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Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

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

- ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
- ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

**2009****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service**A For the 2009 calendar year, or tax year beginning , and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions	<b>C Name of organization</b>		<b>D Employer identification number</b>
		<b>PINE HAVEN BOYS CENTER FOUNDATION</b>		<b>04-3374106</b>
		Number and street (or P.O. box, if mail is not delivered to street address)		Room/suite
		<b>P.O. BOX 162</b>		
City or town, state or country, and ZIP + 4		<b>E Telephone number</b>		
<b>SUNCOOK NH 03275</b>		<b>603-485-7141</b>		
		<b>F Group Exemption Number</b>		

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

**G Accounting method** ☒ Cash ☐ Accrual  
Other (specify) ▶

**I Website:** ▶ **N/A**

**J Tax-exempt status** (check only one) — ☒ 501(c) ( **3** ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**H Check** ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**K Check** ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ** ▶ **\$ 261,654**

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

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	<b>42,909</b>
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	<b>24,649</b>
	5a	Gross amount from sale of assets other than inventory	5a	<b>193,923</b>
	5b	Less cost or other basis and sales expenses	5b	<b>225,058</b>
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	<b>-31,135</b>
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		<b>SEE STMT 2</b>
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
6b	Less direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ <b>SEE STATEMENT 3</b> )	8	<b>173</b>	
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	<b>36,596</b>	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	<b>1,106</b>
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ <b>SEE STATEMENT 4</b> )	16	<b>24,078</b>
	17	<b>Total expenses.</b> Add lines 10 through 16	17	<b>25,184</b>
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<b>11,412</b>
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	<b>793,634</b>
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	<b>805,046</b>

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

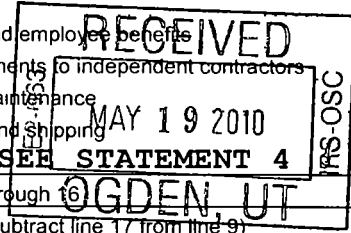
	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	<b>793,634</b>	<b>805,046</b>
23 Land and buildings		
24 Other assets (describe ▶ )		
25 <b>Total assets</b>	<b>793,634</b>	<b>805,046</b>
26 <b>Total liabilities</b> (describe ▶ )	<b>0</b>	<b>0</b>
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	<b>793,634</b>	<b>805,046</b>

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

Form 990-EZ (2009)

DAA

SCANNED JUNE 28 2010



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**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		<b>X</b>
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		<b>X</b>
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		<b>X</b>
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<b>X</b>
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instr <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?		<b>X</b>
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		<b>X</b>
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved <b>38b</b>		
<b>39</b> Section 501(c)(7) organizations. Enter		
<b>a</b> Initiation fees and capital contributions included on line 9 <b>39a</b>		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities <b>39b</b>		
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 <b>40a</b> , section 4912 <b>40a</b> , section 4955 <b>40a</b>		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 <b>40b</b>		<b>X</b>
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <b>40c</b>		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization <b>40d</b>		
<b>e</b> All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T <b>40e</b>		<b>X</b>
<b>41</b> List the states with which a copy of this return is filed. <b>41</b> <b>NONE</b>		
<b>42a</b> The organization's books are in care of <b>42a</b> <b>BRUCE CLOW</b> Telephone no <b>42a</b> <b>603-387-1270</b> <b>18 EXETER PLACE</b> Located at <b>42a</b> <b>LACONIA, NH</b> ZIP + 4 <b>42a</b> <b>03246</b>		
<b>b</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)? <b>42b</b>		<b>X</b>
If "Yes," enter the name of the foreign country <b>42b</b>		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U S ? <b>42c</b>		<b>X</b>
If "Yes," enter the name of the foreign country <b>42c</b>		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here <b>43</b> <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year <b>43</b>		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ <b>44</b>		<b>X</b>
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ <b>45</b>		<b>X</b>

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
<b>46</b> 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		<b>X</b>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<b>X</b>
<b>48</b> Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization?		<b>X</b>
<b>49b</b> If "Yes," was the related organization a section 527 organization?		

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

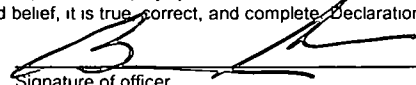
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

**f** Total number of other employees paid over \$100,000 ▶

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

**d** Total number of other independent contractors each receiving over \$100,000 ▶

<b>Sign Here</b>	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.			
	 Signature of officer <b>BRUCE CLOW, TREASURER</b> Type or print name and title		Date <b>5/11/10</b>	
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self-employed)	<b>05/04/10</b>		<b>P00021062</b>
	address, and ZIP + 4	<b>PLODZIK &amp; SANDERSON PROFESSIONAL ASSN.</b> <b>193 NORTH MAIN STREET</b> <b>CONCORD, NH 03301</b>	EIN	<b>02-0403669</b>
May the IRS discuss this return with the preparer shown above? See instructions				Phone no <b>603-225-6996</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**SCHEDULE A**  
(Form 990 or 990-EZ)**Public Charity Status and Public Support**

OMB No 1545-0047

**2009**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

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

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

Name of the organization

**PINE HAVEN BOYS CENTER FOUNDATION**

Employer identification number

**04-3374106****Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.**

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I      b ☐ Type II      c ☒ Type III—Functionally integrated      d ☐ Type III—Other
- e ☒ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).**
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		<input checked="" type="checkbox"/>
11g(ii)		<input checked="" type="checkbox"/>
11g(iii)		<input checked="" type="checkbox"/>

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>PINE HAVEN BOYS CENTER</b>	<b>02-0301883</b>	<b>2</b>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<b>16,346</b>
<b>Total</b>									<b>16,346</b>

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

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

**Section C. Computation of Public Support Percentage**

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <span style="float: right;">► <input type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

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

**Section D. Computation of Investment Income Percentage**

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

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

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

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

**Part IV**

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

## Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -  
Securities

Description		How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
200	SHS EBAY INC DONATION			VARIOUS	1/13/09	\$ 2,905	\$ 3,091	\$	-186
40	SHS PROCTER & GAMBLE CO DONATION			VARIOUS	1/13/09	2,406	1,085		1,321
265	SHS BANK AMER CORP DONATION			VARIOUS	2/10/09	1,276	6,518		-5,242
70	SHS UNITED PARCEL SERVICE CL B DONATION			VARIOUS	3/11/09	2,721	4,691		-1,970
185	SHS WESTERN UN CO DONATION			VARIOUS	3/11/09	1,901	4,709		-2,808
20	SHS SEMPRA ENERGY COMMON DONATION			VARIOUS	3/18/09	811	488		323
20,000	FEDERAL HME LN BK DONATION			VARIOUS	3/26/09	20,000	20,318		-318
120	SHS YUM BRANDS INC DONATION			VARIOUS	3/27/09	3,383	4,631		-1,248
20	SHS YUM BRANDS INC DONATION			VARIOUS	3/30/09	566	752		-186
34	SHS MOHAWK INDS INC DONATION			VARIOUS	3/30/09	922	2,319		-1,397
16	SHS MOHAWK INDS INC DONATION			VARIOUS	3/30/09	485	1,091		-606
20,000	US TREASURY NOTE DONATION			VARIOUS	4/30/09	19,874	19,874		
20	SHS RESEARCH IN MOTION LIMITED DONATION			VARIOUS	5/06/09	1,440	720		720
25	SHS RENAISSANCE RE HLDGS LTD DONATION			VARIOUS	5/22/09	1,143	1,298		-155
70	SHS RENAISSANCE RE HLDGS LTD DONATION			VARIOUS	5/22/09	3,161	3,322		-161
120	SHS IMS HEALTH INC DONATION			VARIOUS	6/26/09	1,478	2,467		-989
30	SHS IMS HEALTH INC DONATION			VARIOUS	6/26/09	2,093	1,081		1,012

## Federal Statements

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -  
Securities (continued)**

Description		Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
How Received	Whom Sold						
85 SHS SEMPRA ENERGY COMMON DONATION		VARIOUS	7/10/09	\$ 4,097	\$ 2,074	\$	2,023
170 SHS WALGREEN CO DONATION		VARIOUS	7/10/09	4,947	5,845		-898
1,195 SHS KEELEY SMALL CAP VALUE DONATION		VARIOUS	7/20/09	19,670	28,788		-9,118
14,466 SHS BARON GROWTH FUND DONATION		VARIOUS	8/28/09	547	506		41
203,954 SHS FIDELITY ADV EMERG MKT DONATION		VARIOUS	8/28/09	3,663	2,774		889
282,805 SHS MFS RESEARCH INT'L FD DONATION		VARIOUS	8/28/09	3,824	5,656		-1,832
95,255 SHS VANGUARD MID-CAP INDEX DONATION		VARIOUS	8/28/09	1,405	1,681		-276
10 SHS ACE LTD DONATION		VARIOUS	8/31/09	509	429		80
10 SHS TRANSOCEAN LTD ZUG NAMEN DONATION		VARIOUS	8/31/09	764	769		-5
10 SHS ABERCROMB & FITCH CO CL A DONATION		VARIOUS	8/31/09	334	250		84
10 SHS AMERICAN EXPRESS CO DONATION		VARIOUS	8/31/09	329	461		-132
10 SHS AUTODESK INC DONATION		VARIOUS	8/31/09	240	193		47
60 SHS CISCO SYSTEMS INC DONATION		VARIOUS	8/31/09	1,312	1,535		-223
20 SHS CLOROX CO DONATION		VARIOUS	8/31/09	1,181	1,154		27
90 SHS COGNIZANT TECH SOLUTIONS DONATION		VARIOUS	8/31/09	3,143	3,089		54
20 SHS DIAGEO PLC ADR DONATION		VARIOUS	8/31/09	1,283	1,470		-187
10 SHS EXELON CORP DONATION		VARIOUS	8/31/09	505	480		25

## Federal Statements

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -  
Securities (continued)**

Description		Date	Date	Sale	Cost &	Depreciation	Gain /
How	Whom	Acquired	Sold	Price	Expense		Loss
Received	Sold						
40 SHS EXXON MOBIL CORP DONATION		VARIOUS	8/31/09	\$ 2,850	\$ 1,213	\$	1,637
10 SHS HEWLETT PACKARD CO DONATION		VARIOUS	8/31/09	444	373		71
100 SHS ISHARES COHEN & STEERS DONATION		VARIOUS	8/31/09	4,515	8,106		-3,591
20 SHS JOHNSON & JOHNSON CO DONATION		VARIOUS	8/31/09	1,211	945		266
10 SHS PAYCHEX INC DONATION		VARIOUS	8/31/09	282	347		-65
10 SHS PEPSICO INCORPORATED DONATION		VARIOUS	8/31/09	578	652		-74
20 SHS PROCTER & GAMBLE CO DONATION		VARIOUS	8/31/09	1,066	1,038		28
10 SHS RESEARCH IN MOTION LIMITED DONATION		VARIOUS	8/31/09	745	360		385
10 SHS SIGMA-ALDRICH CORP DONATION		VARIOUS	8/31/09	509	480		29
10 SHS SOUTHERN CO DONATION		VARIOUS	8/31/09	316	398		-82
20 SHS STATE STREET CORP DONATION		VARIOUS	8/31/09	1,065	894		171
30 SHS TEXAS INSTRUMENTS DONATION		VARIOUS	8/31/09	730	924		-194
10 SHS 3M CO DONATION		VARIOUS	8/31/09	713	649		64
10 SHS US BANCORP DEL NEW DONATION		VARIOUS	8/31/09	220	333		-113
70 SHS UNITED TECHNOLOGIES DONATION		VARIOUS	8/31/09	4,168	2,556		1,612
10 SHS WELLS FARGO & CO NEW DONATION		VARIOUS	8/31/09	274	260		14
20 SHS YUM BRANDS INC DONATION		VARIOUS	8/31/09	697	752		-55

## Federal Statements

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -  
Securities (continued)**

Description		How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
25,000 SBC COMMUNICATIONS DONATION				VARIOUS	9/15/09	\$ 24,355	\$ 24,355	\$	
955 SHS POWERSHARES DB CMDTY IDX DONATION				VARIOUS	9/25/09	21,213	29,570		-8,357
95 SHS AMGEN INC DONATION				VARIOUS	11/05/09	4,987	5,727		-740
40 SHS RESEARCH IN MOTION LIMITED DONATION				VARIOUS	11/05/09	2,183	1,693		490
130 SHS XTO ENERGY INC DONATION				VARIOUS	12/21/09	6,160	7,824		-1,664
TOTAL						\$ 193,599	\$ 225,058	\$ 0	\$ -31,459

**Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Other**

Description		How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
CAPITAL GAIN DISTRIBUTIONS						\$ 324	\$		324
TOTAL						\$ 324	\$ 0	\$ 0	\$ 324

**Federal Statements**

FYE: 12/31/2009

**Statement 3 - Form 990-EZ, Part I, Line 8 - Other Revenue**

<u>Description</u>	<u>Amount</u>
OTHER INCOME	\$ 173
TOTAL	\$ 173

**Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses**

<u>Description</u>	<u>Amount</u>
EXPENSES	\$
PROGRAM SERVICES	16,346
NH FILING FEE	75
INVESTMENT MANAGEMENT FEE	7,657
TOTAL	\$ 24,078

**Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose**

**Description**

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THE PRIMARY PURPOSE OF THE PINE HAVEN BOYS CENTER FOUNDATION IS TO HOLD, RAISE, MANAGE, INVEST, AND DISTRIBUTE FUNDS, AND TO PROVIDE OTHER SUPPORT FOR THE BENEFIT OF, TO PERFORM THE FUNCTIONS OF, OR TO CARRY OUT THE PURPOSE OF THE PINE HAVEN BOYS CENTER, A NEW HAMPSHIRE VOLUNTARY CORPORATION ORGANIZED UNDER SECTIONS 501(C) AND 509(A)(2) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED.