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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2014

OMB No 1545-1150

Open to Public
Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

For the 2014 calendar year, or tax year beginning and ending Check if applicable D Employer identification number C Name of organization Address change 30-0428217 MANCHESTER MARATHON ASSOCIATION Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number Room/surte Initial return Final return/ terminated 603-490-0335 P.O. BOX 933 City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return MANCHESTER, NH 03105 Number ▶ X Accrual Other (specify) ▶ Cash Accounting Method H Check ► _____ if the organization is Website: ► WWW.MANCHESTERCITYMARATHON.COM not required to attach Schedule B Tax-exempt status (check only one) - \times 501(c)(3) \longrightarrow 501(c) () ◀ (insert no) L 4947(a)(1) or (Form 990, 990-EZ, or 990-PF) K Form of organization Corporation Trust X Association Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, 145,464. column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Part | Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I 43,099. 1 Contributions, gifts, grants, and similar amounts received 1 94,426. 2 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 5. SEE SCHEDULE O 4 4 Investment income 5a Gross amount from sale of assets other than inventory 5a b Less cost or other basis and sales expenses 5b c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than SCANNED JUN 1 8-2015 6a **b** Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such 7,125. gross income and contributions exceeds \$15,000) 6b c Less direct expenses from gaming and fundraising events 7,125. Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 809 Gross sales of inventory, less returns and allowances 7a 2,126. SEE SCHEDULE O 7b b Less cost of goods sold <1,317.> c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Other revenue (describe in Schedule O) 143,338. 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 SEE SCHEDULE 10,000. O 10 Grants and similar amounts paid (list in Schedule O) 10 11 11 Benefits paid to or for members 12 12 Salaries, other compensation, and employee benefits MAY 2 1 2015 1,970. 13 Professional fees and other payments to independent contractors 13 18,180. 14 14 Occupancy, rent, utilities, and maintenance OGDEN. UT 2,414. 15 15 Printing, publications, postage, and shipping 122,531.SEE SCHEDULE O 16 16 Other expenses (describe in Schedule O) 155,095. 17 17 Total expenses. Add lines 10 through 16 <11,757.> 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) 12,144. (must agree with end-of-year figure reported on prior year's return) 19 20 Other changes in net assets or fund balances (explain in Schedule O) 387. 21 Net assets or fund balances at end of year Combine lines 18 through 20 Form **990-EZ** (2014) LHA For Paperwork Reduction Act Notice, see the separate instructions.

	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes", provide a detailed description of each activity in Schedule 0.0 Were any significant changes made to the organization of controlled organization of the organization of the organization of the organization of the organization is do a form of the organization is do a form of the organization have unrelated business gross income of \$1,000 or more during the year from business cuttives (such as those reported on files 2, 6, a, and 7, among others)? If "Yes" to law is 5s, his the organization filed a Form \$90.1 for the year? If "No," provide an explanation in Schedule 0. Was the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on files 2, 6, a, and 7, among others)? If "Yes to law is 5s, his the organization filed a Form \$90.1 for the year? If "No," provide an explanation in Schedule 0. Was the organization a section \$01(c)(4), \$01(c)(5), c) of \$01(c)(6) organization subject to section \$03(e) of the year? If "Yes." complete Schedule (6, part II in the province) of the organization of the year? If "Yes." complete Schedule (6, part II in the organization of the org	re	instructions for Part V) Check if the organization used Sch. O to respond to any question in the			X
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34 Were any significant changes made to the organization's name Otherwise, explain the change on Schedule O (see instructions) 355 Dot the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on line 2, 69, and 73, among others)? 16 If Yes' to line 35, has the organization field a Form 990-T for the year? If 'No, 'provide an explanation in Schedule O 16 Was the organization action 501c(yl4), 501c(yl5), or 501c(yl6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes, 'compliets Schedule, C. Part III 17 Enter amount of political expenditures, direct or indirect, as described in the instructions 18 Dot the organization in derivation of this year? 18 Dot the organization bis parts of Schedule Schedule, C. Part III 18 Enter amount of political expenditures, direct or indirect, as described in the instructions 19 Dot the organization bis parts of Schedule Schedule, C. Part III 19 Dot the organization bis parts of Schedule Schedule, C. Part III 19 Dot the organization bis parts of Schedule Schedule, C. Part III 19 Dot the organization bis parts of Schedule Schedule, C. Part III 10 Dot the organization in the schedule Schedule, C. Part III 10 Dot the organization in the schedule Schedule, C. Part III 11 Dot the organization in the schedule Schedule, C. Part III 12 Dot the organization schedule on the organization during the year under section 591c(y) organizations. Enter amount of tax imposed on the organization during the year of the schedule Schedule, C. Part III 12 Dot the organization schedule organization organization appears in any section 4938 secess benefit transaction organization. Schedule Schedule, C. Part III 13 Dot the schedule, C. Part III Schedule Schedule, C. Part III 14 Dot the states with which a copy of this return is filed. P.NH 15 Dot Schedule Schedule, C. Part III 16 Dot the schedule Schedule, C. Part III 17 Dot Schedule Schedule, C. Part	Were any spindcant changes made to the organization is among the deciments of the profit cal change to the organization is among deciments of the prefet cal change to the organization is among deciments of the prefet cal change to the organization is among deciments. Profit cal change to the organization have unselected besiness gross income of \$1,000 or more during the year of the call of the organization have unselected besiness gross income of \$1,000 or more during the year of the call of	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each			
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158 D Mit en organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among othersity? 15 If Yes' to line 35a, has the organization filed a Form 990-T for the year'? If Yio,* provide an explanation in Schedule 0 15 Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6, and 2 among others)? If "Yes" to line 35a, his the organization filed a Form 990-T for the year? If "No, provide an explanation in Schedule 0 Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6), or 501(c)(6). But the comparison of the year? If "Yes, complete Schedule C, Part II Dut the organization of heyers? If "Yes, complete Schedule C, Part II Dut the organization of political expenditures, direct or indirect, as described in the instructions Dut the organization in Ferm 1120-PLO for this year? Dut the organization berrow throm, or make any loans to, any officer, director, finistee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes, complete Schedule I, Part II and enter the total amount moveled Section 501(c)(7) organizations Enter indiation there and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on li	34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			
on files 2, 6a, and 7a, among others)? If Yes's to line 35a, has the organization filed a Form 990-T for the year? If No, provide an explanation in Schedule 0 If Yes's to line 35a, has the organization assetion 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(e) include, reporting, and proxy tax requirements during the year? If Yes', complete Schedule C, Part III By Children organization organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of pollucial expenditures, direct or indirect, as described in the instructions Did the organization of the Form 1120-POL for this year? Did the organization of the Form 1120-POL for this year? Did the organization of the Form 1120-POL for this year? Did the organization of the Form 1120-POL for this year? Did the organization of the Form 1120-POL for this year? Did the organization of the Form 1120-POL for public use of club facilities Did the organization of the Form 1120-POL for public use of club facilities Did the organization of the Form 1120-POL for public use of club facilities Did the organization of the Form 1120-POL for public use of club facilities Did the organization of the Form 1120-POL for public use of club facilities Did the organization of the Form 1120-POL for public use of club facilities of the organization of the organization of the public of the organizati	on lines 2, 6a, and 7a, among others)? If 'Ne's I bine 36, has the organization filed a Form 990-T for the year? If 'No', provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III and the organization undergo a highdoid, dissolution, for immation, or significant disposition of net assets during the year? If 'Yes,' complete Schedule S, decide or indirect, as described in the instructions If 'Yes,' complete Schedule L, Part II and enter the lotal amount involved If 'Yes, complete Schedule L, Part II and enter the lotal amount involved If 'Yes, complete Schedule L, Part II and enter the lotal amount involved Section 501(c)(7) organizations Enter amount of tax miposed on the organization during the year under section 4911 by ; section 4912 by ; section 591(c)(3), 591(c)(4), and 591(c)(29) organizations Enter amount of tax imposed on organization during the year, or did it diagoge in an excess benefit transaction of any organization of the properties of the section 4912 by ; section 4912 by ; section 4912 by ; section 591(c)(3), 591(c)(4), and 591(c)(29) organizations Enter amount of tax imposed on organization and the section 4912 by ; section 4912 by ; section 591(c)(3), 591(c)(4), and 591(c)(29) organizations Enter amount of tax imposed on organization and the section and the section 4912 by a under sections 4912, 4955, and 4958 Section 591(c)(3), 591(c)(4), and 591(c)(29) organizations Enter amount of tax imposed on organization and the section 4912 by		documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		X
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18 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 178 Enter amount of political expenditures, direct or indirect, as described in the instructions 189 Did the organization of Form 1120-P01 for this year? 180 Did the organization before from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 180 If "Yes," complete Schedule L, Part II and enter the total amount involved 180 Section 501 (c)(?) organizations Enter 180 Interest of the section 4911 ► 0. • section 4912 ► 0. • section 4911 ► 0.	Dut the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spring a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule N. Part I into make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return? If Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter intitation fees and capital contributions included on line 9 Gross recepts, included on line 9, for public use of club facilities Section 501(c)(3), organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0. section 4912 ▶ 0. section 4915 ▶ 0. section 501(c)(3), 501(c)(4), and 501(c)(29) organizations but the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year of did it engage in an excess benefit transaction during the year of did it engage in an excess benefit transaction of the organization during the year under sections 4912, 4955, and 4958 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-T Located at ▶ 7 BARKLANID DRNEVE, DERRY, NH The organization by the celendar year, did the organization maniforms of the organization of the very second advised of the U.S.? If Yes, enter the name of the foreign countr			35c		X
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376 Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-PDL for this year? 388 Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? BY 11 1 1 2 PM 1 1 and enter the total amount involved 380 N/A	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a			36		X
Did the organization file Form 1120-POL for this year? 838	Did the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If Yes, complete Schedule L, Part II and enter the total amount involved Section 501 (c)(7) organizations included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Gross receipts, included on line 9, for public use of club facilities Section 501 (c)(3) organizations facilities with provided and section 4911 b	779		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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MANCHESTER MARATHON ASSOCIATION

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Form 990-EZ	(2014)	MANCHESTER	<u>MARATHON ASS</u>	<u>OCIATION</u>			<u>30-0428</u>	<u>217</u>		Page 4
_									Yes	No
	•	• • •	tly, ın political campaign act	ivities on behalf of	or in oppositio	n to candidates for pi	iblic office?			
		chedule C, Part I	<u>.</u>	-				46		<u>X</u>
Part VI		n 501(c)(3) organiz	_							
			must answer questions			e the tables for line	s 50 and 51.			
	Check if	the organization used Se	chedule O to respond to	any question in	this Part VI				Yes	No
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		-	ighest compensated emplo	yees (other than of	ficers, director	s, trustees and key er	nployees) who e	ach rec	eived i	nore
			nization. If there is none, en		·	•			_	
	(a) Name and title of each er	nployee		age hours	(C) Reportable	(d) Health benefits) Estım	
				1 .	devoted to	compensation (Forms W-2/1099-MISC)	employee benefit plans, and deferre	: amo	ount of	
·····			NONE	pos	sition 		compensation	2 00	mpens	
		 								
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			· · · · · · · · · · · · · · · · · · ·					+		
						1				
f Total nu	ımber of oth	ner employees paid over \$1	<u> </u>	. I		_!	<u> </u>			
			ighest compensated indepe	endent contractors	who each rece	ived more than \$100.	000 of compens	ation f	rom the	,
		e is none, enter "None "	NONE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		business address of each in			(b)	Type of service	(c)	Compe	nsatio	n
						-				
		· · · · · · · · · · · · · · · · · · ·								
					 					
	·		· · · · ·				1			
d Total au	ımbar af atl		and recover 0100	l			l			
		•	each receiving over \$100,0 te. All section 501(c)(3) org		tach a					
	ted Schedul	•	ie. Ali section 30 f(c)(3) org	jamzations must at	lacii a		▶ [X Ye	s 「	□ No
			ined this return, including a	ccompanying sche	dules and stat	ements, and to the he				
•			other than officer) is based			•	-	,		,
		laure on a	ul.				5/15	171	715	
Sign	Signature	of office	1				Date	1-		
Here		JAYNE (DRNELL							
	Type or p	nnt name and title								
- 	Print/Ty	pe preparer's name	Preparer's signat	ure	Date	Check	If PTIN			
Paid			ABBY T.	DAWSON,		self- emplo	•		:	
r ald Preparer		T. DAWSON,			05/11		P00			
Use Only	/ Firm's n	ame ▶ F.G. BRI		A, PROF.	ASSN.	Firm's EIN	▶02-03			
 ,	Firm's a	ddress ▶ 98 SALM				Phone no	(603)6	<u>68-</u>	134	<u>U</u>
			TER, NH 0310					<u> </u>		
May the IRS (discuss this	return with the preparer sh	own above? See instruction	S			<u> </u>	Ye		<u>No</u>
							ĺ	Form 9	90-EZ	(2014)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501 (c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Name of the organization

MANCHESTER MARATHON ASSOCIATION

Employer identification number 30-0428217

		14470	HEDIEN IMEN	11111011 1100001	.111 101			U UZZUZII
Pa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.						
The	organ	ization is not a private found	ation because it is: ((For lines 1 through 11,	check only	one box.)		
1		A church, convention of ch						
2		A school described in secti						
3		A hospital or a cooperative		•	ection 170)(b)(1)(A)(ii	ii).	
4	同	A medical research organiz	•				•	the hospital's name.
	_	city, and state:		.,,				,
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a d	overnmental unit describ	and in
٠		section 170(b)(1)(A)(iv). (C		mege of difference owne	d or opera	ted by a g	overnmental unit descrit	Jed III
						70/51/41/41	4.3	
6	H	A federal, state, or local gov	~				• •	
7	ш	An organization that norma	-	intial part of its support	trom a gov	rernmental	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (C	•					
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)			
9	X	An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	oport from	contribution	ons, membership fees, a	and gross receipts from
		activities related to its exen	npt functions - subje	ct to certain exceptions	, and (2) no	o more tha	n 33 1/3% of its support	t from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor	nplete Part III.)					
10	Ш	An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50)9(a)(4).	
11		An organization organized a	and operated exclus	ively for the benefit of, t	o perform	the functio	ons of, or to carry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3). (Check the box in
		lines 11a through 11d that	=					
а		Type I. A supporting orga		., .		•	, ,	alvina
		the supported organization		•				- -
		organization. You must c			w 111.0,011.1,	0		,g
b		Type II. A supporting org	•		tion with it	te eunnorti	ed organization(s), by ha	wing
•			•			• •	•	-
		control or management o			same perso	JIIS IIIAI CC	mittor or manage the sup	ported
		organization(s). You mus						1 41
С	L.		-				• •	ed with,
	_	ıts supported organization	,	•	•	-	-	
d			r integrated. A supp	orting organization oper	rated in co	nnection v	vith its supported organi	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	iveness
		requirement (see instruct	ions). You must con	nplete Part IV, Section	s A and D,	, and Part	V.	
е	L	☐ Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-functio	nally integrated support	ing organi	zatıon.		
f	Ente	er the number of supported o	organizations					
9	Prov	vide the following information	about the supporte	ed organization(s).				
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	rganızatıon in your	, ,	(vi) Amount of
		organization		(described on lines 1-9 above or IRC section	governing	document?	support (see	other support (see
				(see instructions))	Yes	No	Instructions)	Instructions)
				, , , , , , , , , , , , , , , , , , , ,				
				, ,				
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.								

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				_		
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	,					
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	' ' '	, , , , , , ,				
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stop						<u> </u>
	ction C. Computation of Publi					·-·	
	Public support percentage for 2014 (I			column (f))		14	%
	Public support percentage from 2013					15	%
16a	33 1/3% support test - 2014. If the o	-			14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies						▶∟
b	33 1/3% support test - 2013. If the o				l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization quali	• •					
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the "fac					rt VI how the organ	nization
	meets the "facts-and-circumstances"	-	•		_		▶ 🗀
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the						,
	organization meets the "facts-and-circ						₽ -
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	ind see instruction	s ▶

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 qualify under the tests listed below, please complete Part II.)

50.	qualify under the tests listed b	elow, please comp	olete Part II.)				
	ction A. Public Support	4 1 22/2	41.0044	4.10040	4.0.040	4) 004 4	(0 T-+-I
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	75 050	E 6 1 4 2	E4 E14	40 400	43,099.	269,205.
_	Include any "unusual grants.")	75,050.	56,142.	54,514.	40,400.	43,099.	209,203.
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	124,443.	110,815.	116,964.	111,879.	102,360.	566,461.
3	Gross receipts from activities that						
	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	199,493.	166,957.	171,478.	152,279.	145,459.	835,666.
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
C	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)						835,666.
Se	ction B. Total Support			_			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	199,493.	166,957.	171,478.	152,279.	145,459.	835,666.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	210.	122.	40.	11.	5.	388.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	210.	122.	40.	11.	5.	388.
11	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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)	199,703.	167,079.	171,518.	152,290.	145,464.	836,054.
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here	J	,		•		ightharpoons
Se	ction C. Computation of Publ	ic Support Pe	rcentage		• • • • • • • • • • • • • • • • • • • •		
	Public support percentage for 2014 (column (fl)		15	99.95 %
	Public support percentage from 2013	= :	=			16	99.93 %
	ction D. Computation of Inves						
				20 13 column (f)		17	.05 %
	Investment income percentage for 20			ie io, coluinn (i))	•	18	.07 %
18				 الحد مساسم	. 15 in maus tha - 0		
198	33 1/3% support tests - 2014. If the						I / IS not ►X
t	more than 33 1/3%, check this box a 33 1/3% support tests - 2013. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	re than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	tructions	▶

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

c _	-4:	A A II	0	Ouncellantian	_
Se	ction	A. All	Supporting) Organization	S

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VIhow the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VIhow the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part Viwhen and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part Viwhat controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VIwhat controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	_		
	3a		
	3ь		
	3c		
	4-		
	4a		
	4b		
	4c		
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	5b		
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		<u>J-042821</u>	/ Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
		f . v	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44.		İ
	below, the governing body of a supported organization?	11a	-	
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c _	L	<u> </u>
<u>oec</u>	Cities B. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	[103	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <i>Part VI</i> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	•	
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	•	ĺ
Sec	ction C. Type II Supporting Organizations			
	Alon of Type it dupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1 1	•	
Sec	ction D. Type III Supporting Organizations			
		,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	L	<u></u>
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	uctions):		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s ee instructions,		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		•	
	that these activities constituted substantially all of its activities.	2a	ļ	ļ
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	ļ	ļ
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		ļ
b			1	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b_	<u> </u>	Щ

Sche	dule A (Form 990 or 990-EZ) 2014 MANCHESTER MARATHON ASS	OCIAT	ION	30-0428217 Page 6
Pa				
1	Check-here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970. See inst	tructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
04	E. A. A. C. A. A. I. M. A. I. A. A. C. A. A. A. A. A. C. A. A. A. A. A. C. A.		(A) D	(B) Current Year
Sect	ion A - Adjusted Net Income		(A) Prior Year	(optional)
_1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	,	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
<u> </u>	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
_4	Enter greater of line 2 or line 3	4	~~~~	
5_	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly-integrate	ed Type III supporting o	rganization (see

instructions).

	dule A (Form 990 or 990-EZ) 2014 MANCHESTER MA			0-0428217 Page 7
•	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
<u>Sect</u>	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
_	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpose	es of supported organization	s	
4	Amounts paid to acquire exempt-use assets			<u> </u>
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.		·	
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI). See instructions.		·	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2014	Amount for 2014
1_	Distributable amount for 2014 from Section C, line 6			······································
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3_	Excess distributions carryover, if any, to 2014:			
<u>a</u>		1991-1991-1991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991 - 11991	','' '** }}}	
<u>b</u>				
<u> </u>	· · · · · · · · · · · · · · · · · · ·		······································	
d	5 0010			
	From 2013			<u> </u>
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>n</u>	Applied to 2014 distributable amount			
<u> </u>	Carryover from 2009 not applied (see instructions)		. ,	<u> </u>
_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
_	Ine 7: \$ Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if	, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·
•	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
·	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3			, , , , , , , , , , , , , , , , , , ,
٠	and 4c.			
8	Breakdown of line 7:			
a				
ь				
	Excess from 2013	· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , ,
	· · · · · · · · · · · · · · · · · · ·			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A	(Form 990 or 990-E	Z) 2014 MANCHE	<u>ESTER MARA</u>	ATHON ASSO	CIATION_	30-0428	3217 Page 8
Part VI	Supplemental	Z) 2014 MANCHE Information. Pro	ovide the explanat	ions required by F	Part II, line 10; Part I	, line 17a or 17b; and Part	III, line 12.
		part for any addition					
•	•						
							
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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

MANCHESTER MARATHON ASSOCIATION

Employer identification number 30-0428217

MANCHESTER MARATHON ASSOCIATION	30-0428217
FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:	
DESCRIPTION OF PROPERTY:	AMOUNT:
INTEREST INCOME	5.
FORM 990-EZ, PART I, LINE 7, GROSS PROFIT FROM SALES OF I	INVENTORY:
INCOME:	
1. GROSS RECEIPTS	809.
2. RETURNS AND ALLOWANCES	0.
3. LINE 1 LESS LINE 2	809.
4. COST OF GOODS SOLD (LINE 13)	2,126.
5. GROSS PROFIT (LINE 3 LESS LINE 4)	-1,317.
COST OF GOODS SOLD:	
6. INVENTORY AT BEGINNING OF YEAR	0.
7. MERCHANDISE PURCHASED	0.
8. COST OF LABOR	0.
9. MATERIALS AND SUPPLIES	0.
10. OTHER COSTS	2,126.
11. ADD LINES 6 THROUGH 10	2,126.
12. INVENTORY AT END OF YEAR	0.
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)	2,126.
FORM 990-EZ, PART I, LINE 7B, OTHER COSTS:	
DESCRIPTION OF OTHER COSTS:	AMOUNT:
COGS-OTHER COSTS(COMMON)	2,126.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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Attach to Form 990 or 990-EZ.

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OMB No 1545-0047 Open to Public inspection

Name of the organization

MANCHESTER MARATHON ASSOCIATION

Employer identification number 30-0428217

MANCHESTER MARATHON ASSOCIATION 3	0-0428217
ACTIVITY CLASSIFICATION: CHARITABLE	
GRANTEE NAME: THE MENTAL HEALTH CENTER OF GREATER MANCHESTER	
GRANTEE ADDRESS: 401 CYPRESS STREET MANCHESTER, NH 03103	
PROPERTY DESCRIPTION: CASH	
AMOUNT GIVEN:	6,000.
ACTIVITY CLASSIFICATION: CHARITABLE	
GRANTEE NAME: NEW HORIZON OF MANCHESTER	
GRANTEE ADDRESS: 199 MANCHESTER STREET MANCHESTER, NH 03105	
PROPERTY DESCRIPTION: CASH	
AMOUNT GIVEN:	4,000.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10	10,000.
FORM 990-EZ, PART I, LINE 14, OCCUPANCY, RENT, UTILITIES, AN	D MAINTENANCE:
DESCRIPTION OF EXPENSES:	AMOUNT:
DEPRECIATION	1,164.
OTHER EXPENSES	17,016.
TOTAL TO FORM 990-EZ, LINE 14	18,180.
	·
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:	
DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
OTHER EXPENSES-EZ	4,725.
RACE EXPENSES	49,884.
ADVERTSING AND PROMOTION	14,500.
TRAVEL AND ENTERTAINMENT	1,456.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O	(Form 990 or 990-EZ) (2014)

SCHEDULE O (Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization MANCHESTER MARATHON ASSOCIATION			30-0428217	
PRIZES AND AWARDS			26	,548.
SECURITY			19	,010.
GUEST EXPENSES			6	,408.
TOTAL TO FORM 990-EZ, LINE 16			122	<u>,531.</u>
FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:			_	
DESCRIPTION	BEG. OF	YEAR	END OF	YEAR
ACCOUNTS RECEIVABLE		75.	· · · · - · - · · · · · · · · · · · · ·	75.
OTHER DEPRECIABLE ASSETS	1,	164.		0.
TOTAL TO FORM 990-EZ, LINE 24	1,	239.	<u></u>	75.
FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES	S:			
DESCRIPTION	BEG. OF	YEAR	END OF	YEAR
ACCOUNTS PAYABLE	12,	436.	19	,964.
FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE			:	
THE MMA PROMOTES HEALTH AND FITNESS BY HOSTING A				
RUNNING EVENTS FOR PARTICIPATION BY ALL AGES AND		·		
OUR LOCAL ECONOMY BRINGING OVER 2000 RUNNERS, VO	OLUNTEERS			
AND BUSINESSES TOGETHER.				
FORM 990-EZ, PART V, INFORMATION REGARDING PERSO	ONAL BENEF	IT CON	TRACTS:	
THE ORGANIZATION DID NOT, DURING THE YEAR, RECE	IVE ANY FU	NDS, D	IRECTLY	<u>, </u>
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BEI	NEFIT CONT	RACT.		
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY	ANY PREMI	UMS, D	IRECTLY	<u> </u>
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.				