,710.25	56,126.64

Schedule 3 - Contributions Paid

Name	Amount
Warm Homes	74.00
Andrea Byrd	50.00
UNH - Bourque Scholarship	500.00
Avon Walk	100.00
Londonderry Gridiron Club	500.00
Deyeso, Alex Scholarship	500.00
Terenzi, Anthony Scholarship	500.00
Zacchilli, Chrfistina Scholarship	1,000.00
Llewellyn, Kristen Scholarship	500.00
Manley, Thomas Scholarship	1,000.00
Yankowskas, Meghan Scholarship	500 00
Londonderry High School	500.00
NHYFSC	480 00
Hannah Lowe Donation Fund	100.00

6,304.00

Schedule 4 - Other Expense

Description		Amount
Bank Fees	•	207.25
Miscellaneous		3,817.42

4,024.67

TRANSFER BALANCE POSTING	TRANSFER WHEN NEW ACCOUNT BILLS
01 20	

PAGE

CURRENT STS STS TRANSFER AMT TO CUS ID/ NAME CUR BALANCE LOC ID/ SERVICE ADDRESS PREPARED 1/07/10, 17 01 20
PROGRAM UT450L
EPD-Manchester NH
FROM CUS ID/ NAME
LOC ID/ SERVICE ADDRESS

0

TOTAL NOT TRANSFERED

00

0 TOTAL AMOUNT

TRANSFERS

* COUNT *

14