

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

### **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)

2009

Inte	mal Revenu	e Service		The organiza	ation may hav	e to use a copy of	this return to	satisfy state	reporting req	uireme	nts	Inspection
A	For the 20	09 calendar ye	ear, or tax ye	ar beginning	07/0	$1/09$ , and $\epsilon$	ending 06	<u>5/30/1</u>	0			
В	Check if applic	able Please	0 ,10.000	rganization B	OYS & G	IRLS CLUB C	F GREATE	R NASHU	JA	D	Empl	oyer identification number
	Address change	use IRS	I .	I	NC., CHA	ARITABLE FO	UNDATION	Ī				
$\equiv$		label of	D D	iness As	<del></del>						02	-0460079
$=$ $^{!}$	Name change	type			nox if mail is not de	fivered to street address)			Room/suite	E		hone number
	Initial return	See		RAND AVE		,						3-883-0523
	Termination	Specific							-	15	Gross rec	
		Instruc-	NASH	own, state or com	untry, and ZIP		060			190	3/055 160	sipis 000,000
-	Amended retu		<del>*</del>				000			ᅴ,,,	s) la thio	a amus ratum for
_	Application pe	ending F Name	e and address	s of principal off	licei					''''	affiliat	s a group return for tes? Yes X No
										H(t	) Are al	Il affiliates
											includ	
	<del></del>		7						-		ii 'NO	," attach a list (see instructions)
	Tax-exemp	<del></del>	501(c) (	3) <b>∢</b> (ı	insert no )	1 4947(a)(1) or	527			┥		
<u>J</u>	Website		<del></del>	·			<del></del>		<del></del>		<del></del>	exemption number
		ization X Cor		Trust   As:	sociation (	Other		L \	ear of formation	199	2	M State of legal domicile NH
P	Part I	Summar										
	1 Brie	efly describe the	the organizat	tion's mission	or most sign	ificant activities						
ø	I I					FFORTS AND						
Governance	I	THE BENE	FIT OF	THE BOYS	S & GIRL	S CLUB OF C	GREATER N	AUHZĄI	INC.			
Ë												
Š	2 Che	eck this box 🕨	▶ 🕍 if the o	organization (	discontinued i	its operations or di	isposed of moi	re than 25%	of its net ass	ets		
ფ	3 Nur	mber of voting	members c	of the gover <b>n</b> i	ng body (Part	: VI, line 1a)					3	11
88	4 Nur	nber of indepe	endent votin	ig members c	of the governi	ng body (Part VI, I	ıne 1b)				4	11
Activities &	5 Tota	al number of e	employees (	Part V, line 2	a)						5	0
\cti	6 Tota	al number of v	volunteers (	estimate if ne	cessary)						6	0
•	7a Tota	al gross unrela	lated busine:	ss revenue fr	om Part VIII,	column (C), line 12	2				7a	
	b Net	unrelated bus	siness taxat	ole income fro	om Form 990-	T, line 34					7b	0
			· · · · ·						Prior			Current Year
<u>V</u>		ntributions and								2,	703	1,014
<b>∑</b> ê	9 Pro	gram servi <mark>c</mark> e i	revenue (Pa	art-VIII line 20	9) ()			L				
23		estment incom							-1	<u>97, </u>	931	65,537
#	11 Oth	er revenue (P	art VIII, jook	နက် (၇), ဉိုးဂြိန်နိ	5, 6d, 8c, 9c	, 10c, and 11e)						2,749
SCHWINED	12 Tota	al revenue - a	add lines 8 th	hrough 11 (m	ust equal Par	t VIII, column (A),	line 12)			95 <u>,</u> :	$\overline{}$	69,300
	13 Gra	nts and simila	ar amounts_p	paid (Part IX.)	cplumn (A), li	nes 1–3)			1	34 <u>,</u> :	382	186,428
DEC	14 Ben	efits paid to o	or for membe	ata (Earlix)-e	se <del>lumn (A</del> ), lin	ne 4)						
See See	15 Sala	aries, other co	ompensation	ı, employee b	enefits (Part	IX, column (A), line	es 5–10)					· · · · · · · · · · · · · · · · · · ·
	16a Prof	fessional fund	draising fees	(Part IX, colu	umn (A), line	11e)						
Ţ	<b>b</b> Tota	al fundraising	expenses (F	Part IX, colum	nn (D), line 25	s) <b>▶</b>		_				
	17 Oth	er expenses (	(Part IX, colu	umn (A), lines	s 11a-11d, 11	f–24f)				<u>17,0</u>	002	17,901
⋽	18 Tota	alexpenses A	Add lines 13	⊢17 (must eq	jual Part IX, o	olumn (A), line 25)	)	:	1	51,3	384	204,329
	19 Rev	enue less ext	penses Sub	otract line 18 f	from line 12			Γ	- 3	46,6	512	-135,029
Net Assets or Fund Balances									Beginning of C		-	End of Year
sets	20 Tota	al assets (Part	t X, line 16)						2,1	57,	372	2,428,608
A As	21 Tota	al liabilities (Pa	art X, line 26	3)								316,755
ž	<b>22</b> Net	assets or fund	d balances	Subtract line	21 from line 2	20			2,1	<u>57, </u>	372	2,111,853
_ <u>P</u>	art II	Signatur	re Block									
		Under penalt	ties of perjury,	I declare that I	have examine	thur return including	gaccompanying	schedules an	d statements, a	nd to the	e best o	f my knowledge
		and belief, it	pycie, correc	it, and complete	Declaration	reparer other than	Tonicer) is based	on all inform	ation of which p	reparer	nas an	/ knowledge
Sig	ın	<b> </b>	Moratar	n Hor	MIL	841)	<del></del>					1/10/10
He	re	Signatur	ing of officer	110	1/./ 4						Date	1/4/1
		10	URINA	W DOU	milell	e Jech	ut Mes				_//	//0//0
_		Type or	print name an	nd title		/	/					·
		Preparer's		11.	. /			Date	Chec	k ıf	_	Preparer's identifying number (see instructions)
Pai		signature	7	11/	$\sim$	C C P	/	11/09	9/10 self-	oyed 🕨		018-42-3990
	eparer's		<del>.</del>	SEELY	E & SCI	HULZ PA,	CPA		, = -1		EIN ▶	<del></del>
Us	e Only	Firm's name of self-employ					<del>54.</del>	<del></del> -			hone	
		address, and		NASHU.		03063-12						603-886-1900
Mari	the IRS d					see instructions)	-			'		X Yes No
					<del></del>	separate instruc	tions		<del></del>			Form <b>990</b> (2009)
DAA		ot and raper	, #*OIN INEUU	CHOIL MCC NO	e, 3ce ille	ospaiate monut						7 01111 000 (2003)

186,428

) (Revenue \$

Form 990 (2009)

including grants of \$

(Expenses \$

4e Total program service expenses ▶

	The state of the s			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1,	X	
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	1 2	+^	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u>-</u>	+-	+1
•	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			<del> </del>
,	Schedule C, Part II	4		Х
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		<u> </u>
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,		1	l
	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,"		!	1,
_	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	ĺ		
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			v
40	complete Schedule D, Part IV	9_	+	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	10		х
11	quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10		1
''	VII, VIII, IX, or X as applicable	11		x
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10 <sup>9</sup> If "Yes," complete		1 -	1
•	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 167 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	- }	1	}
	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 related 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 257 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		ł	
	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	10	·}	<del></del>
404	Schedule D, Parts XI, XII, and XIII	12	<del> </del>	X
12A		No X	1	ł
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<b>†</b>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
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	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	İ		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	ļ	X
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	ļ	<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			١.,
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> X</u>
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	<del> </del> -	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			X

Form 990 (2009) BOYS & GIRLS CLUB OF GREATER NASHUA 02-0460079

Part IV Checklist of Required Schedules (continued)

<u> </u>	dit 14 Officernist of Reduited Schedules (Continued)			1	
21	Did the executation report more than \$5,000 of execute and other ecountaines to accomments and executations			Yes	No
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 12 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			<del>                                     </del>	
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				1
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J		23		Х
24a		ł			
240	\$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		x
b			24b	<b></b> -	<del>                                     </del>
c		ŀ		_	<del> </del>
·	· · · · · · · · · · · · · · · · · · ·		24c	[	ĺ
d	to defease any tax-exempt bonds?  Did the croppination act on an "on boald of" requestor bonds outstanding at any time during the year?	ł	24d	-	
	J	ł	240	<del> </del>	1
<b>2</b> 3a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	İ	25-		Х
<b>h</b>	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	}	25a	<b> </b>	<u> </u>
b					ŀ
	pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		256		X
00	990-EZ? If "Yes," complete Schedule L, Part I	-	25b		<del>  ^-</del>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	J	00		X
	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?				<sub>V</sub>
	If "Yes," complete 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,	- {			l
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)				7.
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		28a		X
b					3,7
	Schedule L, Part IV	}	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	-	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1			
	conservation contributions? If "Yes," complete Schedule M	-	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1	-		
	Part I	-	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ			
	Schedule N, Part II	ļ.	32		<u>X</u>
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		<u>X</u>
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		<u>X</u>
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		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		ŀ		
	organization? If "Yes," complete Schedule R, Part V, line 2	L	36		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,				
	Part VI	<u> </u>	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			ļ	
	19? Note: All Form 990 filers are required to complete Schedule O	- 1	38	X	

Form **990** (2009)

Form **990** (2009)

Form 990 (2009) BOYS & GIRLS CLUB OF GREATER NASHUA 02-0460079

Part V Statements Regarding Other IRS Filings and Tax Compliance

	The State of the S		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	1	}	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	7	i	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7		
	gaming (gambling) winnings to prize winners?	1c	X	
2a	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 2a 0			
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)			
За				
	this return?	3a		Х
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		X
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		X
С	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		1	
	organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		ĺ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		ŀ	
	and services provided to the payor?	7a		<u>X</u>
þ	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		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	ł _	- 1	37
	benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	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	7.		
	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			
	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	1	
9	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		
0	Section 501(c)(7) organizations. Enter		$\neg \uparrow$	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	1		
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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.

	Schedule O. See Instructions.					
Sec	tion A. Governing Body and Management				<del>,</del>	<del></del>
	Estable combined on the combined for	ایا	11		Yes	No
1a	Enter the number of voting members of the governing body	1a	11	<b></b> ∤		ĺ
b	Enter the number of voting members that are independent	1b	11	$\dashv$		
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?					Х
3				2	<del> </del>	
3	Did the organization delegate control over management duties customarily performed by or under the direct			3	ļ	Х
4	supervision of officers, directors or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed.	2		4	<del>                                     </del>	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6	<del>                                     </del>	X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members			0		
, u	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			10		
•	the year by the following					ĺ
а	The governing body?			8a	x	ĺ
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			- 55		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	mal				
	renue Code.)					
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		Х
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		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					
	form?			11	Х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give				Ţ	
	rise to conflicts?			12b	İ	X
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	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	Х	
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	X	
b	Other officers or key employees of the organization			15b		<u>X</u>
	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	$\longrightarrow$	<u>X</u>
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard				l	
	the organization's exempt status with respect to such arrangements?			16b		
Sect	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ NH					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	<i>)</i>				
	available for 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, conflict of interest					
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the					
	organization ▶ NORM BOUTHILETTE 47 GRAND AVE					

603-883-0523

NH 03060

NASHUA

DAA

Form **990** (2009)

# 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.

(A) Name and Title	(B) Average	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JAMES CONWAY	2.00	Х						0	0	(
DAVE BRASSARD TREASURER	1.00	Х		х				0	0	(
SAL MAGNANO	1.00	х						0	0	(
THOMAS MCCARTNEY	1.00	х						0	0	(
ROBERT MOHEBAN	1.00	x						0	0	(
TERRY ROMANO	1.00	x					ļ	0	0	(
MARTHA O'NEILL	1.00	х						0	0	(
FRED ROEDEL	1.00	x		_	_			0	0	
NORM BOUTHILETTE	1.00	x		x				0	0	(
THOMAS MONAHAN	1.00	x		х				0	0	(
SAM TAMPOSI	1.00	x			_	_		0	0	(
		ļ	<u> </u>							
		_		_		_				
· ·				_	_	_	_			
		-		_		_	_			
		-	_	_			ļ			
					-					

- art vii	Section A. Oniocis	, Directors, Trus	1003	, Ne	y El	npio	yees	, an	d Ingliest Compensated L	Tiployees (continued)			
	(A)	(B)	l_			C)			(D)	(E)	_	(F)	
Nam.	e and Title	Average hours per week	2 Individual trustee or director		Officer		a Highest compensated employee			Reportable compensation from related organizations (W-2/1099-MISC)	com fr org: and	stimated nount of other pensatio om the anizatior diretated anization	1
					-	-	-						<u> </u>
			<del> </del>	-									
					_	-							
					-	ļ							
					-	-							
				_									
	·				_		i			3			
	<del> </del>					<u> </u>							
1b Total								<b>•</b>			L		_
	er of individuals (incompensation from t			to the	ose I	isted	l abo	ve) v	who received more than \$10	00,000 in			
3 Did the org	anization list any for	mer officer direc	tor o	r trus	stee	kev	emn	love	e, or highest compensated			Yes	No.
employee	on line 1a? If "Yes," o	complete Schedu	le J f	or su	ıch ıı	ndıvı	dual		nd other compensation from	n	3	+-	X
individual		-							complete Schedule J for su	ch	4		X
services re	ndered to the organi	zation? If "Yes," o							inrelated organization for ch person		5		Х
1 Complete t	pendent Contracto his table for your five ion from the organiza	e highest compen	sate	d ind	eper	nden	t con	tract	ors that received more than	\$100,000 of			
Compensat		(A) business address							Descripti	(B) on of services		(C) Compens	ation
													···
	·												
	er of independent co		_			ited i	to the	se li	sted above) who received			0	
DAA			<u></u>										0 (2009)

gifts, gran ilar amoun					i	(A) Total revenue	(B) Related or	(C)	(D) Revenue
tions, gifts, grants er similar amounts						rotai revenue	exempt function revenue	Unrelated business revenue	excluded from tax under sections 512, 513, or 514
tions, gifts, gran er similar amoun		Federated campaigns	1a						
tions, gifts, g er similar amo	b	Membership dues	1b						
tions, gift er similar		Fundraising events	1c			J	}		
tions,		Related organizations	1d						:
ar S		Government grants (contributions)	1e						
		All other contributions, gifts, grants,							
<u> </u>		and similar amounts not included above	1f		1,014				
dat	g	Noncash contributions included in lines 1a-1		 §		Ì			1
လို န်	-	Total. Add lines 1a-1f			•	1,014			
					Busn. Code				
ē 2	2a								
ھَ	b		•						
<u>.</u>	С								
Ser	d								
E	е								
Program Service Revenue	f	All other program service reven	ue						
مة	9	Total. Add lines 2a-2f			<b>•</b>				
3	3	Investment income (including d	ıvıdend	s, interes	t, and				
		other similar amounts)			▶	74,752	74,752		<u> </u>
4	ļ	Income from investment of tax-	exempl	bond pro	ceeds 🕨				
5	;	Royalties							
		(ı) Real		(II) F	Personal				
6	а	Gross Rents							
	b	Less rental exps							
(	С	Rental inc or (loss)							1
		Net rental income or (loss)			•				
'		Gross amount from (i) Securities sales of assets		(n)	Other				
		other than inventory 791,	044						
1	b	Less cost or other							
		basis & sales exps 800,							
(	С	Gain or (loss)	215				1		
		Net gain or (loss)	_		<u> </u>	-9,215	-9,215		· · · · · · · · · · · · · · · · · ·
<u>.</u> 8		Gross income from fundraising even	ts			]			
na		(not including \$							
Š		of contributions reported on line 1c)							
Other Revenue		See Part IV, line 18	a				i		İ
돌l t		Less direct expenses	ьĹ						
9		Net income or (loss) from fundra		vents			<del></del>		<del> </del>
98		Gross income from gaming activities	l						
.		See Part IV, line 19	a						
- 1		Less direct expenses	ьĹ		<del></del> +				<del> </del>
		Net income or (loss) from gamir	ig activ F	ities				<del></del>	<del> </del>
10a		Gross sales of inventory, less							
١.		returns and allowances	a				}		
		Less cost of goods sold	b	-4					
-ب	<u> </u>	Net income or (loss) from sales  Miscellaneous Revenue	of thve		Busn Code			<del></del>	<del> </del>
118					20311 0000	2,749	2,749		
b		OTHER REVENUE			<del> </del>	2,133	2,143		<del>                                     </del>
					<del>  </del>				<del> </del>
	-	All other revenue			<del></del>				<del> </del>
		Total. Add lines 11a–11d			<b>—</b>	2,749	<del></del>		<del> </del>
12		Total Revenue. See instruction	s			69,300	68,286	0	0

## Part IX Statement of Functional Expenses

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	5	105 400	106 400		1
	organizations in the U.S. See Part IV, line 21	186,428	186,428		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			<del> </del>	ļ
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)		. <u></u>		
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)		<del></del>		
9	Other employee benefits		·		
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	1,975		1,975	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,921		13,921	
g	Other				
12	Advertising and promotion				
13	Office expenses				
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				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	653		653	
24	Other expenses Itemize expenses not	1			
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а	MISC FEES	1,352		1,352	
b					. <del></del>
С					
d					
е	,				
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	204,329	186,428	17,901	
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				
_					

	•		(A)		(B)
			Beginning of year		End of year
1	3		F27 F72	1	458,463
2	3		537,573	2	450,40.
3				3	
4	Accounts receivable, net			4	
5		-		Ì	
- }	employees, and highest compensated employees Comp	Diete Part II of	1	_	
	Schedule L			5	
6					
	4958(f)(1)) and persons described in section 4958(c)(3)(I	B) Complete			
v)	Part II of Schedule L			6	
Assets	The same records of the			7	
<b>8</b>	Inventories for sale or use		<u> </u>	8	
9	Prepaid expenses and deferred charges	r		9	
10	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a			
l t	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities		1,585,069	11	1,932,666
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11		34,730	15	37,479
16	Total assets. Add lines 1 through 15 (must equal line 34)	)	2,157,372	16	2,428,608
17	Accounts payable and accrued expenses			17	
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV of	Schedule D		21	
፭   22	Payables to current and former officers, directors, trustee	s, key	1		
	employees, highest compensated employees, and disqua	alified			
֡׀֡֡	persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third	parties		23	
24	Unsecured notes and loans payable to unrelated third par	rties <sub>.</sub>		24	316,755
25	Other liabilities Complete Part X of Schedule D			25	
26	Total liabilities. Add lines 17 through 25			26	316,755
ກ	Organizations that follow SFAS 117, check here ▶	and			
2	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets		2,157,372	27	2,111,853
28	Temporarily restricted net assets			28	
2 29	Permanently restricted net assets			29	
3	Organizations that do not follow SFAS 117, check her	re 🕨 📋			
<u> </u>	and complete lines 30 through 34.				
g 30	Capital stock or trust principal, or current funds			30	
31	Paid-in or capital surplus, or land, building, or equipment f	fund		31	
32	Retained earnings, endowment, accumulated income, or	other funds		32	
27 28 29 30 31 32 33 34	Total net assets or fund balances		2,157,372	33	2,111,853
34	Total liabilities and net assets/fund balances		2,157,372	34	2,428,608

Form **990** (2009)

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2009)

3h

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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.

OMB No 1545-0047

Open to Public Inspection

BOYS & GIRLS CLUB OF GREATER NASHUA Name of the organization Employer identification number 02-0460079 CHARITABLE FOUNDATION Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

he	orgai	nization 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 nar	ne,		
		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.)			
0		An organization organized and operated exclusively to test for public safety. See section 509(a)(4).			
1	X	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 X Type III-Functionally integrated d Type III-Other			
e	X	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			1
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)		Yes	H
		and (m) according good at the depression of good at the control of	11g(i)		$\vdash$
		(ii) A family member of a person described in (i) above?	11g(iı)		_

(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

h Provide the	following information about the	ne supported organization(s)							
(i) Name of supported organization	organization (described on lines 1–9 in 6		ın col (i) lı	organization sted in your document?	the organ	rou notify nization in of your port?	organiza (I) organi	Is the tion in col ized in the S?	(vii) Amount of support
		(**************************************	Yes	No	Yes	No	Yes	No	
BOYS & GIR	S CLUB OF GRE	TER NASHUA INC							
	23-7058376	9	X		X		X		186,428
	<u> </u>		<del> </del>			<u> </u>		<del></del>	
<del></del>	<del> </del>						<del> </del>		
	<u></u>						ļ		
							i		
Total									186,428

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

Sche				GREATER N		2-0460079	Page 2	
	art II Support Schedule for O	rganizations D	escribed in Se	ctions 170(b)(		70(b)(1)(A)(vi)		
	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)				
	tion A. Public Support					<del>,</del>		
Ca	ılendar year (or fiscal year begınning ın) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	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)							
6	Public support. Subtract line 5 from line 4	<u> </u>	<u> </u>					
	tion B. Total Support		<b>,</b>			<del></del>		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10				<u> </u>			
12	Gross receipts from related activities, etc. (	see instructions)				12		
13 First five years. 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 stop here				<del></del>	<del></del>	<b>&gt;</b>	
Sec	tion C. Computation of Public Su	pport Percenta	age				<del></del>	
14	Public support percentage for 2009 (line 6,	column (f) divided	by line 11, column	(f))		14	%	
15	Public support percentage from 2008 Sche					15		
16a	33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization							
b	33 1/3 % support test—2008. 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 stop here. The organization qualifies as a publicly supported organization							
17a	10%-facts-and-circumstances test—2009. 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 stop here. Explain in Part IV how the							
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b	10%-facts-and-circumstances test—2008. 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 "fac					/ how the		
	organization meets the "facts-and-circumsta						<b>&gt;</b>	
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see in	structions	<b>▶</b> [	

line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009 BOYS & GIRLS CLUB OF GREATER NASHUA 02-0460079

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

Page 4

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SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the United States ▶ Attach to Form 990.

2009.

Open to Public

Inspection

SUPPORT YOUTH DEVELO ° ⊠ Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant or assistance ∏ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete If the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 02-0460079 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (f) Method of valuation assistance assistance other) 186,428 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed & GIRLS CLUB OF GREATER NASHUA (c) IRC section if applicable m 23-7058376 CHARITABLE FOUNDATION General Information on Grants and Assistance (b) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? BOYS & GIRLS CLUB OF GREATER NASHUA NH 03060 (a) Name and address of organization or government BOYS Department of the Treasury Internal Revenue Service Name of the organization 47 GRAND AVE Part II NASHUA Part

Enter total number of other organizations

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2009

Part III

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Schedule | (Form 990) 2009 BOYS & GIRLS CLUB OF GREATER NASHUA 02-0460079

	(e) Method of valuation (book, (f) Description of non-cash assistance	al, other)				
	(e) Method of val	FMV, appraisal, other)				
	(d) Amount of	non-cash assistance				
nai space is needed	(c) Amount of	cash grant				
(Form 990) if addition	(b) Number of	recipients				
Use Part IV and Schedule I-1 (Form 990) It additional space is needed.	(a) Type of grant or assistance					

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Part IV

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE BOARD REVIEWS THE MONTHLY FINANCIAL STATEMENTS AND PROGRAMS OFFERED BY

THE CLUB ON A REGULAR BASIS. THE BOARD MEETS WITH THE EXECUTIVE DIRECTOR OF

THE CLUB.

**SCHEDULE O** 

(Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUB OF GREATER NASHUA INC., CHARITABLE FOUNDATION

Employer identification number 02 - 04 6 0 0 7 9

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE TAX RETURN IS REVIEWED BY THE PRESIDENT AND TREASURER BEFORE FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE EXECUTIVE DIRECTOR AND PRESIDENT REVIEW ALL TRANSACTIONS TO INSURE NO

CONFLICT OF INTEREST EXISTS. ANNUALLY THE EXEC DIRECTOR AND BOARD REVIEW

THE POLICY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL NO ONE RECEIVES COMPENSATION

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.