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Department of the Treasury Internal Revenue Service

### **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)

OMB No 1545-0047

Inspection

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

Open to Public

<u> </u>	For the	2009 Caleridar year, or tax year beginning and	ending	<u>.                                    </u>	
В	Check if applicable	Please C Name of organization		D Employer identific	cation number
_	Addres	USE IRS   label or NTA CUITA FIRCU C CAMP ACCOCTATION			
<u> </u>	Name	['		23_7	225944
늗	change  Initial  return	Doing Business As  See Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
F	Termin	Chantia	11001123uite	•	889-7990
F	ated Amend		L	G Gross receipts \$	183,736.
F	lreturn Application			H(a) Is this a group re	
_	pendin			for affiliates?	Yes X No
		227 HARRIS RD, NASHUA, NH 03062		<b>Н(ь)</b> Are all affiliates incl	luded? Yes No
1	Tax-exe	empt status: X 501(c) (7 ) ◀ (insert no.) 4947(a)(1) or 527		1	list. (see instructions)
		e: ► WWW.NFGA.ORG		H(c) Group exemption	n number 🕨
K	Form of	organization: Corporation Trust X Association Other	L Year	of formation: 1932 M	State of legal domicile: NH
P	art I	Summary			<u> </u>
ø	1 1	Briefly describe the organization's mission or most significant activities ALL			
Activities & Governance	:	ACCOMPLISH THE GOALS AND PURPOSES ESTABL	ISHED	IN THE ORGAL	NIZATION'S
ern	2	Check this box   if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets
ò	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	7
ಷ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	
ties	5	Total number of employees (Part V, line 2a)		5	<u>0</u> 10
Ę	6	Total number of volunteers (estimate if necessary)		6	4,018.
Ą	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		7a 7b	3,018.
_	Ь	Net unrelated business taxable income from \$6071.01634	· · · · ·	Prior Year	Current Year
_	8	Contributions and grants (Part VIII line 1h)		85,307.	95,878.
nue	9	Dragger and the residence (Bort VI) Place and INI 0 9 7010 101		62,012.	83,840.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	•	4,431.	4,018.
ď	11	Other revenue (Part VIII, column (A), lines 5-80-86, 99, 10c, and 11e)			
	12	Total revenue - add lines 8 through 11 (pustional PartA/III, column (A), line 12)		151,750.	183,736.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
		Benefits paid to or for members (Part IX, column (A), line 4)			
S	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
Ď	Ь	Total fundraising expenses (Part IX, column (D), line 25)			<del></del>
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		106,758.	117,354.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		106,758.	117,354.
	19	Revenue less expenses Subtract line 18 from line 12		44,992.	66,382.
Net Assets or	3		Be	ginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)	-	653,259.	727,380.
let /	21	Total liabilities (Part X, line 26)		653,259.	727,380.
	<u>22</u> art Ⅱ	Net assets or fund balances Subtract line 21 from line 20 Signature Block		055,455.	121,300.
Ŀ	<u> </u>		nd statements,	and to the best of my knowledg	ge and belief, it is true, correct,
		Under penalties of perury declars that I have examined this return, including accompanying schedules a and complete Declaration of preparer other than officer) is based on all information of which preparer has	any knowledge		/
Sig	מנ	N/Yan		1 5/28/	2010
He		Signature of office		Date /	
		MARTY HARMAN, TREASURER			
_		Type or print name and title			
Pa	id	Preparer's Cherles P. Ondorson, CPA Date 05/1	sei	f (see ins	er's identifying number structions)
_	parer's		2/10 em	ployed 🕨 🔲	
	e Only	Firm's name (or yours if MEDAGLIA & CO, INC CPA'S		EIN ▶	
	<b>-</b>	self-employed), address, and 26 EAST PEARL STREET			00 000 4411
_		ZIP+4 NASHUA, NH 03060		Phone no. ► 6	03-889-4411
_		RS discuss this return with the preparer shown above? (see instructions)	onorets != =	tructions	X Yes No Form <b>990</b> (2009)
932	001 02-0	4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the s	eparate ins	u uctions.	FUITH 330 (20 <u>0</u> 9)

Form **990** (2009)

			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_		_ X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4_		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			1
	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		i	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
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		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11_	X	
•	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		ĺ	
•	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	ļ	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		<u> </u>	<del></del>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13	<del>                                     </del>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4-		v
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		v
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	<del>  ''</del>		+* <u>*</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		x
10	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		<del></del>
19	complete Schedule G, Part III	19		<u>x</u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	The state of the s		990	(2009)

Form 990 (2009)

NASHUA FISH & GAME ASSOCIATION

Part IV Checklist of Required Schedules (continued)

	- Chapter of the defined contained (contained)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			37
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_	<u> </u>	<u>_X</u> _
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			v
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			į
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	240		Х
	Schedule K. If "No", go to line 25	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	any tax-exempt bonds?	24c		
	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	OE -		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	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	OFF	1	
	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			v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	00-		v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	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	000		X
~~	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 22	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	20		x
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		X
	If "Yes," complete Schedule N, Part I	31	<del>                                     </del>	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
~~	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		v
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax-exempt or taxable entity?	24		X
05	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)?	0.5		v
~~	If "Yes," complete Schedule R, Part V, line 2	35	<del> </del>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	200		
	If "Yes," complete Schedule R, Part V, line 2	_36	<del> </del>	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-		•
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	x	
	Note. All Form 990 filers are required to complete Schedule O	38 Form	990	3000)
		rorm	33U (	<sub>(</sub> 2009)

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 1a U.S Information Returns Enter -0- if not applicable 0 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <u>1c</u> 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return b 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) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За X 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 X financial account in a foreign country (such as a bank account, securities account, or other financial account)? <u>4a</u> 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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 6a any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7c to file Form 8282? 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 7е benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a a initiation fees and capital contributions included on Part VIII, line 12 260 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Page 6

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	1a			7				
b	Enter the number of voting members that are independent	1b			7				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	n any of	her					
	officer, director, trustee, or key employee?				2		<u>X</u>		
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ect supe	ervision					
	of officers, directors or trustees, or key employees to a management company or other person?				3		X		
4	Did the organization make any significant changes to its organizational documents since the prior For	rm 99	90 was	filed?	4		<u> </u>		
5	Did the organization become aware during the year of a material diversion of the organization's assets	s?			5		X		
6	Does the organization have members or stockholders?				6		<u>X</u>		
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mber	rs of the	)			<u>x</u> _		
	governing body?								
b	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	durın	g the y	ear					
	by the following:								
а	The governing body?				8a	X			
b	Each committee with authority to act on behalf of the governing body?				8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	ue Cod	e. <i>)</i>		r 1			
					_	Yes	No		
	Does the organization have local chapters, branches, or affiliates?				10a		X		
b	If "Yes," does the organization have written policies and procedures governing the activities of such of	chap	ters, af	filiates,					
	and branches to ensure their operations are consistent with those of the organization?				10b				
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fil	ıng tl	he form	?	11	X			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				12a	x			
	Does the organization have a written conflict of interest policy? If "No," go to line 13								
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld gı	ve rise						
	to conflicts?				12b	X			
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes,	" descri	be					
	ın Schedule O how this is done				12c	X			
13	Does the organization have a written whistleblower policy?			•	13		<u>X</u>		
14	Does the organization have a written document retention and destruction policy?				14		X		
15	Did the process for determining compensation of the following persons include a review and approva	ıl by ı	ındepei	ndent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official				15a		<u>X</u>		
b	Other officers or key employees of the organization		•		15b	-	X		
	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 arrangen	nent	with a				7.7		
	taxable entity during the year?				16a		_X_		
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval			icipation					
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization	anıza	tion's						
<u> </u>	exempt status with respect to such arrangements?				<u>  16b</u>				
	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed NH				.1. 4:				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501	1(c)(3)s	oniy) availat	DIE TOT				
	public inspection. Indicate how you make these available. Check all that apply.								
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, continuous and in the continuous co	ontic	ct of int	erest policy	and fina	anciai			
05	statements available to the public.	اسد		£ 41= :-	-at.c-: <b>-</b>				
20	State the name, physical address, and telephone number of the person who possesses the books ar	na re	cords o	tne organi	zation.	_			
	MARTY HARMAN - 603-888-1290								
	227 HARRIS ROAD, NASHUA, NH 03062								

## 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 employee."
- 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 c  (A)	(C)						(D)	(E)	(F)	
Name and Title	(B) Average		Position					Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)					compensation	compensation	amount of
	per week	Indiwdual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
KARL GREEN	0.00									0
TRUSTEE	2.00	X.	_		<u> </u>			0.	0.	0.
ANTHONY LAJEWSKI										•
TRUSTEE	2.00	X	_					0.	0.	0.
BOB VALADE										•
TRUSTEE	2.00	X						0.	0.	0.
ROLY FISHER	0.00								_	•
TRUSTEE	2.00	X				├		0.	0.	0.
ALEX MCDONALD	2 00	,,					İ	0.	0.	0.
TRUSTEE	2.00	X			<u> </u>	├		<u> </u>	- 0.	<u> </u>
JOHN RICHARD	2.00			x		1		0.	0.	0.
PRESIDENT	2.00	ļ	ļ .		-	╁		<u> </u>		
JIM BROWN 1ST VICE PRESIDENT	2.00			x				0.	0.	0.
ALAN RICE	2.00	-	_	Λ						
2ND VICE PRESIDENT	2.00	İ	l	x				0.	0.	0.
MARTY HARMAN	2.00	<del> </del>	ļ —			<del>                                     </del>				
TREASURER	2.00			x				0.	0.	0.
JAY E SIMKIN										
RECORDING SECRETARY	2.00			Х	1			0.	0.	0.
ALEXANDER GLUMAC										
CORRESPONDING SECRETARY	2.00	<u> </u>	_	X	_		_	0.	0.	0.
	:					_				
						-				
						-				
		<u> </u>				_		-		
		-	T							

Par	t VII Section A. Officers, Directors, Tru		nplo	yee			<u>High</u>	est	1				
	(A)	(B)				<b>C</b> )			(D)	(E)		(F)	
	Name and title	Average hours	/ / /		Pos		n ∶app	hΑ	Reportable compensation	Reportable compensation		Estimate amount	-
		per week	Individual trustee or director	onal trustee	Institutional trustee Officer		Highest compensated Employee	Ī	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC		other compensa from the organizate and relate organizate	ation ie tion ted
-												-	
			-										
												-	
				_									
1b	Total .						<b>&gt;</b>		0.		).		0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov	e) wl	ho r	eceived more than \$100	0,000 in reportable			
	compensation from the organization									<del></del>		Yes	0 No
3	Did the organization list any <b>former</b> officer,			e, ke	y en	nplo	yee,	or t	nighest compensated ei	mployee on			
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	um of reportab	le co							the organization		3	X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or a									rices rendered to		4	X
	the organization? If "Yes," complete Sched					· • · · ·	, u					5	х
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest countries the organization.  NONE	mpensated in	depe	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of comp	ensatı	on from	
	(A) Name and business	address					_		(B) Description of s	services	Con	(C) npensatio	on
													_
							_					_	
													_
2	Total number of independent contractors ( \$100,000 in compensation from the organi	<del>-</del>	not li	mite	ed to	the	ose li 0	ste	d above) who received r	nore than	<u>.</u>	rm 990	(0000)
												arma sessili	でほり9

Form 990 (2009) NASHUA FISH & GAME ASSOCIATION Part VIII Statement of Revenue (D) Revenue excluded from (B) (C) (A) Total revenue Related or Unrelated exempt function tax under sections 512, business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 95,069. 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and 809 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 95,878. h Total. Add lines 1a-1f Business Code 110000 49,055. 49,055 2 a FOWLER RANGE Program Service Revenue 21,700. 110000 21,700. ь SELF-DEFENSE 6,021 c INDOOR RANGE AND TRAP 110000 6,021. 3,760 3,760. d OTHER PROGRAMS 110000 3,304 3,304. e LEVERIDGE RANGE & CMP 110000 f All other program service revenue 83,840 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,018. 4,018 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royatties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 0. 183,736. 4,018. 83,840. Total revenue. See instructions.

23-7225944

Page 9

Form **990** (2009)

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) (B) Program service (C) Management and (**D**) Fundraising Do not include amounts reported on lines 6b, Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 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 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) Management 3,178. Legal b 2,150. C Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees a 1,120. Advertising and promotion 12 2,556. 13 Office expenses 14 Information technology Royalties 15 Occupancy 16 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 15,312 Depreciation, depletion, and amortization 22 13,560. Insurance 23 Other expenses. Itemize expenses not covered 24 above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 43,566. a REPAIRS & MAINTENANCE 15,700. OPERATING SUPPLIES 10,229. UTILITIES 9,238. TAXES 745 OTHER EXPENSES All other expenses 117,354 Total functional expenses Add lines 1 through 24f 25 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

	rt X	Balance Sheet				72233 44 Tage 11
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		6,057.	1	3,852.
	2	Savings and temporary cash investments		92,717.	2	<u>169,181.</u>
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	_		4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employe				
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section	-		
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			
		Part II of Schedule L			6	
Ø	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges			9	
	1	Land, buildings, and equipment, cost or other	1 1			
		basis. Complete Part VI of Schedule D	10a 572,451.			
	Ь	Less: accumulated depreciation	10ь 134,560.	446,787.	10c	437,891.
	11	Investments - publicly traded securities		•	11	
	12	Investments - other securities See Part IV, line	11	107,698.	12	116,456.
	13	Investments - program-related. See Part IV, line		7	13	<u> </u>
	14	Intangible assets	• •		14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	653,259.	16	727,380.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
Ø	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directo				
ΞĢ		highest compensated employees, and disqualif				
Ë		of Schedule L			22	
	23	Secured mortgages and notes payable to unrel	ated third parties	-	23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117, check h	ere  and complete			
S		lines 27 through 29, and lines 33 and 34.				
JCe	27	Unrestricted net assets			27	
alaı	28	Temporarily restricted net assets	•		28	
B B	29	Permanently restricted net assets			29	
Ĕ		Organizations that do not follow SFAS 117, o	heck here 🕨 🗓 and			
P. F		complete lines 30 through 34.				
ţ	30	Capital stock or trust principal, or current funds		0.	30	0.
SSE	31	Paid-in or capital surplus, or land, building, or ea		0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in		653,259.	32	727,380.
Š	33	Total net assets or fund balances		653,259.	33	727,380.
	34	Total liabilities and net assets/fund balances		653,259.	34	727,380.

Pa	rt XI Financial Statements and Reporting		
		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,		ĺ
	review, or compilation of its financial statements and selection of an independent accountant?		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	ĺ	
	consolidated basis, separate basis, or both		
	Separate basis Consolidated basis Both consolidated and separate basis		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit		
	Act and OMB Circular A-133?		X
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.		<u> </u>
	Form	990 (	(2009)

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

Employer identification number 23-7225944

	NASHUA FISH & GAME	ASSOCIATION	23-7225944
Pai		ed Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can b	pe used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpos	se conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	, Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an h	nistorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	fied conservation contribution in the forr	m of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	the organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	_
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling o	of
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and	l enforcing conservation easements durir	ng the year ▶ \$
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIV, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	es the organization's accounting for
	conservation easements.	<del></del>	01 01 11 1
Pa	t III Organizations Maintaining Collections		Otner Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8	<del></del>
1a	If the organization elected, as permitted under SFAS 116, n		
	treasures, or other similar assets held for public exhibition,		public service, provide, in Part XIV, the text
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education,	or research in furtherance of public servi	ice, provide the following amounts relating t
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
	(ii) Assets included in Form 990, Part X		. <b>&gt;</b> \$
2	If the organization received or held works of art, historical tr		cial gain, provide
	the following amounts required to be reported under SFAS	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
b	Assets included in Form 990, Part X	•	<b>▶</b> \$

		<u>FISH &amp; GAM</u>							<u> 25944</u>	
Par	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	following that	at are a s	gnıficant	use of its	collection i	tems
	(check all that apply):									
а	Public exhibition	d	ı 🔲	Loan or exc	hange progra	ams				
b	Scholarly research	е		Other					<u></u>	
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	on's exe	mpt purpo	se in Par	XIV	
5	During the year, did the organization solicit o	r receive donations	of art, hi	stoncal trea	sures, or oth	er sımılaı	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's co	ollection?				Yes	□ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete ıf org	janization ar	nswered "Ye	s" to For	n 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Par	rt X, line 21								
	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?		-						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table.		·				
_		•	J						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year				•		1e			
f	Ending balance					•	1f			
2a	Did the organization include an amount on Fe	orm 990. Part X. line	212		•	•	احتنا		Yes	No
	If "Yes," explain the arrangement in Part XIV					•				
Par			swered	"Yes" to Fo	rm 990. Part	IV. line 1	0			
		(a) Current year		nor year	(c) Two yea	T	(d) Three y	ears hack	(e) Four ye	ears back
4-	Paginning of year balance	(a) Current year	(0)	noi yeai	(c) two year	13 baok	(4) 111100 )	ouro buon	(C) ( Car y	outo outon
	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships		<del></del>	<del></del>						
е	Other expenditures for facilities				İ					
_	and programs				<del> </del>					
f	Administrative expenses				+					
g	End of year balance				<u> </u>	į				
2	Provide the estimated percentage of the year	r end balance held a								
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С		%								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	ered for t	he organiz	zation	_	
	py.									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?				•	3b	
4	Describe in Part XIV the intended uses of the									
Pai	rt VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 990	, Part X, line	10.				
	Description of investment	(a) Cost or o		, , ,	t or other (other)	, , ,	ccumulate preciation		(d) Book	/alue
	Lond	Dadio (investi			25,000.				225	,000.
	Land			4_4	9,330.	<del> </del>	7	77.		,553.
	Buildings			<del> </del>	3,330.			11.	0	, 222.
	Leasehold improvements	•		<del>  -</del>					_	
	Equipment				0 1 0 1		122 7	02	204	220
	Other				88,121.	<u> </u>	<u>133,7</u>	02.		<u>,338.</u>
<u>Tota</u>	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colui	mn_(B), line	1U(C))				437	<u>,891.</u>

1 (a) Description of liability (b) Amount
Federal income taxes

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

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

	edule D (Form 990) 2009 NASHUA FISH & GAME ASSOC	CIATION		23-722	25944	Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 99	0 to Audited Fina	ncial Sta	tements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			736.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			<u>354.</u>
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			382.
4	Net unrealized gains (losses) on investments		4		<u> </u>	<u>739.</u>
5	Donated services and use of facilities		5	·,		
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4 through 8		9			<u>.739.</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10		74,	121.
Par	rt XII Reconciliation of Revenue per Audited Financial Stat	ements With Rev	enue per	Return		
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	_2a				
b	Donated services and use of facilities	<u>2</u> b				
С	Recovenes of prior year grants	2c				
d	60 /5 / 5 / 70 /	2d	·			
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b		4b				
c		<u> </u>		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5		
	rt XIII Reconciliation of Expenses per Audited Financial Sta	tements With Exp	enses p	er Return		
1	Total expenses and losses per audited financial statements		-	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				-	
a	B. A. I. San Market Mar	2a				
b		2b				
c		2c				
d			· · · · · · · · · · · · · · · · · · ·	<b>─</b>		
				2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4a				
		4b	-	<b>-</b>		
	Add lines 4a and 4b	<u> </u>		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.	)		5		
	rt XIV Supplemental Information	·/ :-				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also					4, Part
		<del>-</del> · · · · · · · · · · · · · · · · · · ·		,		

#### SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Information to Form 990 complete to provide information for responses to specific questions on

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

Attach to Form 990.

2009
Open to Public Inspection

Employer identification number Name of the organization 23-7225944 NASHUA FISH & GAME ASSOCIATION FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FOUNDING DOCUMENTS. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMUNITY WITH A VIEW TOWARDS BETTER FIREARMS KNOWLEDGE, ENHANCED SAFETY AND IMPROVED MARKMANSHIP. FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE TRUSTEES AND OFFICERS OF THE ORGANIZATION. FORM 990, PART VI, SECTION B, LINE 12C: THE OFFICERS AND TRUSTEES REGULARLY REVIEW THE CONFLICT OF INTEREST POLICY AND AND ANY POTENTIAL CONFLICTS OF INTEREST AT MONTHLY MEETINGS. FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION CONDUCTED MANY EVENTS, INCLUDING SEMINARS, CLASSES, A JUNIOR RIFLE PROGRAM, A MARKSMANSHIP PROGRAM IN CONJUNCTION WITH THE US DEPARTMENT OF DEFENSE AND OTHER EVENTS AND COMPETITIONS. IN ADDITION, SUBSTANTIAL FUNDS WERE EXPENDED TO MAINTAIN THE ORGANIZATION'S FACILITY.

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

► See separate instructions.

► Attach to your tax return.

990

OMB No 1545-0172

Attachment Sequence No 67 Business or activity to which this form relates Identifying number

NAS	HUA FISH & GAME ASS	OCIATION		FOR	м 99	0 P	AGE 10		23-7225944
Part	I Election To Expense Certain Propert	y Under Section 17	79 Note: If yo	ou have any lis	ted prop	erty, (	complete Part \	/ before yo	ou complete Part I
1 Ma	aximum amount See the instructions	for a higher limit	for certain b	usinesses				1	250,000.
2 To	otal cost of section 179 property place	d in service (see	instructions)	)				2	
3 Th	reshold cost of section 179 property	pefore reduction	in limitation					3	800,000.
4 Re	eduction in limitation. Subtract line 3 fr	om line 2. If zero	or less, ente	er -0-				4	
5 Dol	llar limitation for tax year Subtract line 4 from line	1 If zero or less, enter	-0- If married fil	ing separately, see	instruction	18		5	
6	(a) Description of pro	perty		(b) Cost (busin	ess use on	ly)	(c) Elected	cost	
			_						
7 Lis	sted property Enter the amount from	ine 29				7			
	otal elected cost of section 179 proper		ın column (d	c), lines 6 and	7			8	
	entative deduction Enter the smaller							9	
10 Ca	arryover of disallowed deduction from	line 13 of your 20	008 Form 45	62				10	
11 Bu	usiness income limitation. Enter the sn	naller of business	income (no	t less than zer	o) or line	e 5		11	
12 Se	ection 179 expense deduction Add lin	es 9 and 10, but	do not ente	r more than lir	ne 11			12	
13 Ca	arryover of disallowed deduction to 20	10 Add lines 9 a	ind 10, less l	line 12	▶□	13			
	Do not use Part II or Part III below for								
Part	II Special Depreciation Allowar	ce and Other D	epreciation	(Do not inclu	de listed	prop	erty.)		
14 Sr	pecial depreciation allowance for quali	fied property (oth	er than liste	d property) pl	aced in	servic	e during		
the	e tax year						_	14	
	operty subject to section 168(f)(1) elec	ction		_				15	
	ther depreciation (including ACRS)	•		•				16	15,312.
Part		include listed pr	operty.) (See	e instructions.	)				
			Se	ection A					
17 M	ACRS deductions for assets placed in	service in tax ye	ars beginnir	ng before 2009	<del></del>			. 17	
	ou are electing to group any assets placed in servi	-	=	=		ck here	`▶ □		
	Section B - Assets						neral Deprecia	tion Syste	em
	(a) Classification of property	(b) Month and year placed in service	(business/ii	or depreciation nvestment use i instructions)		covery	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property	]							
b	5-year property	}							
С	7-year property	]							
d	10-year property	]							
е	15-year property	]							
f	20-year property	]							
g	25-year property	1			25	yrs		S/L	
	5	/			27.5	yrs.	MM	S/L	
h	Residential rental property	_ /			27 5	yrs.	MM	S/L	
		/			39	yrs.	MM	S/L	
i	Nonresidential real property	1					MM	S/L	
	Section C - Assets P	aced in Service	During 200	9 Tax Year U	sing the	Alter	native Deprec	iation Sys	tem
20a	Class Irfe							S/L	
<u></u>	12-year	1			12	yrs		S/L	
c	40-year	/				yrs	MM	S/L	
Parl									
	sted property. Enter amount from line	28						21	
	otal. Add amounts from line 12, lines 1		es 19 and 2	0 in column (a	), and lii	ne 21	•		
Er	nter here and on the appropriate lines	of your return. Pa	artnerships a	and S corpora			tr	22	15,312.
	or assets shown above and placed in section of the basis attributable to section	_	e current yea	ar, enter the		23			
n f	THOSE OF THE MASIS APPRICATION TO SECTI	ロロマかきみ このらだら				74			

43

44

43 Amortization of costs that began before your 2009 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

#### Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

<ul><li>If yo</li></ul>	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	•
Do not	complete Part II unless you have already been granted an automatic 3-month extension on a previously fill  Automatic 3-Month Extension of Time. Only submit original (no copies needed).	led Form 8868.
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com only	<b>▶</b> □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ncome tax returns.	extension of time
noted I (not au you mu	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or courst submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,
Type o	Name of Exempt Organization	Employer identification number
	NASHUA FISH & GAME ASSOCIATION	23-7225944
File by th due date filing you	te for Number, street, and room or suite no. If a P.O. box, see instructions our P. O. BOX 28	
retum Se instructio	Se	
X   F 	type of return to be filed (file a separate application for each return).  Form 990	227 069
Tele If th	MARTY HARMAN  books are in the care of ▶ 227 HARRIS ROAD - NASHUA, NH 03062  sphone No. ▶ 603-888-1290  FAX No. ▶  e organization does not have an office or place of business in the United States, check this box  is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the  . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	
1 I		
2 1	f this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
<b>b</b> !	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made. Include any prior year overpayment allowed as a credit.	3a \$ 3b \$
C	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)  See instructions	3c \$ N/A
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions.