Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) charitable trust

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

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

This Form is

Α	For the	calendar year 1992, or fiscal year beginning	, 1992,	and e	ending		, 19
	ease	Name of organization	ET!	С		ntification number	
	e IRS	AMERICAN-CANADIAN GENEALOGICAL SOCI		_		85878	
pri	nt or		om/suite		State registra		
Sp	e. See ecific	P.O. BOX 668		_ (3763-6	13/63	
	ons.	City, town, or post office, state, and ZIP code MANCHESTER, NH 03/05-0668		E	If address cha	anged, check box	▶ □
F	The second second	/pe of organization—Exempt under section ► 🔀 501(c)(3) (insert number),					
	OR ►	section 4947(a)(1) charitable trust	G If	exemi	otion application	n pending, check box	. • 🛭
	-					ecked "Yes," enter fou	
		group return filed for affiliates? Yes 🗵 No			ion number (GE		-digit group
(D)	If "Yes,"	enter the number of affiliates for which this return is filed: •				Cash Accrual	
(c)	Is this a	separate return filed by an organization covered by a group ruling? Yes No		_	er (specify)	Accidar	
K		ere ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The	e organiza			eturn with the IRS: bu	t if it received
		990 Package in the nail, it should file a return without financial data. Some states rec				,	
Not	e: Form	990EZ may be used by organizations with gross receipts less than \$100,00	0 and to	tal as	sets less than	\$250,000 at end o	of year.
-		Statement of Bossess Francisco and Shares in Not A		F.	and Delen		
Fe	rt I	Statement of Revenue, Expenses, and Changes in Net As	sseis	יר דנ	unu balan	ces	
	1	Contributions, gifts, grants, and similar amounts received:					
	а	Direct public support		05			
	b	Indirect public support					
	С	Government grants	-				
	d	Total (add lines 1a through 1c) (attach schedule—see instructions) .			10	1105	E.S.
	2	Program service revenue (from Part VII, line 93)		1.0	2	10357	574
	3	Membership dues and assessments (see instructions)			3	32583	
	4	Interest on savings and temporary cash investments			4	2294	
	5	Dividends and interest from securities			5	1 1 100 000	-16
	6a	Gross rents					
	b	Less: rental expenses					
		Net rental income or (loss)			60		
0		Other investment income (describe) 7		
Revenue	82	Gross amount from sale of assets other (A) Securities	(B) O	ther	· ////		
eve	l oa	than inventory 8a					
ď	h	Less: cost or other basis and sales expenses 8b					
	C	Gain or (loss) (attach schedule) 8c					
		Net gain or (loss) (combine line 8c, columns (A) and (B))			80	í ·	
	9	Special fundraising events and activities (attach schedule—see ins		ne).			
	1	Gross revenue (not including \$ of	Struction	13).			A Section 1
	a	contributions reported on line 1a)					
	b	Less: direct expenses 9b					
	C	Net income			90		
	10a	Gross sales less returns and allowances	58	32			
	b	Less: cost of goods sold					
	C	Gross profit or (loss) (attach schedule)			10	5832	
	11	Other revenue (from Part VII, line 103)					0.00
	12	Total managing (add lines 4d 0 0 4 5 0s 7 0d 0s 40s said 44)					
u	13	Program services (from line 44, column (B)) (see instructions)			13		- ber -
Expenses	14	Management and general (from line 44, column (C)) (see instructions)			14		a transit
en	15	Fundraising (from line 44, column (D)) (see instructions)	. 10)		15		No.
uX.	16	Payments to affiliates (attach schedule—see instructions)	10		16		vA-1
144	17	Total expenses (add lines 16 and 44, column (A))					1 12
	40	Excess or (deficit) for the year (subtract line 17 from line 12)					11
Net	19	Net assets or fund balances at beginning of year (from line 74, co			40		
ž	20	Other changes in net assets or fund balances (attach explanation)		y) ·	20		1.1.
<	21	Net assets or fund balances at end of year (combine lines 18, 19, and			21		

Form 990 (1992) Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and 4947(a)(1) charitable trusts but optional for others. (See instructions.) Do not include amounts reported on line (B) Program services (C) Management and general (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) . . . 22 23 23 Specific assistance to individuals (attach schedule) 24 Benefits paid to or for members (attach schedule) 24 25 25 Compensation of officers, directors, etc. . . 26 26 27 27 Pension plan contributions 28 28 Other employee benefits 29 29 Payroll taxes 30 30 Professional fundraising fees 31 31 Accounting fees 3 3 3 3 3 3 3

32	Legal fees	32				
33	Supplies	33	1903 -		1903	
34	Telephone	34	416		416	
35	Postage and shipping	35	1993 0		1993	
86	Occupancy	36	38000		3800	
37	Equipment rental and maintenance	37	552		552	
88	Printing and publications	38	3094	3094		
19	Travel	39				
10	Conferences, conventions, and meetings .	40	2771 -	2771		
11	Interest	41				
2	Depreciation, depletion, etc. (attach schedule)	42				
3	Other expenses (itemize): a Insurance	43a	1488-		1488	
b	Bank Service Charge	43b	49 -		49	
	Complaint - Buartody	43c	13752~	13752 -	. ,	
C	GenealogIST - Quarterly Library Research Dept	43d	2859	2859		
d	Page 1 Nont	43e	1239 -	1239		
e	Archivist	43f	1841	1841		
Ι.4		401	7 9 - 7 7			
14	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	35757	25556	10201	
2en	orting of Joint Costs.—Did you report in column	-		any joint costs fro	om a combined	
	cational campaign and fundraising solicitation?					☐ Yes 🗵 No
	es," enter (i) the aggregate amount of these joint cost					
iii \ +l	ne amount allocated to management and general \$_	.ο ψ	and (iv) the	e amount allocated	to fundraising \$, σ
	t III Statement of Program Service Acce				to furfactioning ψ	
					onvione provided:	Expenses
Desc	cribe what was achieved in carrying out the organiza number of persons benefited; or other relevant in	tion's	exempt purposes. I	rully describe the s	501(c)(3) and (4)	(Required for 501(c)(3) and (4) organizations and
orga	nizations and section 4947(a)(1) charitable trusts m	ust als	so enter the amount	t of grants and allo	cations to others.	4947(a)(1) trusts; optional for others.)
						ior others.)
a .	Generalogiss and ruplications	NE	pour world	of a sold of	. Lersnip	11000
-	Informed on veneslagical m	107	rs and pr	eserves ar	d	16846
-	Genealogist and Publications - Informed on Genealogical M disseminates genealogical c	1. 0 . (Gra	nts and allocations	\$		
b .	Archivist - We maintain over	20	oo volume	ot geneal	91601 0010	1000
- 4	histories, how-to-books, as well	25	extensive .	collections.	of microfilm	1841
4	and microfiche. We are addi	ng	to This Fund	of Informa	1710m 10	
-	enhance our research capabilities.	Gra	TILS and anocations	T 111 - 1	+ / -	
С.	Conference - Semi-Annually we	e m	eet lonear	1210s and	conduct	0000
<u>_</u>	seminars on genealogy + hist	ory	To turther	- The Know	edge of	2771
1	seminars on genealogy + hist members, quests and the public	. 1	nnually to E	lect officer	-stpirectori	
d.	Library - Research - This is The	e.CE	nter of ou	ir activitie	9.1	
-	The Library provides a place to House our records. The Researce Cannot come to the Library	sr.	nembers 10	do Their re	rearch and	4098
_	House our records. The Research	ch D	ept Serves	by mail the	se who	, , , ,
)	
			nts and allocations)	0
f 7	Total (add lines a through e) (should equal line 4	4, coli	umn (B))			25556

Part IV Balance Sheets

N	lote: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A)		(B) End of year
		Beginning of year		End of year
45	Assets	2.	-3	a large party
45	Cash—non-interest-bearing	20	45	10
46	Savings and temporary cash investments	59708	46	74473
170	Accounts receivable 47a	N N		
	Less: allowance for doubtful accounts		477	
D	Less, allowance for doubtful accounts		47c	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
482	Pledges receivable	1		240 25 22 22 24
h	Less: allowance for doubtful accounts	-	48c	
49	Grants receivable		49	
50	Receivables due from officers, directors, trustees, and key employees		/////	
00	(attach schedule)		50	1
51a	Other notes and loans receivable (attach schedule) 51a		/////	
	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use Pariodicals - Repertoires - Inaps - charts.	1/000	52	17974
53	Prepaid expenses and deferred charges	77 000	53	11117
54	Investments—securities (attach schedule)		54	
55a	Investments—land, buildings, and equipment:		111111	
	basis			
b	Less: accumulated depreciation (attach	1		
	schedule)	25543	55c	26387
56	Investments—other (attach schedule)		56	
57a	Land, buildings, and equipment: basis 57a			
	Less: accumulated depreciation (attach schedule) 57b		57c	
58	Other assets (describe > Book Inventory	104893	58	98734
59	Total assets (add lines 45 through 58) (must equal line 75)	201164	59	217578
	Liabilities			
60	Accounts payable and accrued expenses		60	
61	Grants payable		61	
62	Support and revenue designated for future periods (attach schedule)		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule).		63	
64	Mortgages and other notes payable (attach schedule)		64	
65 66	Other liabilities (describe		65	
66	Total liabilities (add lines 60 through 65)	i i	66	
_	Fund Balances or Net Assets			
Orga	inizations that use fund accounting, check here ▶ and complete			
07-	lines 67 through 70 and lines 74 and 75 (see instructions).	50701		m
	Current unrestricted fund	59728	67a	74483
	Current restricted fund	25542	67b	0170-
68 69	Land, buildings, and equipment fund	25543	68	26387
	Endowment fund	115893	69	111706
) raa	nizations that do not use fund accounting, check here	113873	70	116708
orga	complete lines 71 through 75 (see instructions).			
71	Capital stock or trust principal		71	
	Paid-in or capital surplus		72	
73	Retained earnings or accumulated income		73	
74	Total fund balances or net assets (add lines 67a through 70 OR lines 71			
	through 73: column (A) must equal line 19 and column (B) must equal			
	line 21)		74	
75	Total liabilities and fund balances/net assets (add lines 66 and 74)	201164	75	217578
	-			- 1 - 10

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes the organization's programs and accomplishments.

Form 9	90 (1992)					Page 4
Par	List of Officers, Directors, Trustees, and	d Key Employees (List ea				
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans	account	xpense and other vances
	PAULINE CUSSON MANCHESTER, NH	PRESIDENT	-0-	-0-	-1	0 -
£	ROBERT PAQUETTE CANDIA NH	VICE-PRESIDENT	-0-	-0-	-0) –
G	FERALO LALONDE V. NOTTINGHAM, NH	TREASURER	-0-	-0-	- 6	0 -
	KINGSTON, NH	RECORDING SECRETARY	-0-	-0-	- () -
Did a	ny officer director trustee or key employee receive	aggregate compensation of	more than \$100	,000 from your		
organ	sization and all related organizations, of which more t	han \$10,000 was provided b	by the related org	ganizations?	Yes	⊠ No
	es," attach schedule (see instructions).					
	t VI Other Information					res No
Note:	Section 501(c)(3) organizations and section 4947(a)(1)				76	res No
76	Did the organization engage in any activity not pr		ternal Revenue	Service?		
	If "Yes," attach a detailed description of each act			IDOO	77	
77	Were any changes made in the organizing or government		reported to the	IRS?		
	If "Yes," attach a conformed copy of the changes	s.	the year covered	by this return?	78a	
78a	Did the organization have unrelated business gross income of "Yes," has it filed a tax return on Form 990-T, Exe	ome of \$1,000 of more during	ncome Tax Return	for this year?	78b	L
C	At any time during the year, did the organization own \boldsymbol{a}	50% or greater interest in a ta	exable corporation	or partnership?	78c	
79	If "Yes," complete Part IX. Was there a liquidation, dissolution, termination, or If "Yes," attach a statement as described in the in		ing the year? (Se	e instructions.)	79	
80a	Is the organization related (other than by association membership, governing bodies, trustees, officers, etc., to	with a statewide or nationwid	de organization) the pt organization? (S	nrough common See instructions.)	80a	
b	If "Yes," enter the name of the organization ▶			<u> </u>		
81a	Enter amount of political expenditures, direct or indirec		1			///////////////////////////////////////
b	Did the organization file Form 1120-POL, U.S. Income	Tax Return for Certain Politica	al Organizations, f	or this year? .	81b	
	Did the organization receive donated services or or at substantially less than fair rental value?	the use of materials, equip			82a	
	If "Yes," you may indicate the value of these items revenue in Part I or as an expense in Part II. See it	s here. Do not include this a nstructions for reporting in	Part III . 826			
83a	Did anyone request to see either the organization	n's annual return or exemp	tion application	(or both)?	83a	L
b	If "Yes," did the organization comply as describe	d in the instructions? (See	General Instruct	tion L.)	83b 84a	V
84a	Did the organization solicit any contributions or g	jifts that were not tax dedu	ictible?			
b	If "Yes," did the organization include with every	solicitation an express stat	ement that such	contributions	84b	
	or gifts were not tax deductible? (See General In	struction M.)				
85a	Section 501(c)(5) or (6) organizations.—Did the orga opinion about legislative matters or referendums? (5)	Inization spend any amounts	ions section 1.16	32-20(c))	85a	
h	If "Yes," enter the total amount spent for this pur			0		
86	Section 501(c)(7) organizations.—Enter:	pood		í		
	Initiation fees and capital contributions included	on line 12	86a	1	-4////	
b	Gross receipts, included on line 12, for public us	e of club facilities (see inst	tructions) 86b			
	Does the club's governing instrument or any written	en policy statement provide	e for discriminati	on against any		
	person because of race, color, or religion? (If "Ye	es," attach statement. See	instructions.) .		86c	
87	Section 501(c)(12) organizations.—Enter amount		87a	.1		
а	Gross income received from members or shareho				-\/// <i>\</i>	///////////////////////////////////////
b	sources against amounts due or received from the	nem.)	870			
88	Public interest law firms.—Attach information des					
89	List the states with which a copy of this return is	s filed			90	
90	During this tax year did the organization maintain any The books are in care of GERALD LAL	part of its accounting / tax rec	Telenhone	no. ► (603.)		7448
91	Located at > 39 GEBIG RD. W. NOT	TINGHAM NH	Telephone	ZIP code ▶	032	91-0172
92	Section 4947(a)(1) charitable trusts filing Form 990 i	n lieu of Form 1041. U.S. Fi	iduciary Income	Tax Return, shoul	d check	here □
J=	and enter the amount of tax-exempt interest received of	or accrued during the tax year	▶ 92			

· Jane

Pa	rt VII	Analysis of Income-Producing	Activities				
		ss amounts unless otherwise		business income	Excluded by se	ction 512, 513, or 514	(e)
	icated		(a)	(b)	(c)	(d)	Related or exempt function income
93		am service revenue:	Business code	Amount	Exclusion cod		(See instructions.)
		PUBLICATIONS					2434
		CONFERENCE					2099
		ENEALOGIST - ADVERTISING					180
	-	-IBRARY					820
	. ,	RESEARCH					4824
	(f) _						×
		es from government agencies					
		pership dues and assessments		-			325F3
		t on savings and temporary cash investmen	ts				2294
		ends and interest from securities					NIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
91		ental income or (loss) from real estate:		X/////////////////////////////////////			
		bt-financed property t debt-financed property				-	
98		ntal income or (loss) from personal property				+	
		investment income					
		r (loss) from sales of assets other than invent					
		come from special fundraising events.					
		profit or (loss) from sales of inventory					5+32
		revenue: (a)					7072
		Tovoride. (a)					
	Subto	tal (add columns (b), (d), and (e))					
105	TOTA	L (add line 104, columns (b), (d), and (e)	. (4			57066
Note	: (Line	105 plus line 1d, Part I, should equal t	the amount on line	e 12. Part I.)			37086
	t VIII		Accomplishme	ent of Exempt	Purposes		
	e No.	Explain how each activity for which income	ne is reported in co	lumn (e) of Part V	II contributed i	mportantly to the a	ccomplishment
	V	of the organization's exempt purposes (or	ther than by providi	ing funds for such	purposes). (S	ee instructions.)	
93		Our Publications preserve an	d dissemine	ate Geneal	gieal Kn	owledge and	data.
	В	Conferences serve to edu The GenealogIST Ads let The Library serves as the	cate and in	form on g	enealogi	cal matte	rs
	C	The Genealogist Ads let	members K	now what	publica	tions are a	vailable
	D	The Library Serves as the	center for	r Genealog	gical ST	dy + resear	-ch.
	E	The Research Dept does	family bei	402/09/02/	Studie.	for mem	hers and
		non-members on a fee	basis - The	modest fo	es are	used to pu	rchase
		The Research Dept does non-members on a fee books, microfilmy mice	rofiche for	r further	researce	and for	general
		Library use by mem	bers and	The gener	-21 Publ	ic.	
		,					
Par	t IX	Information Regarding Taxable S	uheidiaries (Cor	mploto this Bor	t if the "Vec	" hav an 70- i-	ab a ab a d V
		address, and employer identification					
			Percentage of ownership interest	Nature business a		Total income	End-of-year assets
			1			in contro	
Dia		Under penalties of perjury, I declare that I have expended and heliof it is true persent and see	examined this return, in	ncluding accompanyi	ng schedules an	d statements, and to t	he best of my
Plea	-	knowledge and belief, it is true, correct, and corrany knowledge.	plete. Declaration of p	preparer (other than o	officer) is based of	on all information of wi	nich preparer has
Sig		Serald Laland	1	2-19-9	3 1 T	EASURER	
Her	е	Signature of officer		Date	Title	EMOUREIC	
		Preparer's			Date		
Paid		signature			Date		Check if
Prepa		Firm's name (or			ZIP (code	self-employed ▶
Use (illy	yours if self-employed) and address			211-10	.000	

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation), 501(e), 501(f), 501(k), or Section 4947(a)(1) Charitable Trust Supplementary Information

► Attach to Form 990 (or Form 990EZ).

OMB No. 1545-0047

Employer identification number

19**92**

P	Compensation of the Five Hig (See specific instructions.) (List	hest Paid Employees O each one. If there are no	ther Than Offic ne, enter "None	ers, Directors, a	and T	ruste	es	
(a)	(a) Name and address of employees paid more than \$30,000 (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans							
	NONE							
					ļ -			
								
						-		
Tot	al number of other employees paid over							
_	rt II Compensation of the Five High	│ hest Paid Persons for P	rofessional Ser	vices				
	(See specific instructions.) (List	each one. If there are no	ne, enter "None.	")				
	(a) Name and address of persons paid mo			of service	(c) C	ompens	ation	
	No one Receives Co. for Services render	mpensetium						

	We Are All Voluntee	res						
•	NONE							
prof	I number of others receiving over \$30,000 for essional services	NONE						
_	t III Statements About Activities					//////////////////////////////////////	No	
1	During the year, has the organization attempt attempt to influence public opinion on a legisla	ted to influence national, state	e, or local legislati	on, including any	1		v	
	If "Yes," enter the total expenses paid or incurred	d in connection with the lobbying	ng activities. \$ _	· · · · · · ·				
	Organizations that made an election under se organizations checking "Yes," must complete the lobbying activities.	ction 501(h) by filing Form 5	768 must complete	Part VI-A. Other ed description of				
2	During the year, has the organization, either di of its trustees, directors, principal officers, or co any such person is affiliated as an officer, direct	reators, or with any taxable or	ganization or corpo	ration with which				
a	Sale, exchange, or leasing of property?				2a	(1/1///)	//////////////////////////////////////	
b	Lending of money or other extension of credit?	?			2b		V	
c d	Furnishing of goods, services, or facilities?				2c		<u>_</u>	
e	Payment of compensation (or payment or reim Transfer of any part of its income or assets? .				2d		<u>~</u>	
6	If the answer to any question is "Yes," attach a				2e		TITITI.	
3	Does the organization make grants for scholars	a uctaneu statement explainir	ig the transactions.		3			
4	Attach a statement explaining how the organiza	ation determines that individu	ala ar arganizationa		77////			
	or loans from it in furtherance of its charitable	ach a statement explaining how the organization determines that individuals or organizations receiving grants loans from it in furtherance of its charitable programs qualify to receive payments. (See specific instructions)						

	t IV Reason for Non-Private Founda				S.)			
The o	organization is not a private foundation because	it is (please che	ck only ONE app	licable box):				
5	☐ A church, convention of churches, or associ	ciation of churche	es. Section 170(b))(1)(A)(i).				
6	A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)							
7	7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).							
8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).								
9	☐ A medical research organization operated in	n conjunction wit	h a hospital. Sec	tion 170(b)(1)(A)(iii	i). Enter name,	city, and state of		
	hospital ▶ An organization operated for the benefit of a		sity award or aper	rated by a govern	nental unit Secti	on 170(h)(1)(A)(iv)		
10	(Also complete Support Schedule.)							
11a	Section 170(b)(1)(A)(vi). (Also complete Sup	port Schedule.)			i unit or from tr	ie general public.		
11b	A community trust. Section 170(b)(1)(A)(vi).	(Also complete S	Support Schedule	.)				
12	An organization that normally receives: (a) taxable income (less section 511 tax) from its support from contributions, membership to certain exceptions. See section 509(a)(2)	businesses acqu fees, and gross re . (Also complete	ired by the organ eceipts from activi Support Schedul	ization after June ities related to its del.)	30, 1975, and (charitable, etc., f	b) more than 1/3 of unctions—subject		
13	An organization that is not controlled by ar described in: (1) boxes 5 through 12 above section 509(a)(3).)	ny disqualified per re; or (2) section	ersons (other than 501(c)(4), (5), or	foundation mana (6), if they meet	agers) and supp the test of secti	orts organizations on 509(a)(2). (See		
Prov	ide the following information about the supporter	ed organizations.	(See instructions	for Part IV, box	13.)			
		of supported org				(b) Box number from above		
14	An organization organized and operated to	test for public s	afety Section 50	9(a)(4). (See speci	ific instructions.)			
14								
	Support Schedule (Complete only if yo	u checked box 1	0, 11, or 12 abov	/e.) Use cash me	thod of accour	ting.		
Cale	endar year (or fiscal year beginning in) . >	(a) 1991	(b) 1990	(c) 1989	(d) 1988	(e) Total		
15	Gifts, grants, and contributions received. (Do		254	1645	.1/1	11-07-5		
	not include unusual grants. See line 28.)	11,718	25/2		N/A	15275		
16	Membership fees received	25042	20340	16063		61445		
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose.	13949	1/205	9572		34676		
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2799	2016	1876		6691		
19	Net income from unrelated business activities not included in line 18							
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.							
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	_						
22	Other income. Attach schedule. Do not include							
	gain or (loss) from sale of capital assets					<u> </u>		
23	Total of lines 15 through 22	53508	36073	28506		118087		
24	Line 23 minus line 17.	3 9559	24868	18984		83411		
25	Enter 1% of line 23	535	361	2851				
26 a b	The second of th	d organization) v	vhose total gifts t	for 1988 through	1991 exceeded			

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

				e following with any other organization tion 527, relating to political organizatio			
a Trai	nsfers from the rep	orting organization	to a noncharitable exempt org	ganization of:		Yes	No
(i)	Cash				51a(i)	L	
(ii)	Other assets				a(ii)	ļ	V
	er Transactions:						V
(i)	Sales of assets to	a noncharitable e	xempt organization		b(i)		
			itable exempt organization		b(ii)		V
					b(iii)		V
					b(iv)		V
		•			b(v)		
					b(vi)		1
			ship or fundraising solicitations				1
	-		*	nployees	С	l	~
the	fair market value of	the goods, other as	sets, or services given by the re	. The "Amount involved" column below sh porting organization. If the organization re (d) the value of the goods, other assets, c	ceived les	s than	fair
(a) ne no.	(b) Amount involved	Name of none	(c) charitable exempt organization	(d) Description of transfers, transactions, and	sharing arr	angeme	ents
0 110.	7 undure involved	Name of None	Sidilation exempt organization	Description of transfers, transactions, and	Sharing an		J111.3
<u>-</u>							
			· · · · · · · · · · · · · · · · · · ·				
des		01(c) of the Code (other than section 501(c)(3)) or	one or more tax-exempt organizations in section 527?	₫ Yes	3	No
The	Name of organiz	cation Chapter	Type of organization	Description of relations	hip		
The	Amprican -C	Canadia.	Genealogical	We have Common ine	mhor	6112	
1115 A	100,001 (00	CIATU	Cacatia	Dual Due to 1 to the	In The	11/2	
nc	erugical and	1517	3001319	Charte 140 7 at C	771611		
				CT TO THE TOTAL	NES F	0341	-+:
				State of Main Moint		s re	
				To The Begin Chapt		0027	
				In Lewiston ME)	ThIS K	7000	4
	•			Is used by them	10 K	72n	101
					Restz	rch	
				Facilities.			

	,						

Sche	edule A (Form	1 990) 1992					Page 4
Pa	rt VI-A	Lobbying Expenditures by E (To be completed ONLY by ar					WA
Che	ck here ►	a If the organization belongs	to an affiliated gr	oup (see instruct	ions).		
Che	ck here 🕨	b If you checked a and "limited	ed control" provis	sions apply (see i	nstructions).		
		Limits on Lobbyi	•			(a) Affiliated group totals	(b) To be completed for ALL electing
		("Expenditures" means a	mounts paid or in	ncurred)			organizations
36	Total lobi	bying expenditures to influence public	opinion (grassro	ots lobbying) .	36		
37		bying expenditures to influence a legi	· ·	• •			
38		bying expenditures (add lines 36 and					
39		empt purpose expenditures (see Part	,				
40		mpt purpose expenditures (add lines	, ,	•	40		
41		nontaxable amount. Enter the amount		•			
		Sount on line 40 is— The lo \$500,000	bbying nontaxab		· · · · · · /////		
		,000 but not over \$1,000,000 \$100,0			• • • • • • • • • • • • • • • • • • • •		
		00,000 but not over \$1,500,000 . \$175,0	•				
		00,000 but not over \$17,000,000 . \$225,0	•		Y/////		
		000,000 \$1,000					
42		ts nontaxable amount (enter 25% of			1		
43	Subtract	line 42 from line 36. Enter -0- if line 4	12 is more than lir	ne 36			
44	Subtract	line 41 from line 38. Enter -0- if line 4	11 is more than lir	ne 38	44		
	Caution	File Form 4720 if there is an amount	on either line 43	or line 11			
_	- Guduom			••••			
	(0		eraging Period		` ·		
	(S	ome organizations that made a section See the	e instructions for			e five columns be	elow.
			Lob	bying Expenditu	res During 4-Ye	ar Averaging Pe	eriod
		Calendar year (or	(a)	(b)	(c)	(d)	(e)
		fiscal year beginning in) ▶	1992	1991	1990	1989	Total
45	Lobbying instruction	•					
<u>46</u>	Lobbying	ceiling amount (150% of line 45(e))					
47	Total lobb	oying expenditures (see instructions)					
48	Grassroot	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	-				
70	instruction	V					
49	Grassroot	ts ceiling amount (150% of line 48(e))					
50	Grassroot	, 3 - ,					
	instruction						
Pa	rt VI-B	Lobbying Activity by Nonelec					
		(For reporting by organizations	that did not c	omplete Part \	/I-A.)		· · · · · · · · · · · · · · · · · · ·
		r, did the organization attempt to influ				ny Yes No	Amount
atte		ence public opinion on a legislative n	natter or referend	um, through the	use of:		
a	Volunteer		· · · · · ·			.	
b		or management (include compensati	on in expenses re	eported on lines	c through h)	•	
ر د		vertisements				· v	
d	_	to members, legislators, or the public ons or published or broadcast stateme				.	
e f		other organizations for lobbying purp				. 1	
g		ntact with legislators, their staffs, gov		or a legislative h	· · · · · ·	.	
h		emonstrations, seminars, conventions					
i		oying expenditures (add lines c through					
			, , , , , ,				
•							

Pai	Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page	; 2.)		
27 a	Organizations described in box 12, page 2: Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in ea "discussified person" and enter the sum of such amounts for each year:	ch year	from	, eacl
	"disqualified person," and enter the sum of such amounts for each year: (1991) None (1990) None (1989) None (1988) M	14		
b	Attach a list showing, for 1988 through 1991, the name of, and amount included in line 17 for, each person (other person") from whom the organization received more during that year than the larger of: (1) the amount on line 25 \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these each year: (1991)	for the xcess a	year;	; or (2
28	For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1988 through (not open to public inspection) for each year showing the name of the contributor, the date and amount of the description of the nature of the grant. Do not include these grants in line 15. (See specific instructions.)			
Pai	t V Private School Questionnaire (To be completed ONLY by schools that checked box 6 in Part IV)	N/	A	
		1	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	,			
32	Does the organization maintain the following:			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a 33b		\vdash
D	Admissions policies?	33c		
d	Scholarships or other financial assistance? (See instructions.).	33d		t
e	Educational policies?	33e		
f	Use of facilities?	33f		L
g	Athletic programs?	33g	<u> </u>	ļ
h	Other extracurricular activities?	33h		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b	,,,,,,,,	,,,,,,,,
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation. (See instructions for Part V.)	35		