

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



SCANNED NOV 1 2 2013

Form **990**

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)

2012 Open to Public

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

Open to Public Inspection

	0	2012 Calendar year, or tax year beginning 3011 1, 2012 and e	nuing o	011 30, 2013				
В	Check if applicable	C.Name of organization		D Employer identific	cation number			
	Addres change Name	JOSEPH N. HERMANN YOUTH CENTER, INC.						
느	lchange	Doing Business As		04-3	264931			
]initial return	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	E Telephone number	r			
	Termin ated	PO BOX 215		978-	682-9000			
	Amend			G Gross receipts \$	539,722.			
$\overline{}$	Applica			H(a) Is this a group re				
	⊥ltiòn pendin			1	Yes X No			
		F Name and address of principal officer: CHRIS HANSON	1015	for affiliates?				
			1845	H(b) Are all affiliates inc				
		mpt status: X 501(c)(3) 501(c) () ((insert no) 4947(a)(1) oi	r 527		list. (see instructions)			
<u>J</u>	Websit	e: ▶ N/A		H(c) Group exemption				
<u>K </u>	orm of	organization X Corporation	L Year	of formation 1995 N	State of legal domicile MA			
P	art I	Summary						
	1	Briefly describe the organization's mission or most significant activities: ${ t MAINT}$	A NIA	COMMUNITY	YOUTH			
Activities & Governance		CENTER						
T.		Check this box If the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets			
Š	1		00 01 111010	3	12			
Ĝ	1	Number of voting members of the governing body (Part VI, line 1a)		F-1	12			
≪		Number of independent voting members of the governing body (Part VI, line 1b)		4	0			
ë		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5				
Ξ	1	Total number of volunteers (estimate if necessary)		6	30			
Ş	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
	Ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
				Prior Year	Current Year			
ø	8	Contributions and grants (Part VIII, line 1h)		30,732.	52,645.			
2	P	Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		9,171.	49,879.			
ď	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		69,601.	67,441.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	109,504.	169,965.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		68,583.	56,802.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
	1			0.	0.			
Ses	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)	9.	<u> </u>				
꿃	Ь		· · · · ·	0 500	0 500			
-	17 (Other expenses (Part IX, Column (A) lines Tra-110, 111-24e)	<u> </u>	8,590.	9,588.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column, (A), line 25)	<u> </u>	77,173.	66,390.			
	19	Revenue less expenses. Subtract line 48 from line 12 .		32,331.	103,575.			
58	1		Be	ginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)		549,921.	640,916.			
AS P	21	Total liabilities (Part X, line 26)		0.	<u> </u>			
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		549,921.	640,916.			
P		Signature Block	_					
Und	ler pena	ties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of my	knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi						
	, , , , , ,	Churches a stanon		10/	26/13			
Sig	n	Signature of officer		Date				
He		L CHRIS HANSON, TREASURER						
ne	re	Type or print name and title						
_				Date Check	PTIN			
ο	.	Print/Type preparer's name Preparer's signature	1	(,	— I			
Pai		JOHN M PALLONE		9/23/13 self-employe	P00063781 04-3173778			
	parer							
Use	Only	Firm's address 861 TURNPIKE STREET			070) 606 7000			
		NORTH ANDOVER, MA 01845		Phone no (978) 686-7200			
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)			Yes No			

4d Other (Expens	program service expenses 56,802.) (Revenue \$		
	-) (Revenue \$	1	
4c (Code	program services (Describe in Schedule O.)			
4c (Code				
4c (Code			· · · · · · · · · · · · · · · · · · ·	
4c (Code				
4c (Code				
4c (Code				
4c (Code			<u> </u>	
4c (Code				
) (Expenses \$ including grants of \$ _) (Revenue \$)
			· · · · · · · · · · · · · · · · · · ·	
 -				
4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
				
,		YOUTH CENTER		
revenu 4a (Code	ue, if any, for each program service reported) (Expenses \$) (Revenue \$		
Sectio	on 501(c)(3) and 501(c)(4) organizations are required to report the amo			d
	s," describe these changes on Schedule O. ribe the organization's program service accomplishments for each of it	s three largest program services, as measure	d by expenses.	
3 Did the	e organization cease conducting, or make significant changes in how	it conducts, any program services?	Yes [X No
	nor Form 990 or 990-EZ? s," describe these new services on Schedule O		L res L	₩ NO
	e organization undertake any significant program services during the	year which were not listed on	Yes	▼
	describe the organization's mission: NTAIN A COMMUNITY YOUTH CENTER			
	Check if Schedule O contains a response to any question in this Part	1(1		
Part III	Statement of Program Service Accomplishments			Page 2

Form 990 (2012)

| Part IV | Checklist of Required Schedules JOSEPH N. HERMANN YOUTH CENTER, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		.,	İ
^	If "Yes," complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			J
_	during the tax year? If "Yes," complete Schedule C, Part II	4	-	<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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_		X
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			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
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
d	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	<u> </u>	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	Х
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a	<u> </u>	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		i	v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII 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		^
b	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	441		v
	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	4-		Х
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		х
4 -	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
4.0	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	x	1
4.0	1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		х
DO:-	complete Schedule G, Part III	202		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20h		 ^

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the X United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. Х column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 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 X Schedule K If "No", go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified X 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X of any of these persons? If "Yes," complete Schedule L, Part III 27 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): X 28a a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X Part V. line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

37

Х

38

Page 5

1s Enfert the number reported in Box 3 of Form 1096, Enter 0-11 not applicable De Christ the number of Forms W-2G included in Ine 1a. Enter 0-11 not applicable Enter the number of Forms W-2G included in Ine 1a. Enter 0-11 not applicable De Christ the number of employees reported on Ine 2. Enter 0-11 not applicable Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. 1c		Check if Schedule O contains a response to any question in this Part V			
18 Enter the number reported in Box 3 of Form 1996. Enter 0-11 not applicable				Yes	No
be Enter the number of Forms W2G included in line 1a. Enter O-If not applicable Did the organization comply with backing with holding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners? 2a. Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, field for the calendary sere incling with or within the year covered by this return of If at least one is reported on line 2a, did the organization tile all required federal employment tax returns? Note. If the sum of lines 1 and 2a greater than 250, your may be required to e-this (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b. If Yes, 1 are if field a Form 990-T for this year? If No. *provide an explanation in Schedule 0 4a. At any time during the calendary year, did the organization have an interest is, or a signature or other authority over, a financial sociount in a foreign country (such as a bank account, securities account, or other financial sociount)? 3b. If Yes, 1 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 Accounts. 5c. Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c. Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible Form 88867. 5c. Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 5c. If Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or tax deductible as charitables contributions? 5c. If Yes, 1 dines face of the did the programation file form 88867. 5c. If Yes, 1 dines organization shall were not tax deductible as cha	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
De the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize withness? Enter the number of employees reported on Form W/3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. If at least one is reported on line 23, and the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions) 3a Us the organization have unrelated business gross income of \$1,000 or more dump the year? 3b If Yes, *has it filed a Form 990* To this year? If *No, *provide an explanation in Schedule O. 3b If Yes, *this it filed a Form 990* To this year? If *No, *provide an explanation in Schedule O. 3b If Yes, *this it filed a Form 990* To this year? If *No, *provide an explanation in Schedule O. 3c If Yes, *this it he name of the foreign country.* 5c Was the organization and of the foreign country.* 5c Was the organization and a party to a prohibited tax whether transaction at any time during the tax year? 5c Was the organization and the discountry.* 5c If Yes, *to line 5a or 5b, did the organization file form 8886+17 6c Does the organization have unall gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c Does the organization nearly agross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible contributions under section 170(c). 6c Did the organization exceve a payment it excess of \$15 made party is a contribution and party for goods and services provided to the payor? 6d Did the organization sell-except approved the explanation of the value of the goods or services provided? 6d Did the organization sell-except approved the donor of the value of the goods or services provided to the payor approved to the organ			1		
(agambling) winnings to prize winners? Either the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization lie all required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelated business goes income of \$1,000 or more during the year? 4b. If Yea, 1 and 1 filed a Form 990 To fir the year 11 "No," provide an explanation in Schedule O 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 accounts) 5b. If Yea, 1 and the the answer of the foreign country No. provide an explanation in Schedule O 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 accounts) 5b. If Yea, 1 and the repain of the foreign country No. provide an explanation in Schedule O 5c. If Yea, 1 to line 5a of 50, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c. If Yea, 1 did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charitable contributions? 5c. If Yea, 1 did the organization have annual gross receipts that are normally greater than \$100,000, and did the proparization solicit any contribution of the value of the goods or services provided? 5c. If Yea, 1 did the organization shell were foreign security to the contributions of understance of the foreign security of the contribution of the value of the goods or services provided? 5c. If					
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calandar year ending with or within the year covered by this return by If at least one is reported on line 2a, and the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 b. If Yes, *nas it filed a Form 990-T for this year? / 1/No.*, *provide an explanation in Schedule O 4 At any time during the calendary year, did the organization have an enterest (in or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5 b. If Yes, *nas it filed a Form 990-T for this year? If *No.*, *provide an explanation in Schedule O 5 b. If Yes, *note the name of the foreign country (such as a bank account, securities account, or other financial account)? 5 b. Was the organization apparty to a prohibited tax shelter transaction at any time during the fax year? 5 b. If Yes, *to line 5a or 5b, did the organization hat it was or is a party to a prohibited tax shelter transaction at any time during the fax year? 5 b. If Yes, *to line 5a or 5b, did the organization hat it was or is a party to a prohibited tax shelter transaction at any time during the fax year? 5 c. If Yes, *to line 5a or 5b, did the organization hat it was or is a party to a prohibited tax shelter transaction? 5 b. If Yes, *to lid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 c. If Yes, *to lid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 c. If Yes, *to lid the organization notify the donor of the value of the goods or services provided? 7 b. If Yes, *to lid the organization notify the donor of the value of the goods or services provided? 8 b. If Yes, *to lid the organ			1c]	
filed for the calendary year ending with or within the year covered by this return If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 31. If Yea, * inset if filed a Form 990 To fir this year? If * I/w. * provide an explanation in Schedule* O 32. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; or other financial account; or other financial account; or other financial account; or other financial accounts. 33. 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. ★ 33. 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 financial account. 34. At any time during the calendar year, did the organization than expression and the organization and the complex of the organization and the organization and any time during the tax year? 35. At a dark time organization and the organization than the way or is partly to a prohibited tax shelter transaction? 36. At a constitution of the organization than than the complex of the organization and the organi	2a				
bif fat least one is reported on line 2a, and the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a			4		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3	b	•	2b		
3a Did the organization have unrelated business gross mome of \$1,000 or more during the year? 4f 1*Yes,* has it filed a Form 990-Ti for this year? if "No," provide an explanation in Schedule O 4a At any time during the celeindar year, did the organization have an interest lin, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly? 5 es instructions for filing requirements for Form TDF 90/22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction of Foreign Bank and Financial Accounts. 5 Was the organization as party to a prohibited tax shelter transaction? 5 Let "Yes," to line 5a or 5b, did the organization file Form 8886-17? 6 Desite organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 Let "Yes," it did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 9 Oil the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 Let "Yes," indicate the number of Forms 8282 filed during the year 1 Let "Yes," indicate the number of Forms 8282 filed during the year 2 Let "Let Gorganization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Let "Yes," indicate the number of Forms 8282 filed during the year 1 Let "Let Gorganization in the year ortherwise dispose of tangible personal property for which it was required? 1 Let the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract? 7 Let "Yes," Indicate the number of charge filed the payment of the form 1098-07 the payment of qualified intel					
b if 'Yes,' has it filed a Form 990-T for this year? if 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, do 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, a secretic provided in the provided provided in the provided	3a		3a		Х
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)? See instructions for filing requirements for Form TD F 90/22.1, Report of Foreign Bank and Financial Accounts. Says the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 5a			3b		
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' enter the name of the foreign country: P See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 52 Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year? 53 Was the organization aparty to a prohibited tax shelfer transaction at any time during the tax year? 54 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductible as charitable contributions? 55 Uses the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 76 Organizations that may receive deductible contributions under section 170(e). 87 Uf 'Yes,' did the organization inclify the donor of the value of the goods or services provided? 78 Uf 'Yes,' indicate the number of Forms 8282 filed during the year 89 Uf the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 89 Uf the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 89 Sponsoring organizations maintaining during a distribution under section 196(a) (3) supporting organization. But he trapsing organization make any taxable distributions under section 4966? 90 Did the organization make any taxable distributions under section 4966? 91 Did the organization make any taxable distributions under section 4966? 92 Did the organization make any taxable distribution of our advised funds and section 501(e)(17) organizations. Enter: 110 Intellectual program that the manual of the property and the organization from the property and the organization from the manual section of promised from them). 112 Section 501(e)(12) qualified nonprofit health insurance issuers. 113 Section		·			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction? 5b			4a		X
See instructions for filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization aparty to a prohibited tax shelter transaction? 6 If "Yes," to line 5 ao r 5b, did the organization file Form 8886-T? 8 Does the organization are cerebrat shat are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 A X 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 10 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 10 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 10 Did the organization receive a contribution of qualified intellectual property, did the organization file a Form 1988-C? 8 Sponsoring organizations maintaining donor advised funds and section 599(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 10 Did the organization make any taxable distributions under section 4966? 11 Section 501(c)(7) organizations. Enter: 12 Intiation fees and capital contributions included on Part VIII, line 12 13 Gross receipts, included on Form 90, Part VIII, line 12 14 Gross receipts, included on Form 90, Part VIII, line 12 15 Gross receipts, included on Form 90, Part	b	· ·			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b Did any taxable party notify the organization file Form 8886-7? b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? c Organizations that may receive deductible contributions under section 170(c). b Id the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If Yes,* did the organization notify the donor of the value of the goods or services provided? C Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If Yes,* did the organization notify the donor of the value of the goods or services provided? C Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If Yes,* did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To a x X To b Id the organization receive any funds, directly or indirectly, or payment property for which it was required to file Form 8282? f If Yes,* indicate the number of Forms 8282 filed during the year b If the organization, during the year, pay premiums, directly or indirectly, or papersinal benefit contract? To the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? To a x X The organization received a contribution of cars, boats, airplanes, or other		• • • • • • • • • • • • • • • • • • • •			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 If 'Yes,' to line 5a or 5b, did the organization file Form 8867 because organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions under section 170(c). 7 Organizations that may receive deductible contributions under section 170(c). 8 Oil the organization receive a payment in excess of \$76 made party as a contribution and party for goods and services provided to the payor? 8 Oil the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 8 Oil the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 9 Oil the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Oil the organization received a contribution of qualified intellectual property, did the organization file Form 1996-07. 10 Oil the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1996-07. 11 Oil the organization maintaining donor advised funds. 12 Oil the organization make an distribution under section 4966? 13 Oil the organization make an distribution under section 4966? 14 Oil the organization make an distribution under section 4966? 15 Oil the organization make an distribution under section 4966? 16 Oil the organization make an distribution under section 4966? 17 Oil the organization make an distribution under section 4966? 18 Oil the organization make an distribution under section 4966? 19 Oil the organization make an distribution under section 4966? 19 Oil the org	5a		5a		X
c If Yes,* to line 5a or 5b, did the organization file Form 8886-7? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductible as charitable contributions? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). b If Yes,* did the organization notify the donor of the value of the goods or services provided? C Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 A X 8 If Yes,* did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If Yes,* indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 If W X 9 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 10 If the organization received a contribution of qualified intellectual property, did the organization. Be Form 1096-C7 8 Sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. 10 Did the organization make any taxable distributions under section 4966? 20 Did the organization make any taxable distributions under section 4966? 30 Did the organization make any taxable distributions under section 4966? 31 Did the organization make any taxable distributions under section 4966? 32 Did the organization make any taxable distributions under section 4966? 33 Did the organization of the form 1000 property of the	ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
any contributions that were not tax deductible as charitable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(e). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 to X 1 if the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 to X 9 if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 8 Sponsoring organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 8 Sponsoring organization make any taxable distributions of any selection 509(a)(3) supporting organizations. Did the supporting organizations in a divised funds and settlion 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? D off the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a intuition fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 900. Part VIII, line 12 Gross income from other sources (D on the tamounts due or paid to other sources against amounts due or received from them.) 10 b If "Yes," enter the amount o			5c		
any contributions that were not tax deductible as charitable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(e). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 to X 1 if the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 to X 9 if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 8 Sponsoring organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 8 Sponsoring organization make any taxable distributions of any selection 509(a)(3) supporting organizations. Did the supporting organizations in a divised funds and settlion 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? D off the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a intuition fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 900. Part VIII, line 12 Gross income from other sources (D on the tamounts due or paid to other sources against amounts due or received from them.) 10 b If "Yes," enter the amount o	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 If "Yes," cid the organization notify the donor of the value of the goods or services provided? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year 10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 12 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 13 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 14 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 15 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 16 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 17 If X X 18 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 18 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations and property or a donor advised funds. 19 Did the organization make any taxable distributions under section 4966? 10 Did the organization make a distribution to a donor, donor advisor, or related person? 11 Did the organization from members or shareholders 12 Did the organization from members or sharehol			6a		X
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 If "Yes," cid the organization notify the donor of the value of the goods or services provided? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year 10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 12 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 13 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 14 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 15 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 16 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 17 If X X 18 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 18 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations and property or a donor advised funds. 19 Did the organization make any taxable distributions under section 4966? 10 Did the organization make a distribution to a donor, donor advisor, or related person? 11 Did the organization from members or shareholders 12 Did the organization from members or sharehol	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a			6b		<u> </u>
b If Yes,* did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If Yes,* indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7	7	Organizations that may receive deductible contributions under section 170(c).			
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If 'Yes,' indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 Sponsoring organizations maintaining donor advised funds and section 509[a](3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations make any taxable distribution under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders Gross income from derive sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year Section 4947(a)(1) non-exempt charitable trusts. Is the organization in filing Form 990 in lieu of Form 1041? If 'Yes,' enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves on hand Lida Did	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
to file Form 8282? d if 'Yes,' indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organization maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization. Nave excess business holdings at any time during the year? Sponsoring organization make an distributions under section 4966? 9a Did the organization make an distribution to a donor, donor adviser, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part Vill, line 12 b Gross receipts, included on Form 990, Part Vill, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: a 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? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Gross receipts, included on Form 990, Part Vill, line 12 a Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves on hand 13a Let the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations make a distribution sunder section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a 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 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.) 11a 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X		to file Form 8282?	7c		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a 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 Section 501(c)(12) organizations. Enter: a 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.) 11a 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If Yes, enter the amount of tax-exempt interest received or accrued during the year 11b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand		1 Too, indicate the number of remine seed more during the year.	4		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a 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 10b 11s 11s 10b 11s 12s 10b 11s 12s 10b 11s 12s 10b 11s 1	е			 	
h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a 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 11a 12a 13a 13a 13a 13b 13b 13c 14a X				ļ	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a 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 10 Section 501(c)(12) organizations. Enter: a 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.) 11 a				 	
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a 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 11 Section 501(c)(12) organizations. Enter: a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves any payments for indoor tanning services during the tax year? 14a X	h		7h		X
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Intitation 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 Section 501(c)(12) organizations. Enter: a 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.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13a X	8				1
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a 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 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from members or shareholders c Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a Section 501(c)(29) qualified nonprofit health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X			8		
b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a 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 Section 501(c)(12) organizations. Enter: a 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.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a X	9	•			
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 Section 501(c)(12) organizations. Enter: a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c X		·			
a 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 Section 501(c)(12) organizations. Enter: a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X			96		
b Gross receipts, included on Form 990, Part Vill, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X	10			1	
a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 13a 14a X			1		
a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X			┪		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a Is the organization is licensed to issue qualified health plans 13b Is the organization is licensed to issue qualified health plans 13b Is the organization receive any payments for indoor tanning services during the tax year?			İ		
amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X			1		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X	D				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X	120		122	ĺ	1
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X		1 . 1			-
a Is the organization licensed to issue qualified health plans in more than one state? 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X		The state of the s	1		
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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X			13a	1	<u> </u>
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X	a		······		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?	h				
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?	U	·	1		
14a Did the organization receive any payments for indoor tanning services during the tax year?	^		1		
the big the digatization received the payments for the big the			14a		X

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			X
Sec	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 12			
	If there are material differences in voting rights among members of the governing body, or if the governing	[
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			.,
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_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 appoint one or	_		v
	more members of the governing body?	7a		<u>X</u> _
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		v	
_	The governing body?	8a	X	
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 at the			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		\ <u></u>	A 1.
40-	Dulah ang isaha dan dan dan dan dan dan dan dan dan da	100	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
_	· · · · · · · · · · · · · · · · · · ·	12a	х	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and 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		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 arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncıal	
	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 and records of the organization	tion: 🕨	<u> </u>	
	CHRIS HANSON - 978-682-9000			
	84 SUGARCANE LANE, NORTH ANDOVER, MA 01845			

_			
	$\Delta \Delta \Delta$	/00 4	\sim
Form	990	(201)	2)

JOSEPH N. HERMANN YOUTH CENTER, INC.

04-3264931

Page 7

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.

X Check this box if neither the organization no	or any related	orga	anıza	ation	cor	npe	nsat	ed any current officer,	director, or trustee.	
(A) Name and Title	(B) Average hours per week	(do	not c	Positive per per per per per per per per per pe	C) ItION more	than	one han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)		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) SEE ATTACHED LISTING								0	. 0.	0.
			:			<u> </u> 		·		
		-				-				
		-	-	-						
		-		-	-	-				
		-	-				-			
			_	-	-					
						-				
		-			-	_	-		 	
			-		-	 			 	
		-	_	-	-		-		<u> </u>	

i ar	t VII Section A. Officers, Directors, Trus		ploy	ees/			gne	st C					, pro	
	(A)	(B) Average	(C) Position					(D)	(E)		F.	(F)	\ al	
	Name and title	hours per			heck	more	than is bot		Reportable compensation	Reportable compensation	,	Estimated amount of		-
		week	offi				or/trus		from	from related			other	٠.
		(list any hours for	director		[the	organization			pensa	
		related	l a	B		ļ	Safed		organization (W-2/1099-MISC)	(W-2/1099-MIS	SC)		om th	
		organizations	trustee	al tros		8	Highest compensate employee	ł	(44-2/1099-141130)		ľ	-	anızat d relat	
		below	Individual	Institutional	颖	Key employee	o st	P					ınızatı	
		line)	를	豎) Egg	ş.	₹5	횬						
											l			
		-	ļ	<u> </u>	├		-			<u> </u>				
			ł											
		 	-		-	-	\vdash		 					
			1											
			1											
			1		l	ľ	l	Ì	1					
					ļ		_	<u> </u>				··		
			ł	1	1	İ		l	İ					
		-	-	├-	₩	 	-	-		-				
			ł]		İ		Ì						
			-	T		\vdash	-							
				<u> </u>			<u> </u>							
										_				
		<u> </u>	L_	<u> </u>	L	i	<u> </u>	<u> </u>						
	Sub-total .								0.		0.			0.
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
2	Total (add lines 1b and 1c) Total number of individuals (including but i	not limited to th					2) 14/			000 of reportab				<u> </u>
2	compensation from the organization	iot iii iiitea to ti	1056	เมอเง	o a	OOV	5) WI	10 11	eceived more man wroc	1,000 or reportab	10			0
	compensation non-tho-organization												Yes	No
3	Did the organization list any former officer	, director, or tri	uste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for	such individual										3	.,,	X
4	For any individual listed on line 1a, is the s	•								the organization		ĺ		
	and related organizations greater than \$15											4		X
5	Did any person listed on line 1a receive or	· · · · · · · · · · · · · · · · · · ·						elat	ted organization or indivi	dual for services		_		х
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	nplete Schedul	<u>e J 1</u>	or s	uch	pers	son					5_		
1	Complete this table for your five highest or	mpensated in	den	ende	ent c	ontr	racto	ors t	hat received more than	\$100,000 of con	pens	ation fi	rom	
	the organization. Report compensation for													
	(A)								(B)			(0		-
	Name and business	address	N	<u>I</u>	Ε				Description of s	ervices	C	omper	nsatio	n
								- 1						
								-						
								-						
								_						
			-		*****		-	П						
											····-			
2	Total number of independent contractors (ot li	mite	d to		se li: O	sted	apove) who received m	ore than				
	\$100,000 of compensation from the organ	ization 🚩					<u>-</u>					Form	990 (20121
													1	

232008 12-10-12

Form 990 (2012)

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under sections 512, 513, or 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 10 d Related organizations **1d** 1e e Government grants (contributions) f All other contributions, gifts, grants, and 52,645. similar amounts not included above Noncash contributions included in lines 1a-1f \$ 52,645. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 9,462. 9,462. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other 403,466. assets other than inventory b Less: cost or other basis 363,049. and sales expenses 40,417. c Gain or (loss) 40,417. 40,417. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 74,149. 6,708. Part IV, line 18 b Less: direct expenses 67,441. 67,441. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue e Total. Add lines 11a-11d 0. 76,903. 169,965. 40,417. Total revenue. See instructions

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	nse to any question in th	is 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	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	56,802.	56,802.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the		į		
	United States. See Part IV, lines 15 and 16				1111 b 111 111 111
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 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	1,500.		1,500.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees			. <u></u> <u>-</u>	
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion .	226.		226.	
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	1,170.		1,170.	
23	Insurance	1,170.		1,170.	
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 O)				
а	INVESTMENT FEES	4,364.		4,364.	
ь	POSTAGE, PRINTING, SHIP	1,105.		186.	919.
c	BANK & CREDIT CARD CHAR	858.		858.	
d	SUPPLIES	280.		280.	
e	All other expenses	85.		85.	
25	Total functional expenses. Add lines 1 through 24e	66,390.	56,802.	8,669.	919.
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 I if following SOP 98-2 (ASC 958-720)				

Check if Schedule O contains a response to any question in this Part X Beginning of year End of year 110,323. 131,113. Cash - non-interest-bearing 73,363. 43,527. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 457,230. 375,281. Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 549,921. 640,916. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties. 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 0. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here **X** and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 640,916. 549,921. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 549,921 640,916. 33 33 Total net assets or fund balances 549,921 640,916. Total liabilities and net assets/fund balances

	990 (2012) JOSEPH N. HERMANN YOUTH CENTER, INC.	<u> 04-326</u>	<u>4931</u>	Page	e 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			[
	Tatalana (1991)	ا م	160	9,96	: 5
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,39	
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,57	
3	Revenue less expenses. Subtract line 2 from line 1	3		$\frac{3}{1}, \frac{3}{9}$	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,58	
5	Net unrealized gains (losses) on investments	5	<u> </u>	2,30	-
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	İ			_
	column (B))	10	640	91	.6 •
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			,	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	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 Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		
			Form	990 (2	2012)

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

2012

Open to Public Inspection

lame of t	he organizat	ion						E	mployer	identificati	on nu	mber
_		JOSEPH	N. HERMANN Y	OUTH	CENTE	R, IN	C.		0	4-3264	931	
Part I	Reason		rity Status (All organiz					tructions.				
he organ			because it is: (For lines									
1			es, or association of chur					١.				
2			70(b)(1)(A)(ii). (Attach Sc				\ - /(-/(-/	,-				
3			ital service organization			170/b\/1\	(Δ) (iii)					
4 =			operated in conjunction					(h)(1)(A)(i	ii) Foter	the hospital	's nam	<u> </u>
-	city, and stat		operated in conjunction	With a nos	pha ococi		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(6)(1)(5)(ine neopital	Jilaii	ιο,
5 🗀	•		benefit of a college or ur	niversity o	wned or or	parated by	/ a govern	mental un	ıt describ	ad in		
•	=	•	=	iliversity o	when or or	related by	a governi	nientai un	ii describ	Jed III		
•		(b)(1)(A)(iv). (Compl		.مطسمحمله	dia aastis	470(L\/·	41/A1/1					
6		•	nent or governmental uni							محمله مناطنيم	، استمارس	_
<i>'</i>	-	•	ceives a substantial part	or its supp	on nom a	governme	entai unit c	ar irom me	general	public desc	noed i	11
• [(b)(1)(A)(vi). (Comple		(0	D 4 II)							
8 🖳	-		section 170(b)(1)(A)(vi).				d					
9 X	_	-	ceives: (1) more than 33									
		•	nctions - subject to certa									
			taxable income (less sect	tion 511 ta	ix) from bu	sinesses a	acquired b	y the orga	anization	aπer June 3	0, 197	5.
		509(a)(2). (Complet					***					
10			perated exclusively to te									
11 📖			perated exclusively for the									or
			ations described in secti				2). See se c	ction anal	a)(s). On	eck the box	mai	
			organization and compl				1		. 111 - 61-	. 6		
	a Type		• •	-	nctionally i			- •		n-functional		
e			at the organization is not									n
_			than one or more publicly						9(a)(1) or	section 509	(a)(2).	
f	_		tten determination from t	the IRS tha	atitis a Ty	pe I, Type	II, or Type	9 111				_
		rganization, check t		_	•							
g	-		organization accepted ar	-							<u> </u>	
			directly controls, either al	lone or tog	ether with	persons of	described	in (II) and ((III) below	I	Yes	No
	-		supported organization?							11g(i)	 	
	•	•	n described in (i) above?				•			11g(ii)		
		•	a person described in (i) o					-		11g(iii)	L	L
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
				,				4.13.4	41 .			
(i) Name	of supported	(ii) EIN	1 (m) Type or organization		organization			(vi) Is organizati	s the on in col	(vli) Amount	of moi	netary
orga	inization		(described on lines 1-9 above or IRC section		sted in your document?			(i) organiz U S	zed in the i	sup	port	
			(see instructions))							ļ		
			<u> </u>	Yes	No	Yes	No	Yes	No	<u></u>		
							1					
							 	<u> </u>	-			
				1				ļ	}			
			 	-	<u> </u>		 					
				1				ł	1			
					 			 	 			
								1	1			
		 	 	 	 		 	 	 	 		
		1		1								
				ļ	ļ		 	 	 	 -		
		1	1	1			1	1				

Section A. Public Support	he tests listed below, ple					
Calendar year (or fiscal year beginnin		(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, a		(6) 2009	(6) 2010	(0) 2011	(e) 2012	(i) Total
membership fees received. (D						
include any "unusual grants "	§			1		
2 Tax revenues levied for the or	·	 				
ization's benefit and either pa	-	ļ]	j		
or expended on its behalf						
3 The value of services or facilit	ies	<u> </u>				
furnished by a governmental	· · · · · · · · · · · · · · · · · · ·		[
the organization without char	ge					
4 Total. Add lines 1 through 3						
5 The portion of total contribution	ons					
by each person (other than a						
governmental unit or publicly						
supported organization) include	ded					
on line 1 that exceeds 2% of	the					
amount shown on line 11,						
column (f)	112-1111-1111-1111-1111-1111-1111-1111-1111					
6 Public support. Subtract line 5 fro	om line 4					
Section B. Total Support		·				
Calendar year (or fiscal year beginnin	g in) (a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received	i on				1	
securities loans, rents, royaltic	es					
and income from similar source	ces	ļ	ļ			
9 Net income from unrelated but	rsiness					
activities, whether or not the						
business is regularly carried o	on				 	
10 Other income. Do not include	•					
or loss from the sale of capita	d (İ		
assets (Explain in Part IV.)						
11 Total support. Add lines 7 thro	-	1	<u> </u>	L		
12 Gross receipts from related a					12	
13 First five years. If the Form 9		's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	_
organization, check this box a Section C. Computation o		rcontage	<u> </u>			
			l (f)		14	9
14 Public support percentage for	• • • • • • • • • • • • • • • • • • • •	-	column (I))		15	
15 Public support percentage fro16a 33 1/3% support test - 2012			in line 13 and line	14 is 33 1/3% or	L	
stop here. The organization of				14 15 33 1/3 /0 01	more, check this be	
b 33 1/3% support test - 2011		-		t line 15 is 33 1/3	% or more check th	us box
and stop here. The organizat				3 III 13 13 03 170	70 Of THOIR, CHECK II	▶ □
17a 10% -facts-and-circumstan	•			e 13-16a or 16b	and line 14 is 10%	or more
and if the organization meets						
meets the "facts-and-circums					II IIO III IIIO OIGAI	▶
		•			17a, and line 15 is	10% or
b 10% -facts-and-circumstan more, and if the organization						

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

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

90	tion A. Public Support	elow, please comp	lete Part II.)				
		(-) 0000	#1 0000	(-) 0040	(-0.0014	(-) 0040	10 T 1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(1) Total
1	Gifts, grants, contributions, and		j	J			
	membership fees received. (Do not	68,379.	96,944.	67,279.	30,732.	52,645.	315,979.
	include any "unusual grants.")	00,319.	90,944.	01,219.	30,732.	32,643.	313,979.
2	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						
3	Gross receipts from activities that	1			,	!	
	are not an unrelated trade or bus- 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						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	68,379.	96,944.	67,279.	30,732.	52,645.	315,979.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received				·		0.
	rom 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)						315,979.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	68,379.	96,944.	67,279.	30,732.	52,645.	315,979.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,704.	4,746.	2,026.	9,171.	49,879.	72,526.
b	Unrelated business taxable income				-		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	ĺ	1	i			:
	Add lines 10a and 10b	6,704.	4,746.	2,026.	9,171.	49,879.	72,526.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		·				
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)	75,083.	101,690.	69,305.	39,903.	102,524.	388,505.
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organız	ation,
Sa	check this box and stop here ction C. Computation of Publ	ic Support Par	centage				
	Public support percentage for 2012 (olumo (fl)		15	81.33 %
			-	31011111 (1))	••		00 65
16 Public support percentage from 2011 Schedule A, Part III, line 15							
	Investment income percentage for 20			a 13 column (fl)		17	18.67 %
	Investment income percentage from 2	•		e 10, column (1))		18	9.35 %
	33 1/3% support tests - 2012. If the			n line 14, and line	 15 is more than 3	:	
	more than 33 1/3%, check this box a	nd stop here. Th e	organization qualit	ies as a publicly si	upported organiza	ation	$\triangleright X$
b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organization	n did not check a t	oox on line 14, 19a	, or 19b, check thi	s box and see ins	tructions	<u> </u>

10 🔞

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service 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.

OMB No 1545-0047

2012

Open To Public Inspection

JOSEPH 1	N. HERMANN YOUTH C	ENT	ER,	INC.	04-3264	931
	Complete if the organization answe					
 Indicate whether the organization raise a Mail solicitations Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, Pablif "Yes," list the ten highest paid individual compensated at least \$5,000 by the experience. 	e Solicitat f Solicitat g Special r oral agreement with any individual art VII) or entity in connection with prividuals or entities (fundraisers) pursu	ion of ion of fundra (includ	non-g gover using o ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	Yes	 -
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			-			
otal			•			
List all states in which the organization or licensing.	n is registered or licensed to solicit of	contrib	utions	s or has been notified	it is exempt from r	egistration
						_

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 WALK FOR NONE (add col. (a) through SPRING EVENTYOUTH col. (c)) (event type) (total number) (event type) 68,194. 5,955. 74,149. Gross receipts 2 Less: Contributions 74,149. 68,194. 5,955. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs 2,089. 2,089. Food and beverages 8 Entertainment 4,619. 4,619. Other direct expenses 6,708, 10 Direct expense summary. Add lines 4 through 9 in column (d) 67,441. 11 Net income summary. Combine line 3, column (d), and line 10 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, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes % % Yes No 6 Volunteer labor 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 No a is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: ___

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

Schedule G (Form 990 or 990-EZ) 2012 JOSEPH N. HERMANN YOUTH CENTER, INC.

Sch	edule G (Form 990 or 990-EZ) 2012 JOSEPH N. HERMANN YOUTH CENTER, INC. 04-	3264931	l Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	☐ No
	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?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in:		
а	The organization's facility	13a	9/
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
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 ▶		
	Address ►		
16	Gaming manager information:		
	Name ▶		
	Traine P		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	s the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
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 ▶ \$		
Pa	Irt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii		
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see instru	ctions).
			·
			<u></u>
			

232083 01-07-13

Schedule G (Form 990 or 990-EZ) 2012

SCHEDULE 1 (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.

OMB No 1545-0047

Open to Public Inspection

per 1

Name of the organization							Employer identification number
JOSEPH N. HERMANN YOUTH	HERMANN		CENTER, INC.				04-3264931
Part i General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	States.			
Part # 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	Governments and	Organizations in the	United States. C	omplete if the orga	nization answered "Y	'es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part il can be duplicated if additional space is needed.	\$5,000. Part II can	be duplicated if additive	onal space is need	led.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOWN OF NORTH ANDOVER				_			YOUTH CENTER
120 MAIN STREET							SCHOLARSHIPS, SUPPORT AND
NORTH ANDOVER MA 01845	04-6001245		56,802.	.0			IMPROVEMENTS

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) Page 2 (f) Description of non-cash assistance 04-3264931 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (book, FMV, appraisal, other) 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. (d) Amount of non-cash assistance JOSEPH N. HERMANN YOUTH CENTER, INC. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2012)

Part III Grants and Other 232102 12-18-12

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization JOSEPH N. HERMANN YOUTH CENTER, INC.	Employer identification number 04-3264931
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS RE	VIEWED BY THE
BOARD OF DIRECTORS BEFORE FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: ORGANIZATION REVI	EWS AND UPDATES
CONFLICT OF INTEREST POLICY ANNUALLY.	
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUME	MENTS, CONFLICT
OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE	UPON REQUEST.
	·

JOSEPH N HERMANN YOUTH CENTER, INC. BOARD OF DIRECTORS 2013

NAME ADDRESS

ERIC EISENBERG 225 CARLTON LANE

NORTH ANDOVER, MA 01845

DON ROMANO 18 BUCKINGHAM ROAD NORTH ANDOVER, MA 01845

NORTH ANDOVER, WA OTO-

DAVID SHARP 71 WINTERGREEN ROAD (Secretary) NORTH ANDOVER, MA 01845

BILL MASTERSON 22 FULLER ROAD

NORTH ANDOVER, MA 01845

SUSAN LUCY 42 WINDKIST FARM ROAD

NORTH ANDOVER, MA 01845

RICK GREEN 357 REA STREET

NORTH ANDOVER, MA 01845

JAY CAPORALE 336 CHESTNUT ST.

(President) NORTH ANDOVER, MA 01845

FRANK KENNEALLY 56 SURREY DRIVE

(Vice President) NORTH ANDOVER, MA 01845

LORI HOWE 92 MOODY STREET

NORTH ANDOVER, MA 01845

JEANNE CARON 20 MIDDLESEX ST.

NORTH ANDOVER, MA 01845

KEN CONNOLLY 357 CANDLSTICK ROAD

NORTH ANDOVER, MA 01845

CHRIS HANSON 84 SUGARCANE LANE

(Treasurer) NORTH ANDOVER, MA 01845