

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) nonexempt charitable trust

1995

This Form is Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **1995** calendar year, OR tax year period beginning , **1995**, and ending , **19**

- B** Check if:
- Change of address
 - Initial return
 - Final return
 - Amended return (required also for State reporting)

Please use IRS label or print type Set Spec Instr. tions.	C Name of organization AMERICAN-CANADIAN GENEALOGICAL SOCIETY OF NH INC INC PO BOX 147A MANCHESTER NH 03108	D Employer identification number 51 0185878 E State registration number 3763-03763 F Check <input type="checkbox"/> if exemption application is pending
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G Type of organization— Exempt under section 501(c)() (insert number) OR section 4947(a)(1) nonexempt charitable trust
Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

- H(a)** Is this a group return filed for affiliates? Yes No
- I** If either box in H is checked "Yes," enter four-digit group exemption number (GEN) ▶ _____
- (b)** If "Yes," enter the number of affiliates for which this return is filed: . . . ▶ _____
- J** Accounting method: Cash Accrual
- (c)** Is this a separate return filed by an organization covered by a group ruling? Yes No Other (specify) ▶ _____

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See instructions on pages 9-14.)

	Description	Sub-column	Amount	
Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	1a	27,743.65	
	b Indirect public support	1b		
	c Government contributions (grants)	1c		
	d Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ _____ noncash \$ _____)	1d	27,743.65	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	27,003.46	
	3 Membership dues and assessments	3	41,152.50	
	4 Interest on savings and temporary cash investments	4	192.16	
	5 Dividends and interest from securities	5	0	
	6a Gross rents	6a		
	b Less: rental expenses	6b		
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7 Other investment income (describe ▶ _____)	7			
Revenue	8a Gross amount from sale of assets other than inventory	(A) Securities		
	b Less: cost or other basis and sales expenses	8a		
	c Gain or (loss) (attach schedule)	8b		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
Revenue	9 Special events and activities (attach schedule)			
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		
	b Less: direct expenses other than fundraising expenses	9b		
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
Revenue	10a Gross sales of inventory, less returns and allowances	10a	8,682.70	
	b Less: cost of goods sold	10b		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	8,682.70	
Expenses	11 Other revenue (from Part VII, line 103)	11	987.41	
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	105,761.88	
	13 Program services (from line 44, column (B))	13	41,841.00	
	14 Management and general (from line 44, column (C))	14	26,734.34	
	15 Fundraising (from line 44, column (D))	15		
	16 Payments to affiliates (attach schedule)	16	1,264.00	
	17 Total expenses (add lines 16 and 44, column (A))	17	69,839.34	
	Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	35,922.54
		19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	304,934.00
		20 Other changes in net assets or fund balances (attach explanation)	20	-
		21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	340,856.70

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 section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instructions on page 14.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.				
26	Other salaries and wages				
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	996.83	426.00	570.83	
34	Telephone	931.07		931.07	
35	Postage and shipping	1,390.09	1,218.00	172.09	
36	Occupancy	16,962.88		16,962.88	
37	Equipment rental and maintenance	1,289.24	1,289.24		
38	Printing and publications	19,198.14	19,198.14		
39	Travel				
40	Conferences, conventions, and meetings	2,864.70	2,864.70		
41	Interest	6,263.01		6,263.01	
42	Depreciation, depletion, etc. (attach schedule)				
43a	Other expenses (itemize): a INSURANCE	1,150.00		1,150.00	
43b	b BANK CHARGES	684.46		684.46	
43c	c "GENEALOGIST"/PUBLICATIONS	10,487.66	10,487.66		
43d	d LIBRARY	4,835.88	4,835.88		
43e	e RESEARCH SERVICES	1,521.38	1,521.38		
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	68,575.34	41,841.00	26,734.34	

Reporting of Joint Costs.—Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See instructions on page 17.)

What is the organization's primary exempt purpose? GATHER, PRESERVE, DISSEMINATE GENEALOGICAL DATA	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a "GENEALOGIST" + PUBLICATIONS - QUARTERLY JOURNAL KEEPS MEMBERS INFORMED ON GEN. MATTERS. PUBLICATIONS PRESERVE + DISSEMINATE GENEALOGICAL DATA. (Grants and allocations \$ _____)	29,685.80
b ACQUISITIONS/ARCHIVIST - ON-GOING FUND TO INCREASE OUR RESEARCH/LIBRARY HOLDINGS TO BETTER SERVE THE EVER-INCREASING NEEDS OF MEMBERS + NON-MEMBERS TO DO THEIR OWN RESEARCH. (Grants and allocations \$ _____)	2,933.24
c RESEARCH SERVICES - CENTER OF OUR ACTIVITIES. PERFORMED FOR OUR DISTANT MEMBERS + NON-MEMBERS THIS FUND IS USED TO INCREASE OUR RESEARCH CAPABILITIES. (Grants and allocations \$ _____)	6,357.26
d SEMI-ANNUAL CONFERENCES - TO PROMOTE + EDUCATE OUR MEMBERS + THE GENERAL PUBLIC ABOUT HISTORY + GENEALOGICAL SOURCES + EVENTS (Grants and allocations \$ _____)	2,864.70
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	41,841.00

Part IV Balance Sheets (See instructions on pages 17-19.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing <i>CASH ON HAND</i>	22.00	45	22.00
	46 Savings and temporary cash investments	7,550.22	46	16,223.34
	47a Accounts receivable	47a		47c
	b Less: allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a		48c
	b Less: allowance for doubtful accounts	48b		48c
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule).	51a		51c
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use <i>PERIODICALS, REAS., MAPS, CHARTS</i>	21,000.00	52	21,000.00
	53 Prepaid expenses and deferred charges <i>GAS. CO. DEPOSIT</i>	2,100.00	53	2,100.00
	54 Investments—securities (attach schedule)		54	
	55a Investments—land, buildings, and equipment: basis	55a		55c
	b Less: accumulated depreciation (attach schedule).	55b		55c
56 Investments—other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a		57c	
b Less: accumulated depreciation (attach schedule).	57b		57c	
58 Other assets (describe ► _____)	220,916.79 115,845.15	58	225,936.59 124,074.77	
59 Total assets (add lines 45 through 58) (must equal line 74)	367,434.16	59	389,356.70	
Liabilities	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule).		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)	62,500.00	64b	48,500.00
	65 Other liabilities (describe ► _____)		65	
66 Total liabilities (add lines 60 through 65)	62,500.00	66	48,500.00	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	7,572.00	70	18,345.00
	71 Paid-in or capital surplus, or land, bldg., and equipment fund	158,417.00	71	177,436.70
	72 Retained earnings, accumulated income, endowment, or other funds	138,945.00	72	145,075.00
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	304,934.00	73	340,856.00
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	367,434.00	74	389,356.70

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	105,761.81
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$ _____		
(2)	Donated services and use of facilities \$ _____		
(3)	Recoveries of prior year grants . . . \$ _____		
(4)	Other (specify): _____ \$ _____		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$ _____		
(2)	Other (specify): _____ \$ _____		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	105,761.81

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements . . . ▶	a	69,839.34
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$ _____		
(2)	Prior year adjustments reported on line 20, Form 990 \$ _____		
(3)	Losses reported on line 20, Form 990 . . . \$ _____		
(4)	Other (specify): _____ \$ _____		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990. . . \$ _____		
(2)	Other (specify): _____ \$ _____		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	69,839.34

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions on page 19.)

(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 & deferred compensation	(E) Expense account and other allowances
ROGER LAWRENCE (V.P.) MERRIMACK, NH	PRESIDENT 20 HRS	-0-	-0-	-0-
ANNE-MARIE PERRAULT (P.) GOFFSTOWN, NH	VICE PRESIDENT 20 HRS	-0-	-0-	-0-
ANNE-MARIE PERRAULT GOFFSTOWN, NH	EDITOR 20 HRS	-0-	-0-	-0-
PAULINE CUSSON Donald Chaput MANCHESTER, NH	TREASURER 30 HRS	-0-	-0-	-0-
JUDITH ARSENEAULT E. KINGSTON, NH	CORRESP. SEC/MEMBERSHIP 20 HRS	-0-	-0-	-0-
JOHN STANTON MANCHESTER, NH	RECORD. SEC. 10 HRS	-0-	-0-	-0-
ROBERT MAURIER MANCHESTER, NH	ARCHIVIST/ACQUISITIONS 10 HRS	-0-	-0-	-0-
ROLAND MARCHAND COMPUTER COMM. HUDSON, NH	COMPUTER COMM. 15 HRS	-0-	-0-	-0-
PAULINE LABBE BEDFORD, NH	ASST. LIBRARY DIR. 35 HRS	-0-	-0-	-0-
ROBERT NEVELUX PELHAM, NH	INVENTORY CONTROL 20 HRS	-0-	-0-	-0-

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see instructions on page 20.

Mary Jean Colburn
E. O'Brien

Part VI Other Information (See instructions on pages 20-23.)

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		<input checked="" type="checkbox"/>
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		<input checked="" type="checkbox"/>
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		<input checked="" type="checkbox"/>
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	<input checked="" type="checkbox"/>	
b	If "Yes," enter the name of the organization FATHER LEO BEGIN CHAP. - A.C.G.S. OF LEWISTON, ME and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81.	81a	NONE	
b	Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year?	81b		<input checked="" type="checkbox"/>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		<input checked="" type="checkbox"/>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	N/A	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	Section 501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A	
c	Dues, assessments, and similar amounts from members	85c		
d	Section 162(e) lobbying and political expenditures	85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	Section 501(c)(7) organizations.—Enter:			
a	Initiation fees and capital contributions included on line 12	86a		
b	Gross receipts, included on line 12, for public use of club facilities.	86b		
87	Section 501(c)(12) organizations.—Enter: a Gross income from members or shareholders	87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX	88		<input checked="" type="checkbox"/>
89	Public interest law firms.—Attach information described in the instructions.			
90	List the states with which a copy of this return is filed			
91	The books are in care of PAULINE CUSSON, TREA. - A.C.G.S. Telephone no. (603) 622-1554 Located at (4 ELM ST.) P.O. BOX 6478, MANCHESTER, NH ZIP code 03108			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041, U.S. Income Tax Return for Estates and Trusts.—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92		

Part VII Analysis of Income-Producing Activities (See instructions on pages 23-24.)

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a PUBLICATIONS					6,328.09
b CONFERENCES					5,986.09
c "GENEALOGIST" BACK ISSUES/ADVERT.					2,390.93
d LIBRARY - MAPS, CHARTS, INFO. SHEETS					1,797.85
e RESEARCH SERVICES					5,250.50
f BUILDING SERVICES					5,250.00
g Fees and contracts from government agencies					
94 Membership dues and assessments					41,152.50
95 Interest on savings and temporary cash investments					192.16
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					8,682.70
103 Other revenue: a CAN. EXCHG. + BANK INT.					987.41
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					78,018.23
105 Total (add line 104, columns (B), (D), and (E))					78,018.23

Note: (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.)

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). (See instructions on page 24.)
93 a	PUBS. PRESERVE + DISSEMINATE GENEALOGICAL KNOWLEDGE + DATA
b	CONFERENCES SERVE TO EDUCATE + INFORM ON GENEALOGICAL/HISTORICAL MATTERS
c	"GENEALOGIST" ADS KEEP MEMBERS INFORMED ON PUBLICATIONS + RESEARCH TOOLS AVAIL. FOR SALE
d	LIBRARY SERVES AS CENTER FOR GENEALOG. RESEARCH/STUDY + PROVIDES TOOLS TO DO RESEARCH
e	RES. SERVICES PROVIDES FAMILY GEN. STUDIES FOR MEMBERS + NON MEMBERS WHO CANNOT COME TO THE LIBRARY - FEES CHARGED ARE USED TO PURCHASE MORE GENEALOGICAL RESEARCH TOOLS SUCH AS MICROFILM/FISCHE OF VITAL STATISTICS, ETC.
f	NH STATE LIBRARY - DUPLICATE BOOK STORAGE/DISTRIBUTION

Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on line 88 is checked.)

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
	%			
	%			
	%			
	%			

Please Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. (See Specific Instructions, page 9.)

Signature of officer: Pauline Cusson Date: 4/2/96 Type or print name and title: PAULINE CUSSON, TREASURER

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's social security no.: _____

Firm's name (or yours if self-employed) and address: _____ EIN: _____ ZIP code: _____

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information

See separate instructions.

1995

Department of the Treasury
Internal Revenue Service

▶ Must be completed by the above organizations and attached to their Form 990 (or 990-EZ).

Name of the organization

AMERICAN-CANADIAN GENEALOGICAL SOCIETY

Employer identification number

51-0185878

Part I

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions on page 1. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶				

Part II

Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions on page 1. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	NONE	

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		<input checked="" type="checkbox"/>
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sale, exchange, or leasing of property?		<input checked="" type="checkbox"/>
b Lending of money or other extension of credit?		<input checked="" type="checkbox"/>
c Furnishing of goods, services, or facilities?		<input checked="" type="checkbox"/>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		<input checked="" type="checkbox"/>
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		<input checked="" type="checkbox"/>
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?		<input checked="" type="checkbox"/>
4 Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions on page 2.)		

Part IV Reason for Non-Private Foundation Status (See instructions on pages 2 through 5.)

The organization is not a private foundation because it is (please check only **ONE** applicable box):

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)
- 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 conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state ▶**
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** An organization that normally receives: **(a) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and **(b) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions on page 4.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions on page 4.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 1994	(b) 1993	(c) 1992	(d) 1991	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	43,565	13,247	1,105	11,718	69,635
16 Membership fees received	40,652	34,847	32,583	25,042	133,124
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.	25,983	20,678	16,189	13,949	76,799
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	791	2,240	2,294	2,799	8,124
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 a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22.	110,991	71,012	52,171	53,508	287,682
24 Line 23 minus line 17.	85,008	50,334	35,982	39,559	210,883
25 Enter 1% of line 23	1,109	710	522	535	
26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a				
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1991 through 1994 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts.	26b				
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c \$				
d Add: Amounts from column (e) for lines: 18 \$ _____ 19 \$ _____ 22 \$ _____ 26b \$ _____	26d \$				
e Public support (line 26c minus line 26d total)	26e \$				
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f %				
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from each "disqualified person." Enter the sum of such amounts for each year: (1994) NONE (1993) NONE (1992) NONE (1991) NONE					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1994) NONE (1993) NONE (1992) NONE (1991) NONE					
c Add: Amounts from column (e) for lines: 15 \$ _____ 16 \$ _____ 17 \$ _____ 20 \$ _____ 21 \$ _____	27c \$				
d Add: Line 27a total \$ _____ and line 27b total \$ _____	27d \$				
e Public support (line 27c total minus line 27d total)	27e \$				
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	27f \$				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g %				
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h %				
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1991 through 1994, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions on page 5.)					

ACGS Statement of Income & Expense
1/ 1/95 Through 12/31/95

94-All Accounts
2/ 6/96

Category Description	1/ 1/95- 12/31/95
INCOME/EXPENSE	
INCOME	
1.0 MEMBERSHIP:	
1.1 Dues	3 41,152.50
TOTAL 1.0 MEMBERSHIP	√ 41,152.50 94
2.0 PUBLICATION:	
2.1 Repertoires	3,858.09
2.2 Indexes	680.00
2.3 Video S & R	190.00
2.4 Other	1,600.00
TOTAL 2.0 PUBLICATION	√ 6,328.09 93A
3.0 GENEALOGIST:	
3.1 Back Issues	2,182.75 93C
3.2 Adv Sales	208.18 93C
TOTAL 3.0 GENEALOGIST	2,390.93
4.0 LIBRARY:	
4.1 Photocopy	10A 102 5,169.14
4.2 Maps-Charts	10A 102 2,344.72
4.3 Guest Fees	1,797.85 93D
4.5 Can Soda	10A 102 800.84
4.9 Other	10A 102 368.00
TOTAL 4.0 LIBRARY	10,480.55 10A
5.0 RESEARCH:	
5.1 Income	5,250.50 93E
TOTAL 5.0 RESEARCH	5,250.50 ✓
6.0 CONFERENCE:	
6.1 Attend. Fee	3,025.00
6.2 Raffle	2,938.00
6.3 Other	23.09
TOTAL 6.0 CONFERENCE	93B 5,986.09
7.0 SOCIETY:	
7.1 Gen Fund	1,735.00
7.2 Bldg Fund	25,243.65 } 1A did
7.3 Book Fund	765.00
7.5 Sav Act Int	16.59
7.6 Bld Fnd Int	4 47.87 } 95 302
7.8 Ckg Act Int	127.70
7.9 Other	987.41 103
TOTAL 7.0 SOCIETY	28,923.22
8.0 BUILDING:	
8.1 Rental Inc	5,250.00
TOTAL 8.0 BUILDING	5,250.00

ACGS Statement of Income & Expense
1/ 1/95 Through 12/31/95

94-All Accounts
2/ 6/96

Category Description	1/ 1/95- 12/31/95
TOTAL INCOME	105,761.88
EXPENSES	
11.0 MEMBERSHIP:	
11.1 Postage	1,218.00 ³⁵ ✓
11.2 Supplies	426.00 ³³ ✓
11.3 Maine	1,264.00 ¹⁶
TOTAL 11.0 MEMBERSHIP	2,908.00 ✓
12.0 PUBLICATIO:	
12.1 Postage	181.04 ⁴³ ✓
12.2 Supplies	516.45
12.3 Print Reps	4,085.68 ³⁸ ✓
12.4 Video Tape	220.00
12.5 Jette	1,750.00 ³⁶ ✓
12.9 Other ⁴	3,181.55
TOTAL 12.0 PUBLICATIO	9,934.72 ✓
13.0 GENEALOGIS:	
13.1 Postage	2,763.00 ⁴³ ✓
13.2 Supplies	256.62 ⁴³ ✓
13.3 Printing	14,052.00 ³⁸ ✓
TOTAL 13.0 GENEALOGIS	17,071.62 ✓
14.0 LIBRARY:	
14.1 Postage	14.68 ⁴³ ✓
14.2 Supplies	2,560.20 ⁴³ ✓
14.3 Equip Main	1,289.24 ³⁷ ✓
14.4 Print Info	1,731.00 ⁴³ ✓
14.5 Can Soda	530.00 ⁴³ ✓
TOTAL 14.0 LIBRARY	6,125.12 ✓
15.0 RESEARCH:	
15.1 Postage	142.38
15.2 Supplies	45.00
15.3 Returns	1,094.00
15.4 Other	240.00
TOTAL 15.0 RESEARCH	1,521.38 ✓
16.0 CONFERENCE:	
16.1 Postage	821.05
16.2 Prt Broch	1,006.56
16.3 Speakers	372.89
16.4 Refreshmen	564.20
16.5 Other	100.00
TOTAL 16.0 CONFERENCE	40 2,864.70 ✓
17.0 SOCIETY:	
17.1 Postage	172.09 ³⁵ ✓

ACGS Statement of Income & Expense
1/ 1/95 Through 12/31/95

94-All Accounts
2/ 6/96

Category Description	1/ 1/95- 12/31/95
17.2 Supplies	570.83 33 ✓
17.4 Telephone	863.07 34 ✓
17.5 Oth Insur	1,619.00 37 ✓
17.6 Bad Checks	45.00 7 ✓
17.7 Bank Chg	624.61 38 ✓
17.8 Other	1,060.46 38 ✓
17.9 Fund Exp.	68.00 34 ✓
TOTAL 17.0 SOCIETY	5,023.06
18.0 BLDG&GRNDS:	
18.1 Heat	6,349.68 36 ✓
18.2 Electric	2,559.55 36 ✓
18.3 Water&Sewe	675.76 36 ✓
18.4 Bldg Insur	1,150.00 43A ✓
18.5 Maint-Rep.	5,219.20 36 ✓
18.6 Fire Pro.	523.00 36 ✓
18.7 SNOW REM	1,384.00 34 ✓
18.8 Other Bldg	251.69 34 ✓
Interest Paid - Bldg Loan	6,263.01 41 ✓
TOTAL 18.0 BLDG&GRNDS	24,375.89
Expenses - Other	14.85 43B ✓
TOTAL EXPENSES	69,839.34 ✓
TOTAL INCOME/EXPENSE	35,922.54

Balance Sheet
As of 12/31/95

94-96-All Accounts
1/30/97

Acct	12/31/95 Balance
ASSETS	
Cash and Bank Accounts	
BLDG FUND BNH	2,133.41
CASH ON HAND	22.00
CHECKING BNH	12,852.79
CHEQUING	724.35
PETTY CASH	177.18
SAVINGS SMB 07	674.16
	16,583.89
Total Cash and Bank Accounts	
Assets	
BLDG FUND PLEDG	0.00
BOOK INVENTORY	124,074.77
FURN. & EQUIP.	46,154.35
GAS CO. DEPOSIT	2,100.00
LIBRARY BLDG.	179,782.24
PUBLICATIONS	21,000.00
	373,111.36
Total Assets	
	389,695.25
LIABILITIES & EQUITY	
LIABILITIES	
Liabilities	
BUILDING LOAN	48,500.00
	48,500.00
Total Liabilities	
	48,500.00
TOTAL LIABILITIES	
EQUITY	341,195.25
TOTAL LIABILITIES & EQUITY	389,695.25