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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)

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

OMB No 1545-0047 Open to Public Inspection

AF	For th	e 2011 calendar year, or tax year beginning and ending		
	Check if applicat	ua I	D Employer identifi	cation number
	∵. TjAddr	OLD TIMERS ATHLETIC ASSOCIATION		
<u> </u>	chan	e LOF GREATER DANBURY, INC.		•
	_Name	geDoing Business As	06-1	068001
	Initial  return	Number and street (or P.O. box if mail is not delivered to street address)  Room/su	ite E Telephone numbe	ır
	Term	· 1	(203	
7	⊣ated  Amer	nded Characteristics and 71D 4	G Gross receipts \$	104265.
_ ;==	⊥returr ∏Appli	The state of the s		
L	⊥tion pend	ing.	H(a) Is this a group re	
		F Name and address of principal officer ROBERT MELILLO	for affiliates?	Yes X No
		same as C above	H(b) Are all affiliates inc	
			27 If "No," attach a	list (see instructions)
		te:▶ danburyoldtimers.com	H(c) Group exemption	n number
<u><b>K</b></u> F	orm o	forganization: X Corporation	ar of formation: 1964	A State of legal domicile: CT
Pa	art I	Summary		
4)	1	Briefly describe the organization's mission or most significant activities. TO FURTH	ER SPORTS & Y	OUTH
ဦ		ACTIVITY IN SPORTS.	<u> </u>	
Activities & Governance	2	Check this box  If the organization discontinued its operations or disposed of m	ore than 25% of its net as	ssets
Ver	l _	Number of voting members of the governing body (Part VI, line 1a)	3	10
යි	3			50
<b>ං</b> ජ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
iës	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
Ξ	6	Total number of volunteers (estimate if necessary)	6	0
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7 <u>a</u>	0.
	ь	Net unrelated business taxable income from Form 990 T, ine 34	7b	0.
		BECEIVED	Prior Year	Current Year
a)	8	Contributions and grants (Part VIII, line 1h)	2244.	690.
Revenue	9	Program service revenue (Part VIII, line 2g)  (No. investment income (Part VIII, column (A), lines 37-4 and (Not) 9 1 2017	0.	0.
ķ	10	Investment income (Part VIII, column (A), lines 37,4 and 77,dy 2 1 2017	4754.	18022.
ĕ	11	Other revenue (Part VIII, column (A), lines 5, 64, 180, 9c, 10c, and 11e)	25553.	30356.
		Total revenue · add lines 8 through 11 (must equal Part VIII, Column (A)] line 12)	32551.	49068.
	12		33725.	27300.
	13	Grants and similar amounts paid (Part IX, column (A), lines 13)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6958.	3588.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	40683.	30888.
دسا	l	Revenue less expenses Subtract line 18 from line 12	<8132.	
2012 Its or Inces			Beginning of Current Year	End of Year
anc ast	20	Total assets (Part X, line 16)	247127.	204239.
3	1		40938.	30795.
nd/h	21	Total liabilities (Part X, line 26)		
	22	Net assets or fund balances Subtract line 21 from line 20	206189.	173444.
	art II	Signature Block		
Unde	er pena	alties of perjury, I declare that I have examine or this return, including accompanying schedules and stat	ements, and to the best of m	y knowledge and belief, it is
itrue,	corre	ct, and complete. Declaration of pregarer (other than officer) is based on all information of which prepare	rer has any knowledge.	
Z		No the No the	05/	15 (8012
Sign	1	Signature of officer	Date	-
Hero	е	RICHARD LAPINE, TREASURER		
တ		Type or print name and title		
		Print/Type preparer's name Preparer's suggesture!	Date Check	PTIN
Paid		Robert R. Van Houten, CPA  Print/Type preparer's name  Robert R. Van Houten, CPA	Dat 14 12 Check of self-employ	P00623715
Prep			Firm's EIN	26-2030670
-			FILIT S CIN	40-4030070
Use	опіу	Firm's address 83 WOOSTER HEIGHTS ROAD		02 700 7000
		DANBURY, CT 06810	Phone no. 2	03-792-7800
May	the I	RS discuss this return with the preparer shown above? (see instructions)	<del></del>	X Yes No
13200	01 01-2	23-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form <b>990</b> (2011)

	OLD TIMERS ATHLETIC ASSOCIATION	-
	n 990 (2011) OF GREATER DANBURY, INC. 06-1068001	Page 2
Pa	ort,III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	
	TO FURTHER SPORTS & YOUTH ACTIVITY IN SPORTS.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to	כ
	others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 27300 • including grants of \$) (Revenue \$	)
	SCHOLARSHIPS TO AREA HIGH SCHOOL STUDENTS AND SUPPORT FOR VARIOUS	
	ATHLETIC PROGRAM NEEDS.	
4b	(Code) (Expenses \$	
	(Code / Laperises = / Note in the control of the code / Note in the code	
		<del></del>
4-		
4c	(Code) (Expenses \$) (Revenue \$)	——- <i>'</i>
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 27300.	

Form **990** (2011)

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Part JV | Checklist of Required Schedules | Form 990 (2011) | OF GREATER DANBURY, INC.

			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_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<b> </b>	_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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		х
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	_5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8		Х
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 temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	11c	X	
đ	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	11d	_	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<u>11e</u>	<del>  -</del>	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	128	<del>                                     </del>	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	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			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	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	:		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			٠,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		,,	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<del>                                     </del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		<b>.</b>
<b>^</b> -	complete Schedule G, Part III	19	<del> </del>	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	<del>                                     </del>	
<u>0</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990	2011)

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Part JV | Checklist of Required Schedules (continued)

		7	V	Na
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	1	Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2 <sup>7</sup> If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			_
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			-
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			ł
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			İ
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26_		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? 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, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
	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		_X_
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 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		A
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			<b>.</b>
~4	contributions? If "Yes," complete Schedule M	30_		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I	31		A
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	22		х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	33		
<b>J</b>	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
252	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	334		
h		1 7		X
b		35h		
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
b 36	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
36	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2	35b 36		х
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		х
36	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2			

טפפ ווווט	(2017)	OT-	GIVENTEIN	DANDOK.	<u> </u>	
Part V	Statements	Regar	rding Other I	RS Filings	anc	Tax Compliance
	Chapte of Cahad	مم آب مان	ntoine e reenen			in this Bort V

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming			
	(gambling) winnings to prize winners?		1c	_	
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	_2a0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b_		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		<u>3b</u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				v
	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 instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accounts.	F		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ation?	<u>5a</u> 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	CHOT	5c		Λ
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit	<u> SC</u>		<u> </u>
6a	any contributions that were not tax deductible?	ie organization solicit	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or aifts			
Ü	were not tax deductible?	ionis er gine	6b		ŀ
7	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 set	vices provided to the payor?	7a_		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			İ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		_7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		-
9	Sponsoring organizations maintaining donor advised funds.		92		
	Did the organization make any taxable distributions under section 4966?		9a 9b		-
_	Did the organization make a distribution to a donor, donor advisor, or related person?		_50	-	<del>                                     </del>
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
	Gross income from members or shareholders	11a			
_	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
12a	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	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		ļ
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	i i			
	organization is licensed to issue qualified health plans	13b			
_	Enter the amount of reserves on hand	13c			77
	Did the organization receive any payments for indoor tanning services during the tax year?	- 0	14a	ļ	X
<u>_b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U	14b	990	/2011\

Form 990 (2011)

OF GREATER DANBURY, INC.

06-1068001

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.

	Check if Schedule O contains a response to any question in this Part VI						
<u>Sec</u>	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		10			
	If there are material differences in voting rights among members of the governing body, or if the governing			İ			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			}			
þ	Enter the number of voting members included in line 1a, above, who are independent	_1b_		50			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other	ŀ			
	officer, director, trustee, or key employee?			ļ	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision	i			
	of officers, directors, or trustees, or key employees to a management company or other person?			ĺ	_3_		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	ļ	4		_X_
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		ļ	5		X
6	Did the organization have members or stockholders?				6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	Ì			
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or	l			
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:	l			1
a	The governing body?				8a	X	
þ	Each committee with authority to act on behalf of the governing body?			ļ	8b_	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9_		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal F	?evenu	e Code )		_		
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			ļ	10a		X
ь	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,	ł			
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	re filing the forn	12	11a	X	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990			İ			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			1	12a		X_
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to cor	flicts?		12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If *1	es," d	escribe				
	ın Schedule O how this was done				12c		
13	Did the organization have a written whistleblower policy?			ļ	13		X
14	Did the organization have a written document retention and destruction policy?			ļ	14		X
15	Did the process for determining compensation of the following persons include a review and approv	al by ir	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•					
a	The organization's CEO, Executive Director, or top management official			ļ	15a		X
þ	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 arrange	ment v	vith a				
	taxable entity during the year?			ļ	16a		Х
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	nızatıo	n's	ļ			
	exempt status with respect to such arrangements?				16b		L.,
<u>Sec</u>	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶CT						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s o	nly) a	vailab	le	
	for public inspection. Indicate how you made 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 made its governing documents, co	onflict	of interest policy	, and	l fınan	cıal	
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the orga	ınızat	on. 🕨	·	
	RICHARD LAPINE, TREASURER - 203-748-5800						
	P.O. BOX 1113, DANBURY, CT 06813-1113						

Form 990 (2011) OF GREATER DANBURY, INC. 06-1068001

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

Check if Schedule O contains a response to any question in this Part VII

# 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.
- 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, if any. 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 hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) ROBERT MELILLO											
PRESIDENT	3.00	L				L		0.	0.	0	
(2) GEORGE SHABOO					1						
VICE PRESIDENT	3.00							0.	0.	0	
(3) RICHARD LAPINE										l	
TREASURER	3.00					<u> </u>		0.	0.	0	
(4) ELLEN COOKE											
SECRETARY	3.00	L						0.	0.	0	
			l	l	l						
		<u> </u>				<u> </u>					
	1			ļ		]					
		<u>L</u> .	L.								
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				<u> </u>	<u> </u>	lacksquare					
					_	<u> </u>		<u> </u>		<del></del>	

Form	990 (2011) OF GREATE		_							06-10	68	001	P	age 8
Pai	t VII Section A. Officers, Directors, Tru		mpk	oyee			High	<u>est</u>		rees (continued)				
	(A) Name and title	(B) Average hours per week (describe	box offi	Position (do not check mo box, unless perso officer and a direct			ON ore than one on is both an		(D)  Reportable compensation from	(E) Reportable compensation from related		an	(F) stimate nount other	of
		hours for related organizations in Schedule O)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W·2/1099-MIS	C)	fr org an	pensa om th anizat d relat anizati	e ion ed
				 		_	_				_		<u></u>	
~			 				_				_	_		
				<u> </u>										
			_				_					_		
											_			
	Sub-total  Total from continuation sheets to Part VII	Section A		<u> </u>	<u> </u>		<b>&gt;</b>	L	0.		0.			0
	Total (add lines 1b and 1c)  Total number of individuals (including but no	<u> </u>	nose	liste	ed at		 e) wl	no re	0.		0.			0
	compensation from the organization			_									Yes	No.
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si	uch individual										3		Х
5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edul	e J f	or such individual		}	4	<u> </u>	X
Sec	rendered to the organization? If "Yes," comption B. Independent Contractors	plete Schedul	e J f	or s	uch j	pers	on					5		X
1	Complete this table for your five highest cor the organization Report compensation for t								the organization's tax		ensa			
	(A) Name and business	address	NC	ONE	3			4	(B) Description of s	ervices	C	ompe	c) nsatio	n
								-				.,,		
					-									
2 ——	Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot lir	nite	d to	thos	_	sted	above) who received m	nore than				

Form 990 (2011) OF GREATER DANBURY, INC. 06-1068001 Page 9
Part VIII Statement of Revenue

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ္တ		Codemand communication	- 1.1	_				313, 01 314
ant		Federated campaigns	1a					
جَ ق	b	•	1b				i	
ξĒ	C	•	1c					
<u> </u>	d	<b>.</b>	1d					
Sign	е	Government grants (contribut						
i i	f	All other contributions, gifts, gran	1 1	600				
흔히		similar amounts not included abo	ve 1f	_690.				ı
Contributions, Gifts, Grants and Other Similar Amounts	g		: 1a-1f \$		600			
O e	h	Total. Add lines 1a 1f		<b>D</b>	690.			
			!	Business Code				
5	2 a							
	b							
E	C			<del></del>				
Program Service Revenue	d							<del></del> -
۳.   ا	•	All other program service reve		<del></del>		<del> </del>	<del></del>	<del></del>
_		_Total. Add lines 2a-2f	riue					
$\neg$	<u>_</u>	Investment income (including	dividends intere	et and				
	3	other similar amounts)	dividends, intere	st, and	5447.	5447.		II
	4	Income from investment of ta	v.evemnt bond n	roceeds	34476	J=1.		
	5	Royalties	A-exempt bond p	lioceeds				
	3	noyanies	(i) Real	(ii) Personal				
	6 a	Gross rents	(i) I toai	(ii) i cisoriai				
	b	Less: rental expenses						
		Rental income or (loss)	<del></del>					
	q	Net rental income or (loss)		<b>—</b>				
	7 a		(i) Securities	(II) Other				
		assets other than inventory	39860.	30,000				
	b							
ı		and sales expenses	27285.					
	С		12575.					
1	d			<b>•</b>	12575.	12575.		
ne	8 a	Gross income from fundraisin	g events (not					
		including \$	of	1				
Other Reven		contributions reported on line						
<u>ان</u>		Part IV, line 18	a	58268.		ļ		
ξ	b	Less. direct expenses	b	27912.				
٦	С	Net income or (loss) from fund	draising events		30356.			30356.
	9 a	Gross income from gaming ac	tivities See				,	,
		Part IV, line 19	а					
- [	b	Less direct expenses	b					1
	С	Net income or (loss) from gam	ning activities	<b></b>				
	10 a	Gross sales of inventory, less	returns	1	Ì			
		and allowances	а					
l		Less cost of goods sold	b.					
ļ	c	Net income or (loss) from sale						
ļ		Miscellaneous Revenu	e	Business Code			,	
	11 a						<del></del>	
	b							<del></del>
	C	All sales a second						
	d	All other revenue						
ĺ	e 12	Total. Add lines 11a-11d  Total revenue. See instructions			49068.	18022.	0.	30356.
	. 14	TOTAL LE ACITAL. DEC HISTIACIONS			<u></u>	<u> </u>		<u></u>

06-1068001 Page 10

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)

	Check if Schedule O contains a respor	nse to any question in the	s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	15300.	15300.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	12000.	12000.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			······································	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	2236.		2236.	
g	Other				
12	Advertising and promotion	182.		182.	
13	Office expenses	613.		613.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<del></del>
19	Conferences, conventions, and meetings	557.		557.	<del></del>
20	Interest				<del></del>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			·	
23	Insurance				
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а					
b					<del>_</del>
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	30888.	27300.	3588.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)
Part X Balance Sheet

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		9441.	1	23705.
	2	Savings and temporary cash investments		477.	2	478.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	ectors, trustees, key			
		employees, and highest compensated employee		}		
		of Schedule L	·		5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c)				
		employers and sponsoring organizations of sect				
		employees' beneficiary organizations (see instru			6	
ets	7	Notes and loans receivable, net	<b>,</b>		7	
Assets	8	inventories for sale or use			8	
•	9	Prepaid expenses and deferred charges			9	
	l	Land, buildings, and equipment cost or other	1 1			
	'	basis Complete Part VI of Schedule D	10a			
	ь	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	100	236709.	11	179556.
	12	Investments - other securities See Part IV, line 1	1	250705.	12	175550.
	13	Investments - program-related See Part IV, line			13	
	14	Intangible assets	• •		14	
	15	Other assets See Part IV, line 11		500.	15	500.
	16	Total assets. Add lines 1 through 15 (must equa	al line 24)	247127.	16	204239.
	17	Accounts payable and accrued expenses	ar iii le 34)	24/12/	17	204257.
	18	Grants payable			18	
	19	Deferred revenue	40938.	19	30795.	
	20	Tax-exempt bond liabilities	40730.	20		
	21	Escrow or custodial account liability Complete F		21		
Liabilities	22	Payables to current and former officers, director		<del></del>	-21	
į	22					
Ë		highest compensated employees, and disqualific of Schedule L	ed persons Complete Part II		22	
			And the desired	<del></del>	23	
	23	Secured mortgages and notes payable to unrela	•	<del></del>	24	<del></del>
	24	Unsecured notes and loans payable to unrelated	•	<del></del>	24	
	25	Other liabilities (including federal income tax, pay			1	
		parties, and other liabilities not included on lines	17-24). Complete Part X Of		05	
	00	Schedule D		40938,	25 26	30795.
	26_	Total liabilities. Add lines 17 through 25	North committee	40930.	_26	
		Organizations that follow SFAS 117, check he	re  and complete			
Ses		lines 27 through 29, and lines 33 and 34.			07	
<u>a</u>	27	Unrestricted net assets			27	
Ва	28	Temporarily restricted net assets			28	<del></del>
pr	29	Permanently restricted net assets	<b>.</b> 🔻 .		29	
Ę		Organizations that do not follow SFAS 117, ch	neck here 🕨 🔼 and			
5 S		complete lines 30 through 34.				0
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		0.	30	0.
As	31	Paid-in or capital surplus, or land, building, or eq	· ·	0.	31	173444
Vet	32	Retained earnings, endowment, accumulated inc	come, or other funds	206189.	32	173444.
_	33	Total net assets or fund balances		206189.	33	173444.
	34	Total liabilities and net assets/fund balances		247127.	34	204239.

OLD TIMERS ATHLETIC ASSOCIATION 06-1068001 Page 12 Form 990 (2011) OF GREATER DANBURY, INC. Part XI Reconciliation of Net Assets X Check if Schedule O contains a response to any question in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 49068. 1 30888. Total expenses (must equal Part IX, column (A), line 25) 2 2 18180. 3 Revenue less expenses Subtract line 2 from line 1 3 206189. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 <50925.> 5 Other changes in net assets or fund balances (explain in Schedule O) 5 173444. Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes X Accrual Accounting method used to prepare the Form 990 Cash If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X 2b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 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 separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis X Separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit X Act and OMB Circular A-133? За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

3b

Form 990 (2011)

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

# **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**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

Name of the organization

OLD TIMERS ATHLETIC ASSOCIATION OF GREATER

DANBURY,

**Employer identification number** 06-1068001

Faiti	neasun	TO FUDIC CITAL	ity Status (Ali organiz	ations mu	st comple	te triis par	() See ms	ructions			
The organ	nization is not a	a private foundation	because it is (For lines	1 through	11, check	only one b	ox)				
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i)	١.			
2 🗀	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)							
з 🗀	A hospital or	a cooperative hospi	tal service organization o	described	in ection	170(b)(1)	(A)(iii).				
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital	l's name,
	city, and stat	e									
5 🗀	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or o	perated by	a governr	mental uni	t describi	ed in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)								
6 🗀	A federal, sta	ite, or local governm	ent or governmental unit	t described	d in sectio	n 170(b)(	1)(A)(v).				
7 🗀	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	r from the	general į	public desc	ribed in
	section 170(	(b)(1)(A)(vi). (Comple	te Part II)								
8 🗀	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)										
9 X	An organizati	on that normally rec	eives. (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ar	nd gross re	ceipts from
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment										
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975										
	See section	509(a)(2). (Complete	Part III.)								
10 🔲	An organizati	ion organized and or	perated exclusively to te	st for publ	ıc safety 🤄	See sectio	n 509(a)(4	<b>1</b> ).			
11 🔲	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or										
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that										
	describes the type of supporting organization and complete lines 11e through 11h.										
	a Type I b Type II c Type III · Functionally integrated d Type III · Other										
е 📖	By checking	this box, I certify that	it the organization is not	controlled	I directly o	r indirectly	by one or	r more disc	qualified (	persons oth	ner than
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	3(a)(1) or	section 509	9(a)(2)
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	atıtıs a Ty	pe I, Type	II, or Type	e III			
	supporting o	rganization, check th	ns box								
g	Since August	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?		
	(i) A perso	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	described i	ın (ii) and (	ii) below,	,	Yes No
	the gove	erning body of the si	upported organization?							11g(i)	
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)	
	(iii) A 35% (	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)						
		·····	<del></del>	<u>-</u>							
(i) Name	of supported	(ii) EIN	(iii) Type of			(v) Did you		(vi) Is organization	the	(vii) An	nount of
	anization	, ,	organization (described on lines 1-9		sted in your			(i) organiz U.S	ed in the		port
			above or IRC section	governing	document?	(i) of you	r support?	U.S	.?		
			(see instructions))	Yes	No	Yes	No	Yes	No		
						}		1	} }		
						<u> </u>					
					1			1			

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

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (c) 2009 (d) 2010 (e) 2011 (a) 2007 (b) 2008(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 Section B. Total Support Calendar year (or fiscal year beginning in) (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total (a) 2007 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 12 Gross receipts from related activities, etc. (see instructions) 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 Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 % 15 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. 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 - 2010. 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 - 2011. 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 - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990 EZ) 2011 OF GREATER DANBURY, INC.

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

<u></u>	qualify under the tests listed by	elow, please comple	ete Part II)		-			
_	ction A. Public Support	·						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and	1						
	membership fees received (Do not	i I						
	include any "unusual grants ")	ı		ĺ	[			
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	23619.	24732.	23466.	25553.	30356.	127726.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus-			}	ł	1		
	iness under section 513							
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities		1	1	ĺ			
	furnished by a governmental unit to				İ			
	the organization without charge							
6	Total. Add lines 1 through 5	23619.	24732.	23466.	25553.	30356.	127726.	
78	Amounts included on lines 1, 2, and				]			
	3 received from disqualified persons						0.	
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.	
c	: Add lines 7a and 7b						0.	
8	Public support (Subtract line 7c from line 6)						127726.	
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
	Amounts from line 6	23619.	24732.	23466.	25553.	30356.	127726.	
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5318.	3757.	3261.	4754.	18022.	35112.	
t	Unrelated business taxable income (less section 511 taxes) from businesses			¥ <b>=</b> 3 = 3				
	acquired after June 30, 1975							
-	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	5318.	3757.	3261.	4754.	18022.	35112.	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support (Add lines 9, 10c, 11, and 12)	28937.	28489.	26727.	30307.	48378.	162838.	
	First five years. If the Form 990 is for							
	check this box and stop here	. 3-	,	,	•	(,,,,,	▶□	
Sec	ction C. Computation of Publi	c Support Pero	centage					
	Public support percentage for 2011 (li			lumn (f))		15	78.44 %	
	Public support percentage from 2010	**	•		ī	16	86.58 %	
	etion D. Computation of Inves					10 1	00.30 %	
			<del></del>	10		42	21 56 0	
	Investment income percentage for 20	•	**	: 13, column (1))	- F	17	21.56 %	
19a	19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
b	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, check	ck this box and <b>sto</b>	p here. The organ	ization qualifies as	s a publicly suppo	rted organization	▶∐	
20	Private foundation. If the organization	n did not check a be	ox on line 14, 19a,	or 19b, check this	s box and see inst	ructions		

# **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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization OLD TI

OLD TIMERS ATHLETIC ASSOCIATION
OF GREATER DANBURY INC

Employer identification number 0.6 - 1.068001

Pa	rt I Organizations Maintaining Donor Advise		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 advised for	unds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	d only
	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	, , ,	Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part I	V, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)	
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense stat	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the o	organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	-	r Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	• •	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	service, provide the following amounts
	relating to 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 tre	•	n, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) 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> \$

_		TER DANBUR	Y, INC	·				<u>06-10</u>	<u>68001</u>	Page 2
Pai	rt III   Organizations Maintaining C	collections of A	rt, Histori	cal Tre	easures, o	r Other	Simila	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check an	y of the	following that	are a sig	nıficant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	ı 🔲 Loar	n or excl	hange prograr	ns				
b	Scholarly research	e	Othe	er						
С	Preservation for future generations			<u>—</u>						
4	Provide a description of the organization's co	ollections and explai	n how they f	further th	ne organizatio	n's exem	pt purpo	se in Par	t XIV	
5	During the year, did the organization solicit o				=					
	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the org	anizatio	n answered "	Yes" to F	orm 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Par		·							
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for cont	tribution	s or other ass	ets not in	ncluded			
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	illowing table	∍.						
	, ,		3						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 Fo	orm 990. Part X. line	212				<u> </u>		Yes	□ No
	If "Yes," explain the arrangement in Part XIV	, , a , , , , , , , , , , , , , , , , ,							3 .00	
Par		the organization an	swered "Ye	s" to Fo	rm 990, Part IV	V, line 10				
		(a) Current year	(b) Prior		(c) Two years			ears back	(e) Four y	ears back
1a	Beginning of year balance	Tay our Jour	(12) 1 (10)	,	(4)	1			14/	
	Contributions									<del></del>
	Net investment earnings, gains, and losses						<del></del>			<del></del>
	Grants or scholarships									
	Other expenditures for facilities									
Ŭ	and programs			ļ		ļ				
f	Administrative expenses				<del>-</del>					
	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1a, co	olumn (a	)) held as	I			<u> </u>	
	Board designated or quasi-endowment	one year one balanc	%	J. G. T. T. (G	,,,					
	Permanent endowment	%	<b>-</b> ~							
	Temporarily restricted endowment	% %								
C	The percentages in lines 2a, 2b, and 2c should									
32	Are there endowment funds not in the posse		ation that are	e held aı	nd administer	ed for the	organiz	ation		
Ja	by	SSIGN OF the organiza	ation that are	o noia ai	i administeri	50 151 1110	organiz	u.,	Γv	es No
	(i) unrelated organizations								3a(i)	00 110
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	: listed as required o	n Schedule	R?					3b	
4	Describe in Part XIV the intended uses of the	•							<u> </u>	
Par					<del></del>					
	Description of property	(a) Cost or o			or other	(c) Acc	umulate	d T	(d) Book	value
	bescription or property	basis (investr	,	basis (	I .	· ·	eciation	_	(4) 500%	
12	Land				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Buildings	<del></del>								
	Leasehold improvements	<del></del>	<del></del>		<del></del>					
	Equipment	<del></del>			<del></del>		<del>-</del>			
	Other	<del></del>			<del></del>				_ <del></del>	
	. Add lines 1a through 1e (Column (d) must ex	gual Form 990 Part	X. column (F	3). Ine 1	0(c).)					0.

(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua	
Financial derivatives	-			Net Value
2) Closely-held equity interests				
3) Other				
(A)				
(B)			····	
(C)				
(D)		<del></del>		<del></del>
(E) ·		<del></del>		
(F) (G)				
(H)	<del></del>	<del></del>		
(1)				
otal (Col (b) must equal Form 990, Part X, col (B) line 12.)	<b>&gt;</b>			
Part VIII Investments - Program Related	See Form 990, Part X, lir	ne 13		
(a) Description of investment type	(b) Book value	Co	<b>(c)</b> Method of valua ost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				<del></del>
(5)				
(6) (7)				
(8)			<del></del>	
(9)				
_(10)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, I		<del></del>		n N Doole value
· · · · · · · · · · · · · · · · · · ·	(a) Description			(b) Book value
(1)				
(2)	····			
(4)				
(5)				
(6)				
(8)				
(9)	···	<del></del>		<u> </u>
(10)	les 15 \			
Total. (Column (b) must equal Form 990, Part X, col (B)  Part X Other Liabilities. See Form 990, Part	X line 25	<del></del>		
(a) Description of liability	17, 1110 20	(b) Book value	1	
(1) Federal income taxes			1	
(2)				
(3)			_	
(4)				
_ (5)			-	
(6)			-	
(7)			-	
	<del></del> -		-	
( <del>9)</del> (10)	· · · · · · · · · · · · · · · · · · ·		1	
(11)		<del></del>	1	
otal. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote	line 25 )		1	
- FIN 48 (ASC 740)	te to the organization's financial st	atements that reports the organ	nization's liability for uncertain	n tax positions under
32053 1-23-12	<u></u>		Sch	edule D (Form 990) 201

OLD TIMERS ATHLETIC ASSOCIATION Schedule D (Form 990) 2011 OF GREATER DANBURY. 06-1068001 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) 1 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 5 6 Investment expenses 6 Prior period adjustments 7 7 8 Other (Describe in Part XIV) 8 Total adjustments (net) Add lines 4 through 8 a Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 2a Donated services and use of facilities 2b c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIV) e Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4b c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2¢ c Other losses 24 d Other (Describe in Part XIV.) 2e e Add lines 2a through 2d 3 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIV) c Add lines 4a and 4b 4c 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part IV, lines 1b and 2b, Part V, lines 1b and 2 X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information.

## SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

**Open To Public** 

Name of the organization

OLD TIMERS ATHLETIC ASSOCIATION

Inspection **Employer identification number** 

GREATER DANBURY, INC. 06-1068001 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ flers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply а Mail solicitations Internet and email solicitations b Solicitation of government grants Phone solicitations С Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or ∐ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid (iii) Did fundraiser have custody (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity or control of contributions? òrganization listed in col (i) Yes No **Total** 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2011 OF GREATER DANBURY, 06-1068001 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events ANNUAL ANNUAL GOLF None (add col (a) through DINNER & PROTOURNAMENT col. (c)) (total number) (event type) (event type) 1 Gross receipts 32531 25737. 58268. 2 Less Charitable contributions 32531. 25737. 58268. 3 Gross income (line 1 minus line 2) Cash prizes 5 Noncash prizes 1950. 1950. Direct Expenses 6 Rent/facility costs 8470. 8470. 15998. 15998. 7 Food and beverages 8 Entertainment 1494. 1494. Other direct expenses 27912 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Combine line 3, column (d), and line 10 30356. Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, Ine 6a (d) Total gaming (add (b) Pull tabs/instant Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes 6 Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7. 9 Enter the state(s) in which the organization operates gaming activities: Yes a is the organization licensed to operate gaming activities in each of these states? b If "No," explain ] Yes L 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain

<u>06-106</u>8001 Schedule G (Form 990 or 990-EZ) 2011 OF GREATER DANBURY, 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in a The organization's facility 13a b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name > Address 
\_\_\_\_ Yes No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party > \$ \_ c If "Yes," enter name and address of the third party Name > 16 Gaming manager information Gaming manager compensation > \$ Description of services provided Independent contractor Director/officer \_ Employee 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

132083 01-23-12

Schedule G (Form 990 or 990-EZ) 2011

OLD TIMERS ATHLETIC ASSOCIATION

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047 201 Employer identification number **≗** ∏ 06-1068001 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table OLD TIMERS ATHLETIC ASSOCIATION (c) IRC section if applicable INC. Enter total number of other organizations listed in the line 1 table OF GREATER DANBURY General Information on Grants and Assistance (**p**) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

OF GREATER DANBURY, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed

Page 2

06-1068001

rait iii cail de dupilicated ii additioliai space is riceded					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS TO VARIOUS HIGH SCHOOL SENIORS GOING ON TO POST-SECONDARY EDUCATION.	12	12000.	.0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the information	n required in Part I,	line 2, and any other	additional information	

Schedule I (Form 990) (2011)

132102 01-27-12

# SCHEDULE · O

. .

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

OLD TIMERS ATHLETIC ASSOCIATION
OF GREATER DANBURY, INC.

Employer identification number 0.6 – 1.0.6.8.0.0.1

OF GREATER DANBURY, INC.	06-106800T
Form 990, Part VI, Section B, line 11: FORM 990 IS REVIEW	
THE ORGANIZATION'S TREASURER WITH THE ENGAGED PUBLIC ACCO	OUNTING FIRM THEN
PRESENTED TO THE ENTIRE BOARD FOR IT'S CONSIDERATION & AC	CEPTANCE.
Form 990, Part VI, Section C, Line 19: ALL GOVERNING DOCU	MENTS, POLICIES,
AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC	
Form 990, Part VII Contact Addresses for Officers, Direct	ors, Etc:
ROBERT MELILLO - 6 DONNA DRIVE, NEW FAIRFIELD, CT 06811	
GEORGE SHABOO - 7 WIXON ROAD, DANBURY, CT 06811	
RICHARD LAPINE - 9 POUND SWEET HILL, BETHEL, CT 06801	
ELLEN COOKE - 38 OLD LANTERN RD., DANBURY, CT 06810	
Form 990, Part XI, line 5, Changes in Net Assets:	
Prior period adjustments:	-50925.