## **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

OMB No. 1545-0047

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.

Α	For th	е 1997 с	alendar	year, OR tax year per	od beginning	<u> </u>		, 1997, and end		, 19 er identification number
В	Check i		Please use IRS label or	C Name of organization AMERICAN-CHNA	DIAN GEN	VEALOGICAL	SOCI	Ely of NH.Tuc		185878
	change o Initial ref	of address	print or	Number and street (or F	O. box if mail i	s not delivered to	street a	ddress) Room/suite	E State re	gistration number
	Final ret		type. See	P.O. BOX 64					3763	-03763
$\equiv$		d return	Specific	City or town, state or co		-4			F Check I	if exemption application
	(required	d also for	Instruc- tions.	MANCHESTER	, NH OS	3108-647				is pending
G	Type of	f organiza	ation—▶	Exempt under sect	ion 501(c)( 3	) ◀ (insert r	umber	) OR ▶ 📋 sectio	n 4947(a)(1	) nonexempt charitable trust
Not	te: Sec	tion 501(	c)(3) exe	mpt organizations and	4947(a)(1) no	nexempt charit	ble tr	l		ed Schedule A (Form 990).
H(a) Is this a group return filed for affiliates?										
(b)	) If "Yes	s," enter th	ne numbe	r of affiliates for which this	return is filed:,	. •		J Accounting m	nethod:	Cash
				led by an organization cove			No	Other (sp	pecify) 🕨	
ĸ	Check	here ▶	if the c	roanization's gross receipt	s are normally n	ot more than \$25.	000. The	e organization need r	not file a retu	rn with the IRS; but if it received
K	a Form	n 990 Paci	kage in th	ne mail, it should file a retur	n without finance	cial data. Some st	ites rec	quire a complete ret	urn.	1
No	te: Forr	m 990-EZ	Z may be	used by organizations	with gross red	eipts less than \$	100,00	00 and total assets	less than	\$250,000 at end of year.
-	art i	Revei	nue E	openses, and Chan	ges in Net	Assets or Fu	ınd B	alances (See S	Specific Ir	structions on page 11.)
Ш								(0.50	V////	
	1			gifts, grants, and sin		I	1a	5.824		
	а	•		upport		}		7,027	<b></b> ₩	
	b	Indirect	public	support			1b		— <i>{/////</i> }	
				ontributions (grants)			1c		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	
	d	Total (a	dd lines	1a through 1c) (attac	h schedule o	f contributors)				C 211
				noncash					1d	5824
	2	Progran	Program service revenue including government fees and contracts (from Part VII, line 93)						2	37,463
	3							. 3	66185	
	4		est on savings and temporary cash investments						4	260
	5			interest from securiti			• •		5	
	1 _	_				· · · i	6a	5242		
	6a	Gross r				1	6b			
	b			penses					6c	5242
60				me or (loss) (subtrac		n line baj			j   7	7
Revenue	7			ent income (describe	1 .	A) Securities	1	(B) Other		
ě	8a			from sale of assets	other	-y coodinact	0-	(5) 5	(////	
<b>E</b>		than in	ventory		• •		8a		— <i>₹////</i> //	
	b			her basis and sales exp			8b			
	С	Gain or	r (loss) (	attach schedule)			8c			
	d	Net gai	n or (los	s) (combine line 8c, co	olumns (A) ar	ıd (B))			. 8d	
	9	Specia	l events	and activities (attacl	n schedule)					
	а	Gross i	revenue	(not including \$		of				
				reported on line 1a) .			9a			
	ь			penses other than fu			9b			
	C			(loss) from special e			n line	9a)	. 9c	
	10a			inventory, less return			10a	·		
	Ь			goods sold			10b			
				loss) from sales of inver			ct line	10b from line 10a	10c	1,845
	11	•		(from Part VII, line 1						1,657
	12	Total r	evenue	(add lines 1d, 2, 3, 4,	5, 6c, 7, 8d,	9c, 10c, and 1	I)		. 12	113,476
	13			ces (from line 44, col					140	53,453
S	14								• -	26,875
şuş	45							33/		
Expenses	15								•	1,343
ш	16   17			affiliates (attach schedes (add lines 16 and					• —	82.002
	+									31,474
Net Assets	18		-	ficit) for the year (sub					.	387432
Ass	19			fund balances at beg					•	
<u>=</u>	20			s in net assets or fun					. 20	1,277
Z	21	Net ass	sets or f	und balances at end of	ot year (comb	ine lines 18, 19	, and	∠∪)	. 21	420,183

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 Specific Instructions on page 15.)

Carants and allocations (attach schedule)   (cash \$		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
(cash \$ generals of individuals (station schedule) 23 Specific assistance to individuals (station schedule) 24 Benefits paid to or for members (attach schedule) 25 Compensation of officers, circctors, etc. 25 Compensation of officers, circctors, etc. 25 Compensation of officers, circctors, etc. 25 Cother employee benefits 28 Cother employee benefits 31 Cother employee and shipping 47 Cother employee and			(//////				
Specific assistance to individuals (attach schedule)  28 Benefits paid to or for members (tattics schedule)  29 Compensation on officers, directors, etc.  20 Compensation on officers, directors, etc.  21 Legal fees  22 Legal fees  33 Compensation on officers, etc.  34 Compensation of the etc.  35 Compensation on officers, etc.  36 Cocupany of etc.  37 July July July July July July July July	22		22				
Benefits paid to or for members (attach schedule).  Compensation of officers, directors, etc.  Compensation of officers, etc.  Compensation officers, e	00	·	-			<i>*(////////////////////////////////////</i>	
Compensation of officers, directors, etc. 25  Compensation of officers, directors, etc. 25  Pension plan contributions 27  Pension plan contributions 27  Pension plan contributions 27  Pension plan contributions 27  Payroll taxes 29  Payroll taxes 29  Payroll taxes 29  Payroll taxes 30  Professional fundraising fees 31  Accounting fees 31  Accounting fees 32  Legal fees 32  Legal fees 33  Accounting fees 37  Pension plan development of the plan feet 31  Pension plan development of the plan feet 31  Pension and publications 34  Person and publications 35  Pension and publications 36  Be Printing and publications 36  Conferences, conventions, and meetings 40  Legal Fee 41  Interest 41  Printing 41		·				<i>*(////////////////////////////////////</i>	
Other salaries and wages 26 Other empisory be possible 27 Persion plane contributions 27 Persion plane contributions 27 Persion plane contributions 28 Other empisory be benefits 28 Other empisory be benefits 28 Other empisory be benefits 28 Other empisory benefits 29 Other empisory benefits 29 Other empires 20 Other empires (termize) and president of the springer benefits 31 Other expenses (termize) a 150 Cecural 24 Other expenses (termize) a 150 Cecural 25 Other expenses (termize) a 150 Cecural		,					
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Other expenses (ternize): a Insurance of these point costs some profits provided in the completing olumns (ByR), and program services (attach served, publications issued, etc. Discuss achievements that are not measurable, (Section 501(6)) and (447(4))) nongenizations of clients served, publications primary exempt purpose? ►  RESERECT SETWICE For Exp. St. St. Mark. C. St. St. St. St. St. St. St. St. St. St		<u> </u>					
Payroll taxes   29		•	_				·
Professional fundralising fees   30   31   31   32   33   33   34   34   37   37   37   37		·					· · · · · · · · · · · · · · · · · · ·
Accounting fees 31  Accounting fees 32  Legal fees 32  Legal fees 32  Legal fees 33  Supplies 33  Supplies 33  Supplies 33  Supplies 34  Fleiphone 34  Fleiphone 34  Fleiphone 35  Postage and shipping 36  Postage and shipping 37  Postage and shipping 39  Postage and shipi			-				
Legal fees   32   33   4,332   4,097   1,710   3,31     33   Supplies   33   4,753   753   753     34   Telephone   34   7,73   7,26   6,66     35   Postage and shipping   35   7,746   7,26   6,66     36   Occupancy   36   7,946   7,26   6,66     37   Equipment rental and maintenance   37   241   341     38   Printing and publications   38   33,547   35,547     39   Travel   39   749   1,774     40   Conferences, conventions, and meetings   40   6,216   6,26     41   7,774   7,74     42   Depreciation, depletion, etc. (attach schedule)   42   43   7,74     43   Other expenses (itemize): a \$\int \frac{116}{116} \text{ serve} \text{ 430}   241   7,74     41   Depreciation, depletion, etc. (attach schedule)   42   43   2,462   7,462     43   Other expenses (itemize): a \$\int \frac{116}{116} \text{ 430}   241   241     43   Other expenses (itemize): a \$\int \frac{116}{116} \text{ 430}   241   241     44   Total functional expenses (and line 22 through 43) Organizations completing domine (B) (Program services) any joint costs from a combined educational campalign and functraining solicitation?   43   40   45   45   45   45   45   45   45			1				
33   33   479   75   75   33   34   479   75   33   35   35   35   35   35   35							
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36   36   37   54   19   19   19   19   19   19   19   1					7 2/0		
Equipment rental and maintenance 37 341 341 341 341 39 Printing and publications 38 Printing and publications 39 Travel 39 Travel 39 Travel 40 Conferences, conventions, and meetings 40 L_2/L E_2/L		- · · · · · · · · · · · · · · · · · · ·			1,20		
Printing and publications  38 35.5% 35,5%  39 Travel  Conferences, conventions, and meetings  40 6,216 6,216  41 Interest  41 Interest  42 Depreciation, depletion, etc. (attach schedule)  43 Other expenses (termize): a Insurance  43 2,472  43 2,472  43 2,472  43 2,472  43 2,472  43 2,472  43 2,472  43 2,472  44 Total functional expenses (add ims 22 through 43) Organizations  43 43 6  44 Total functional expenses (add ims 22 through 43) Organizations  44 Fold functional campaign and functiaising solicitation?  45 6  46 **Yes," enter (f) the aggregate amount of these joint costs \$		•			2///	14,087	
Travel  10 Conferences, conventions, and meetings.  11 Interest.  12 Depreciation, depletion, etc. (attach schedule)  13 Other expenses (itemize): a Insertance.  14		• •					
Conferences, conventions, and meetings.  40				27,343	3) <sub>1</sub> .5.75		<del> </del>
Interest   Depreciation, depletion, etc. (attach schedule)   42   Depreciation, depletion, etc. (attach schedule)   43   Other expenses (itemize): a Insucence.   43   2,4f2   3,4f2				2 277	/ 1//		
Depreciation, depletion, etc. (attach schedule)  43 Other expenses (itemize): a Insurance.  43	40	_	-		6,216	1711	
A3a 2,4f2 2,4f2  b Beak Chargel 43b 241 241  c 43b 241 241  d 43d 43d 4  d 43d 43d 4  total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 44 80,659 53,453 24,875 331  Reporting of Joint Costs.—Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?  **Tyes," enter (j) the aggregate amount of these joint costs \$; (ii) the amount allocated to Program services \$; (iii) the amount allocated to Fundraising \$  **Part III Statement of Program Service Accomplishments (See Specific Instructions on page 18.)  **What is the organization's primary exempt purpose? ▶	41		$\overline{}$	1, 117		4/7	
b Bank Charges 43b 241 241  c 43c 43c 43c 43c 43d 43e	42		_	n //C2		2 1/02	
C   d   d   d3d	43			2,482			
43d   43e   43e   43e   43e   43e   43e   44   Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15   44   80,659   53,453   26,875   331	b	Bank Charges	-	241		241	
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completing columns (B)-(0), carry these totals to lines 13-15.   44   0 0 5 7   35,753   26,875   37.888   37.8	е	•••••	43e			<del> </del>	
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reducational campaign and fundraising solicitation?    Yes   No   Yes			1 44	V - / - /		1 2 7	
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(iii) the amount allocated to Management and general \$ ; and (iv) the amount allocated to Fundraising \$  Part III Statement of Program Service Accomplishments (See Specific Instructions on page 18.)  What is the organization's primary exempt purpose?   All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)  a Rublication 1 The A-C Genealegitis our Buarterly Teurnal which Regarded (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)  a Rublication 1 The A-C Genealegitis our Buarterly Teurnal which Regarded (4) organizations (4) organizations to others.)  b RESEARCH SERVICES are for our distance and distance are genealegized (6) organizations (6) organizations (7) organizations		porting of Joint Costs.—Did you report in column	n (B) (I	Program services)			□ Van Mala
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f Total of Program Service Expenses (should equal line 44, column (B), Program services)	edu f "Y (iii) 1 Pa Wha All cof coorga a	corting of Joint Costs.—Did you report in column cational campaign and fundraising solicitation? fes," enter (i) the aggregate amount of these joint cost the amount allocated to Management and general through the purpose and its the organization's primary exempt purpose and its served, publications is sued, etc. Discuss ach anizations and 4947(a)(1) nonexempt charitable trusts fullications and 4947(a)(1) nonexempt ch	omplies \$	Program services) ; (ii) th ; and (iv) th shments (See S ments in a clear an ents that are not in also enter the amou Gur QuarTeri erve and di tods To reco and allocations er rayerer and allocations er rayerer and allocations er rayerer and allocations er rayerer and allocations extra rayerer and allocations extra rayerer and allocations extra rayerer and allocations	e amount allocated a mount allocated a mount allocated pecific Instruction of concise manner assurable. (Section of grants and allocated per and research security of the period research section of the form of t	d to Program services of to Fundraising \$ tions on page 18.  r. State the number on 501(c)(3) and (4) locations to others.  Thick Keeps of the elogical fundings.  O.  Members.  Members.	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)  35,545
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	990 (1				
	rt IV		/41		/D)
N	ote:	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
	45	Cash—non-interest-bearing	50	45	50
	46	Savings and temporary cash investments	14,894	46	50,547
			,		
	47a	Accounts receivable			•
		Less: allowance for doubtful accounts		47c	
	_				
	48a	Pledges receivable			
		Less: allowance for doubtful accounts 48b		48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees		1 1	
		(attach schedule)		50	
	51a	Other notes and loans receivable (attach			
ţ		schedule)			
Assets	b	Less: allowance for doubtful accounts		51c	
4	52	Inventories for sale or use	21,000	52	21,000
	53	Prepaid expenses and deferred charges	2,100	53	575
	54	Investments—securities (attach schedule)		54	
	55a	Investments—land, buildings, and			
		equipment: basis	-		
	b	Less: accumulated depreciation (attach		55c	
		schedule)		56	
	56	Investments—other (attach schedule)		111111	
	b	Less: accumulated depreciation (attach schedule) 57b	234.359	57c	237,632
	58	schedule)	234,359 134,529	58	150,360
	30	Other assets (describe a section of the section of			
	59	Total assets (add lines 45 through 58) (must equal line 74)	406,932	59	460, 164
	60	Accounts payable and accrued expenses		60	
	61	Grants payable	<u> </u>	61	
Š	62	Deferred revenue		62	
ilities	63	Loans from officers, directors, trustees, and key employees (attach		63	
Liabi		schedule)		64a	
Ξ.		Tax-exempt bond liabilities (attach schedule)	19,500	64b	39.981
	1	Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶)	1,7,00	65	_01,10
	65	Other liabilities (describe			
	66	Total liabilities (add lines 60 through 65)	19,500	66	39,981
	Org	anizations that follow SFAS 117, check here ▶ □ and complete lines			,
(n		67 through 69 and lines 73 and 74.			
Balances	67	Unrestricted		67	
lan	68	Temporarily restricted		68	
Ba	69	Permanently restricted		69	
Fund	Org	anizations that do not follow SFAS 117, check here ▶ ☐ and			
Ŀ		complete lines 70 through 74.	IT ALL	7/////	E1177
ō	70	Capital stock, trust principal, or current funds	17,044	70	227/22
ets	71	Paid-in or capital surplus, or land, building, and equipment fund	157 520	71 72	131 200
SS	72	Retained earnings, endowment, accumulated income, or other funds	135 , 527		121,377
Net Assets or	73	Total net assets or fund balances (add lines 67 through 69 OR lines			
ž		70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	387,432	73	420, 183
	1				

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, in Part III, the organization's programs and accomplishments.

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Total liabilities and net assets / fund balances (add lines 66 and 73)

Form	990 (1997)							Page 4
Pa	Reconciliation of Revenu Financial Statements wit Return (See Specific Instru	h Revenue	per	Part	F	Reconciliation of Financial Stater Return		
a b	Total revenue, gains, and other support per audited financial statements ▶ Amounts included on line a but not on	a //3	//////////////////////////////////////	a b	audited fir Amounts	penses and lo nancial statemen included on line	its ▶ 🏅	82,002
(1)	line 12, Form 990:  Net unrealized gains on investments \$			(1)	on line 17 Donated and use of			
.,	Donated services and use of facilities \$  Recoveries of prior			(2)	Prior year ac reported or Form 990.	line 20,		
	year grants \$ Other (specify):				Losses rep line 20, Fo	oorted on rm 990 , \$		
	\$ Add amounts on lines (1) through (4) ▶	b		(4)		<u>\$</u>		
c d	Line <b>a</b> minus line <b>b</b> ▶ Amounts included on line 12, Form 990 but not on line <b>a</b> :	<b>c</b> 1/3,	476	c d	Line a min Amounts i	nts on lines (1) the nus line b ncluded on line but not on line a	► <b>c</b>	6 82,002
(1)	Investment expenses not included on line 6b, Form 990 \$			(1)	Investment not include 6b, Form 99	d on line		
(2)	Other (specify):			(2)	Other (spe			
е	Add amounts on lines (1) and (2) Total revenue per line 12, Form 990 (line c plus line d)	d e //3,	476	е	Total exper	ints on lines (1) anses per line 17, is line d)	Form 990	82,002
Par	List of Officers, Directors, T Instructions on page 20.)			Emple				ated; see Specific
	(A) Name and address		(B) Title a	nd avera	age hours per to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans to deferred compensation	
	BERT HAMEL		PRES.	/DEX	IT 20	0,	0.	0.

(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
ALBERT HAMEL CHESTER, NH	PRESIDENT 20	0.	0.	0.
ROBERT PAQUETTE CANDIA, NH	VICE PRESIDENTIO	0.	0.	0,
GERALO LALONDE W. NOTTINGHAM, NH	TREASURER 20	0,	0,	01
JOHN STANTON' MANCHESTER NH	RECORDING SECRETARY 10	0.	0,	0.
MARY ANNA PAQUETTE MANCHESTER, NH	CORRESPONDING SECRETARY 20	0,	0,	0.
ROBERT MHURIER MHNCHESTER, NH	ARCHIVIST 10	0.	0.	0.
ROLAND MARCHAND HUDSON NH	COMPUTER 15	0.	0.	0,
DONALD'CHAPUT MANCHESTER NH	DIRECTOR 10	0.	0,	0 :
MHRY JEAN COLBURN EAST DERRY, NH	DIRECTOR 10	0.	O.	0.
ANNE-MARIE PERRAULT GOFFS TOWN, NH	DIRECTOR 20	8.	0.	0.

<sup>75</sup> 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 Specific Instructions on page 20.

Par	Other Information (See Specific Instructions on page 21.)			Yes	No
_	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	description of each activity .	76		X
76 77	Were any changes made in the organizing or governing documents but not reported	ed to the IRS?	77		, X
	If "Vee " attach a conformed copy of the changes.				
782	Did the organization have unrelated business gross income of \$1,000 or more during the year	ar covered by this return?.	78a		×
/Ua	If "Ves" has it filed a tax return on Form 990-T for this year?		78b		
70	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If	"Yes," attach a statement	79		X
902	to the experience related (other than by association with a statewide or nationwide organ	ization) through common			
	mambambia, governing bodies, trustees, officers, etc., to any other exempt or nonexer	npi organization:	80a		
b	If "Yes" enter the name of the organization \[ \int \text{Tr.160 Degin Chapter Ato \( \text{MODES} \)	T Lead 15 TOW, 777C			
_	and check whether it is exem	pt OR I nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the	81a   <i>O</i> ,			
	instructions for line 81	81a <i>O</i> ,	81b		
b	Did the organization file Form 1120-POL for this year?		0.0		<del>                                     </del>
82a	Did the organization receive donated services or the use of materials, equipment,	or facilities at no charge	82a		X
	or at substantially less than fair rental value?		111111		
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	82b			<i>X/////</i> //
	Part III)		83a	×	1
83a	Did the organization comply with the public inspection requirements for returns and	aug contributions?	83b	X	
b	Did the organization comply with the disclosure requirements relating to quid pro	)	84a		×
84a	Did the organization solicit any contributions or gifts that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement	that such contributions			X/////.
b	or gifts were not tax deductible?		84b		<u> </u>
85	501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members.	pers?	85a		<del> </del>
oo h	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	·	85b	,,,,,,	nomm.
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below	v unless the organization			
	received a waiver for proxy tax owed for the prior year.				X/////.
С	D	85c	-\////		X//////
d	Section 162(e) lobbying and political expenditures	85d	-\////		<i>XIIII.</i>
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e 85f	<i>-\/////</i>		X//////
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		85g	<i>~~~</i>	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?				
, h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount estimate of dues allocable to nondeductible lobbying and political expenditures for the	following tax year?	85h	<u> </u>	<u> </u>
		Tollotting tax you it it			X/////
86	501(c)(7) organizations.—Enter: a Initiation fees and capital contributions included on line 12	86a	_\\\\\	<b>X</b> ////	<i>XIIII</i> .
h	Gross receipts, included on line 12, for public use of club facilities	86b	_\////		<i>34////</i> //
87	501(c)(12) organizations.—Enter: a Gross income from members or shareholders	87a	-\////	<b>X</b>	<i>X</i> //////
	Gross income from other sources. (Do not net amounts due or paid to other				
_	sources against amounts due or received from them.)	87b	- <i>Y/////</i>	X////	'DY/////
88	At any time during the year, did the organization own a 50% or greater interest in	a taxable corporation or	88		X
	partnership? If "Yes," complete Part IX		<i>77771</i>		
89a	501(c)(3) organizations.—Enter: Amount of tax imposed during the year under:	- 4055 N		X///	<i> }}     </i>
	section 4911 ►; section 4912 ►; section	ion 4059 excess benefit			
t	501(c)(3) and 501(c)(4) organizations.—Did the organization engage in any sect transaction during the year? If "Yes," attach a statement explaining each transaction	tion	89b	1	X
	Enter: Amount of tax imposed on the organization managers or disqualified persor	ns during the year under			
•	sections 4912, 4955, and 4958	<b>▶</b> .			
,	Enter: Amount of tax in 89c, above, reimbursed by the organization	.,			
90a	List the states with which a copy of this return is filed ▶ NEW HAMPSHIK	<u> </u>		• • • • •	
k	Number of employees employed in the pay period that includes March 12, 1997	(See instructions.)			ONE
91	The books are in care of SERALD LALONDE, TREASURER	Telephone no. ►(೨೪೨)	622	-/5	27
	Located at > 4 ELM ST. MANCHESTER IVA	ZIP + 4 ▶ . <i>Q.2196.</i>	1.78	••••	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 10	U47-Check here	• •	•	
	and enter the amount of tax-exempt interest received or accrued during the tax	year ►   92			

Part	VII Analysis of Income-Producing A	Activities (See	Specific Instru	ctions on pag	je 25.)	)	**		
Enter	r gross amounts unless otherwise	Unrelated b	usiness income	Excluded by secti	on 512, 5	513, or 514	(E)		
indica		(A)	(B)	(C)		(D)	Related or exempt function		
93	Program service revenue:	Business code	Amount	Exclusion code		nount	income		
а	Publications -						15,090		
b	GENEALOGIST						1,990		
С	LIBRARY						9,827		
d	RESEARCH						4,507		
е	CONFERENCE					·	6,049		
f	Medicare/Medicaid payments								
	Fees and contracts from government agencie								
_	Membership dues and assessments						61,185		
	Interest on savings and temporary cash investmen	ts					260		
	Dividends and interest from securities								
	Net rental income or (loss) from real estate:								
	debt-financed property				,				
	not debt-financed property								
	Net rental income or (loss) from personal property	/							
	Other investment income								
100	Gain or (loss) from sales of assets other than inventor	ry							
	Net income or (loss) from special events .								
	Gross profit or (loss) from sales of inventory						1545		
103	Other revenue: a SPACE RENTAL						5,242		
b	CANADIANI CURRENCY EXCHANG	E					1,657		
C	,								
d		_							
е		_							
104 S	ubtotal (add columns (B), (D), and (E))	. <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>					197,654		
	otal (add line 104, columns (B), (D), and (E))				.▶		107,654		
	(Line 105 plus line 1d, Part I, should equal th								
Part		•	<del></del>	<del></del>					
Line I		e is reported in col ner than by providi	lumn (E) of Part V ng funds for such	II contributed im purposes).	portant	ly to the a	ccomplishment		
930	PublicaTions preserve and	disseminate	9818210910	el Knowle	dge	2nd	deta		
936	The A-C. GenerlogIST Reeps	members	nembers informed about publications and						
	research Tools 2 vallable								
93C	The Library is the Center	of genezi	ogical ST	udy and p	yord	ides r	esezrch		
	tools and instruction	of beginn	iers by ex	periente	d Vo	lunte	eri		
930		ces 2hces	Try by me	31/ for The			ennot come		
	To the library-Nominal					nove a	dete.		
93/6		cate & info					matters.		
103E	3 Space RenT21 - 2ffords Sp	ace for 1	e STate of	New Han	ر با کا عبر	re DI	v of LIBVZVIC		
	To Stone and distribute	books to	Public LIB	ravies Th	V049	houT	The STETE.		
					,				
Part	IX Information Regarding Taxable Su	ibsidiaries (Con	nplete this Par	t if the "Yes"	box c	on line 8	B is checked.)		
N	Name, address, and employer identification	Percentage of	Nature			otal	End-of-year		
	number of corporation or partnership c	ownership interest	business a	Cuvities	11/0	come	assets		
		%							
		%							
		%					*		
	Under penalties of perjury, I declare that I have exa	mined this return inclu	iding accompania	echadulas end stat	lomonto	and to the	eet of my knowledge		
Pleas	SE   and belief, it is true, correct, and complete. Declar	ation of preparer (other	er than officer) is bas	sed on all information	on of wh	ich preparer	has any knowledge.		
Sign	(See General Instruction U, or page 10.)	15	1-98	BEDAIN !	#) I A I	ine -	מיי מיי מיי מיי		
Here	Signature of officer		10	Time of addition	HLON	NE TR	REASURER		
		Date		Type or print name					
Paid	Preparer's signature		Date	self-		Preparer's :	Nico		
Prepare				employe	<u>a▶∐</u>				
Use On	yours if self-employed)			EIN	<u> </u>	<u> </u>			

### **SCHEDULE A** (Form 990)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information** 

See separate instructions.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service	► Must be completed by the a	See separate instructions bove organizations and atta	3. Iched to their For	m 990 or 990-EZ.	
				Employer identificat	
Part Comp	ensation of the Five Highenstructions on page 1. List	est Paid Employees Ot	ther Than Office	cers, Directors, a	nd Trustees
(a) Name and addres	s of each employee paid more an \$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
1/0	NE				
		•			
	other employees paid over				
Part II Comp	pensation of the Five High- nstructions on page 1. List ea	est Paid Independent ( ach one (whether individu	Contractors found or firms). If	r Professional Set there are none, en	ervices ter "None.")
(a) Name and a	ddress of each independent contractor	paid more than \$50,000	<b>(b)</b> Type	e of service	(c) Compensation
NO	NE				
-					
•		· 			
			,	· .	
			* · · · · · · · · · · · · · · · · · · ·		
Total number of other	ers receiving over \$50,000 for				

Pa	t III	Statements About Activities	1		Yes	No
1	attemp	the year, has the organization attempted to influence national, state, or local legislation, including of to influence public opinion on a legislative matter or referendum?  The enter the total expenses paid or incurred in connection with the lobbying activities.	any	1		X
	Organi organi	zations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Cations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description bying activities.				
2	of its	the year, has the organization, either directly or indirectly, engaged in any of the following acts with trustees, directors, officers, creators, key employees, or members of their families, or with any tax zation with which any such person is affiliated as an officer, director, trustee, majority owner, or princiary:	able			
а	Sale, e	exchange, or leasing of property?		2a		_X_
b	Lendin	g of money or other extension of credit?		2b		×
С	Furnisi	ning of goods, services, or facilities?		2c		X
d	Payme	nt of compensation (or payment or reimbursement of expenses if more than \$1,000)?		2d		X
е	Transfe	er of any part of its income or assets?		2е		×
	If the a	answer to any question is "Yes," attach a detailed statement explaining the transactions.				X
3	Does t	he organization make grants for scholarships, fellowships, student loans, etc.?		3		
4		a statement to explain how the organization determines that individuals or organizations receiving gr s from it in furtherance of its charitable programs qualify to receive payments. (See instructions on pag				
Pai	t IV	Reason for Non-Private Foundation Status (See instructions on pages 2 through 4	1.)			
The	organiza	ation is not a private foundation because it is: (Please check only ONE applicable box.)				
5 6 7 8 9	As A	church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)  sospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  sedical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the state   distate	e hospit	al's r	name,	, city,
10	☐ An (Als	organization operated for the benefit of a college or university owned or operated by a governmental unit so complete the <b>Support Schedule</b> in Part IV-A.)	•	7		
11a	Se	organization that normally receives a substantial part of its support from a governmental unit or faction 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	rom the	gen	eral p	ublic.
11b 12	An rec	community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) organization that normally receives: (1) more than 331/3% of its support from contributions, memileipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) resupport from gross investment income and unrelated business taxable income (less section 511 tax) for the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in	<b>no more</b> om busir	thai nesse	n 331/s	% of
13	des	organization that is not controlled by any disqualified persons (other than foundation managers) and scribed in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of stion 509(a)(3).)  Provide the following information about the supported experience (See instructions on page 4.)	f section			
		Provide the following information about the supported organizations. (See instructions on page 4.)  (a) Name(s) of supported organization(s)	b) Line n			
	•	(e) manifely of supported digenization(s)	from a	above	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·					
			y design		on or Only	i (Section

14 at An organization organized and operated to test for public safety. Section 509(a)(4): (See Instructions on page 4.) A stores of the store

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.

,	Note: You may use the worksheet in the	he instructions fo		m the accrual to t	he cash method	or accounting.
Caler	ndar year (or fiscal year beginning in) . 🕨	(a) 1996	<b>(b)</b> 1995	(c) 1994	(d) 1993	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).	17,061	27,744	43,565	13, 247	101,617
	Membership fees received	55,588	41,152	40,652	34,847	172,239
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.	48,452	35,686	25, 9,83	20,678	130,799
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	195	1,180	791	2,240	4,406
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	121,296	105,762	110,991	71,012	409,061
24	Line 23 minus line 17	72,844	70,076	\$5,008	50,334	278, 262
25	Enter 1% of line 23	11,213	1,058	1,110	710	
26	Organizations described in lines 10 or 11:	a Enter 2% of	amount in colun	nn (e), line 24 .	. ▶ 26a	
b	person (other than a governmental unit or public 1996 exceeded the amount shown in line 26a.	cly supported org Enter the sum o	anization) whose f all these exces	e total gifts for 198 ss amounts	d by each 33 through	
C	Total support for section 509(a)(1) test: Enter li			• • • • •		
d	22	1.7	19 26b		▶ 26d	
e f	Public support percentage (line 26e (numera		line 26c (denon		▶ 261	%
27	Organizations described on line 12: a For person," attach a list to show the name of, and of such amounts for each year.	d total amounts r	eceived in each	year from, each	disquaimed person	on. Enter the sum
b	(1996)	eceived from a note he larger of (1)	ondisqualified pe the amount on I duals.) After cor	erson, attach a lis line 25 for the ye mouting the differ	t to show the nar ar or <b>(2)</b> \$5,000. Tence between the	ne of, and amount (Include in the list e amount received
	(1996) (1995)					······································
C	Add: Amounts from column (e) for lines: 15 17	101,617	16 <u>172,</u> 21	<u> </u>	> 270	404,655
ď	Add: Line 27s total	and line 27b tol	al		>  2/1	404,655
8	Public support (line 27c total minus line 27d to	otal)		1 274 16 4		
f		amount on line 2	3, column (e) .	. P <u>4/1   9-7</u>	▶ 27	98.92 %
g h		ator) divided by umn (e) (numera	ator) divided by	line 27f (denom		1.00
28	Unusual Grants: For an organization describ attach a list (which is not open to public inspe grant, and a brief description of the nature of	ed in line 10, 11	, or 12 that rec	eived any unusua name of the con	al grants during 1 tributor, the date	and amount of the
* , +	grant, and a brief description of the nature of	the grant. Do no	t include these	yıanısınını ib.	(COC #13ti UCTIO113	יי אראס אין

Part V

Private School Questionnaire (See instructions on page 4.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			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		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32 a	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		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
ď	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
8	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
•	Educational policies?	33e	-	
· f	Use of facilities?	33f		
g	Athletic programs?	33g	$\dashv$	·
h	Other extracurricular activities?	33h		
·	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
F 4 1		34b		
	Has the organization's right to such aid ever been revoked or suspended?			
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	35		

	dule . it V	A (Form 990) 1997	n Regarding T	ranctore To and Transacti	one and Dolationaking With Name to "	P	age
LE	LAV		rganizations	ransfers to and transaction	ons and Relationships With Noncharit	iable	
51	Did 501	the reporting orgalic) of the Code (o	anization directly o	or indirectly engage in any of the 501(c)(3) organizations) or in sec	e following with any other organization descrittion 527, relating to political organizations?	ped in se	ectio
а				n to a noncharitable exempt or		Yes	No
		Cash			51a	(i)	X
		Other assets .			a(ii		Χ
b	Oth	er transactions:					
	(i) Sales of assets to a noncharitable exempt			exempt organization	<u>b(i)</u>		X
	(ii) Purchases of assets from a noncharitable exempt organization						X
	(iii)	Rental of facilities	s or equipment .		b(iii		<u> </u>
							×
	(v)	Loans or loan gu	arantees		<u>b(v)</u>		X
				rship or fundraising solicitations		1	X
С				lists, other assets, or paid empl			X
ď	goo	ds, other assets, or	services given by t	he reporting organization. If the o	Column (b) should always show the fair market varianization received less than fair market value in ds, other assets, or services received:	value of t any	he
(a Line	-	(b) Amount involved	Name of nor	(c)	(d)  Description of transfers, transactions, and sharing a	rrangeme	nte
		71	Traine of the	ionando oxompt organization	Description of transfers, transactions, and sharing e	a la igente	
-			1				
						•	
				,			
						-	
				· · · · · · · · · · · · · · · · · · ·			
		.'					
	desc	cribed in section 50 es," complete the	01(c) of the Code (	(other than section 501(c)(3)) or	ne or more tax-exempt organizations in section 527?	 ss 🗆	No
(a) Name of organization		(b) Type of organization	(c) Description of relationship				
·							
				****			
		· · · · · · · · · · · · · · · · · · ·					
<u> </u>		<del></del>					
		· · · · · · · · · · · · · · · · · · ·					

AMERICAN-CANADIAN GENEALOGICAL	SOCIETY of NH Inc.	\$1-0185878
SUPPORTING STATEMENT OF		
FORM 990 Pg1 Line 20		7
DESCRIPTION		AMOUNT
Retained Edvnings Adjustment		1,277

...\*

:

### **SCHEDULE A** (Form 990)

Internal Revenue Service

## Organization Exempt Under Section 501(c)(3)

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

Supplementary Information

See separate instructions.

Must be completed by the above organizations and attached to their Form 990 or 990-EZ. Employer identification number

OMB No. 1545-0047

Part I	Compensation of the Five High	est Paid Employees Ot	her Than Oπic	ers, Directors, a	nd Trustees
	(See instructions on page 1. List	each one. If there are no	one, enter "Nor	ie.")	(e) Expense
(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	account and other allowances
	NONE				
	140105				
					•
					•
•••••					
		gr.			
			·		
Total num	ber of other employees paid over				
50,000 .		15:11-1		- Professional Se	//////////////////////////////////////
Part II	Compensation of the Five High (See instructions on page 1. List e	est Paid Independent ( ach one (whether individu	uals or firms). If	there are none, en	ter "None.")
(a)	Name and address of each independent contracto	-		e of service	(c) Compensation
<i>N</i> .	ONE				
					n:
	ber of others receiving over \$50,000 for	1	*/////////////////////////////////////		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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.

	Note: You may use the worksheet in		r converting from	n the accrual to	the cash method	(a) Total	
Cale	ndar year (or fiscal year beginning in) . 🕨	(a) 1996	<b>(b)</b> 1995	(c) 1994	(d) 1993	(e) Total	
15	Gifts, grants, and contributions received. (Do				/7 0.47	(0) 1,7	
	not include unusual grants. See line 28.)	17.061	27. 744	43,565	13,247	101,611	
16	Membership fees received	55,588	41,152	40,652	34,847	172, 239	
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.	48452	35,686	25,983	20,678	130,799	
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	195	1,180	791	2, 240	4,406	
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	121,296	105,762	110,991	71,012	409,061	
24	Line 23 minus line 17	72,844	70,076	85,00 F	50,334	278 262	
25	Enter 1% of line 23	1,2/3	1,058	1,110	7/0		
26	Organizations described in lines 10 or 11:	a Enter 2% of	amount in colum	ın (e), line 24 .	▶ 268		
b	Attach a list (which is not open to public insper person (other than a governmental unit or publ 1996 exceeded the amount shown in line 26a Total support for section 509(a)(1) test: Enter	icly supported org	anization) whose of all these exces	s amounts	93 through y		
ر د	Add: Amounts from column (e) for lines: 18		19				
u	22		26b		▶ 260	1	
	Public support (line 26c minus line 26d total)				▶ 266	·	
f	Public support percentage (line 26e (nume	rator) divided by	line 26c (denom	ninator))	▶ 26	<u> </u>	
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:  (1996)						
	and the larger amount described in (1) or (2),	, enter the sum of	these difference	es (the excess at	Houris) for each	your.	
c	: Add: Amounts from column (e) for lines: 15	101,617					
d	Add: Line 27a total .	and line 27b to	tal	· · ·	•   27	e 404,655	
e	Dublic current (line 27c total minus line 27d	total\			▶ 2/		
1	Total support for section 509(a)(2) test: Enter	r amount on line 2	23, column (e) .	. ► 2/f  \$	707,061	18 198.42 %	
ç	Public support percentage (line 27e (nume Investment income percentage (line 18, co	erator) divided by olumn (e) (numer	ator) divided by	line 27f (denon	ninator)). > 27	h 1.02 %	
28	Unusual Grants: For an organization descriattach a list (which is not open to public insportant, and a brief description of the nature of	ibed in line 10, 11	I, or 12 that rece	eived any unusu	al grants during atributor, the date	ally alliquit of the	

Sched	ule A (Form 990) 1997			age 4
Par	Private School Questionnaire (See instructions on page 4.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
			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		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32 a	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		ļ .
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?			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		-
đ	Scholarships or other financial assistance?	33d		╁
•	Educational policies?	33e		
f	Use of facilities?	33f		-
9	Athletic programs?	33g		-
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	<u> </u>	-
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
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	35		

	t VI-A Lobbying Expenditures by Ele	ecting Public C	harities (See	instructions or	n page 6.)	•	Page
•	(To be completed ONLY by an	eligible organiz	ation that file	d Form 5768)			
	k here <b>a</b> if the organization belongs to the k here <b>b</b> if you checked "a" above an	o an affiliated ground	ip. " provisions apr	nlv.			
nec	k here ▶ b ☐ if you checked "a" above ar Limits on Lobbyin				(a) Affiliated grout totals		(b) be completed ALL electing
	(The term "expenditures" mea	ns amounts paid o	or incurred.)				ganizations
6	Total lobbying expenditures to influence public	opinion (grassroo	ts lobbying) .	36			
- 7 .	Total lobbying expenditures to influence a legis	slative body (direct	lobbying)	37			
8	Total lobbying expenditures (add lines 36 and	37)		38			
9	Other exempt purpose expenditures				N	_	
0	Total exempt purpose expenditures (add lines	38 and 39)					
1	Lobbying nontaxable amount. Enter the amount						
		bbying nontaxable		, <i>/////</i>			
	Not over \$500,000	f the amount on lir	ne 40				
	Over \$500,000 but not over \$1,000,000 \$100,00	00 plus 15% of the	excess over \$50	00,000 41			,,,,,,,,,,,,,
	Over \$1,000,000 but not over \$1,500,000 .\$175,00	00 plus 10% of the e	excess over \$1,00	00,000			
	Over \$1,500,000 but not over \$17,000,000 .\$225,00	.000		1 0/////			
^	Over \$17,000,000						
2 3	Subtract line 42 from line 36. Enter -0- if line 4						
4	Subtract line 41 from line 38. Enter -0- if line 4			44			
		•					
	Caution: If there is an amount on either line 43	3 or line 44, you m	ust file Form 47	720. <i>//////</i>			
		Lobt	ying Expendit	ures During 4-Ye	ar Averagin	g Period	
	Calendar year (or	(a)	(b)	(c) 1995	(d) 1994		(e) Total
	fiscal year beginning in) ▶	. 1997	1996	1995			Total
5	Lobbying nontaxable amount				° <b>€</b>	ľ	
_							
6	Lobbying ceiling amount (150% of line 45(e)).			<b>X</b>			
7	Total lobbying expenditures						· · ·
						,	
8	Grassroots nontaxable amount				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
9	Grassroots ceiling amount (150% of line 48(e))						
_	Construction of the constr						
0	Grassroots lobbying expenditures	eting Bublic Ch	aritios	1	<u> </u>		
Ċ	rt VI-B Lobbying Activity by Nonele (For reporting only by organization)	eting Public Cr ations that did r	not complete	Part VI-A) (See	instruction	s on pa	ıge 7.)
Our	ng the year, did the organization attempt to infl	uence national, sta	ate or local legi	slation, including			Amount
- 44	mpt to influence public opinion on a legislative			use or.			
							///////////////////////////////////////
а	Volunteers			c through h			
a b	Paid staff or management (Include compensate	tion in expenses re	eported on lines	c through h.)			
а	Paid staff or management (Include compensation Media advertisements	tion in expenses re	eported on lines	c through h.)			

		35	NO	Amount
	mpt to influence public opinion on a legislative matter or referendum, through the use of:	$\neg$		
	Volunteers			
b	Paid staff or management (Include compensation in expenses reported on lines c through h.)		$\dashv$	
C	: Media advertisements	$\dashv$		
d	Mailings to members, legislators, or the public	-+		·
е	Publications, or published or broadcast statements	$\dashv$		
f	Grants to other organizations for lobbying purposes		-	
g	Direct contact with legislators, their staffs, government officials, or a legislative body	4		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means	<i></i>	,,,,,,,	
i	Total lobbying expenditures (add lines c through h)			
	If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activitie			

Par	t VII	Information Exempt Or		nsfers To and Transactio	ns and Relationships With No			
51	Did 5010	the reporting organ (c) of the Code (oth	nization directly or intermediate than section 50°	indirectly engage in any of the I(c)(3) organizations) or in secti	following with any other organization 527, relating to political organization	on described tions?		
а				to a noncharitable exempt orga		<del></del>	Yes	No
_						51a(i)	ļ	X
		Other assets				. <u>a(ii)</u>		<u>×</u>
ь	Othe	er transactions:		•				\ \
_			a noncharitable ex	empt organization		. <u>b(i)</u>		X
				table exempt organization		. <u>b(ii)</u>	1	X
	(iii)					b(iii)		×
	(iv)		* *			b(iv)		_
	(v)		_			<u>b(v)</u>	-	X_
	(vi)	Performance of se	ervices or members	hip or fundraising solicitations		b(vi)		<u> </u>
С	Sha	ring of facilities, eq	uipment, mailing lis	sts, other assets, or paid emplo	yees	. <u> </u>	<u> </u>	X
	good	ds, other assets, or saction or sharing a	services given by the	e reporting organization. If the or column (d) the value of the good	Column (b) should always show the faganization received less than fair marks, other assets, or services received:  (d)	air market va ket value in a	lue of iny	the
-	a) s no.	(b) Amount involved	Name of nonc	(c) haritable exempt organization	Description of transfers, transactions, a	and sharing arr	angem	ents
				<u> </u>				
				·				
			<u> </u>					
	<del>.</del>							
			<u>,</u>					
	<u>:</u> -							
	-							
					-			
				<u> </u>				
•								
	des	cribed in section 5 Yes," complete the	ectly or indirectly a 01(c) of the Code (c following schedule	other than section 501(c)(3)) or	ne or more tax-exempt organization in section 527?	ns ▶ □ Ye	s D	₹ No
		(a) Name of organiz	zation	(b) Type of organization	(c) Description of relat	ionship		
					<u> </u>			
<del></del>					<del></del>			
				<u>.</u>		•		
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Instructions For Filling out 990 Fed. TAX RETURN

Category Description	1/ 1/97- 12/31/97 Line on
INCOME/EXPENSE INCOME 1.0 MEMBERSHIP: 1.1 Dues	61,184.60 Form 990
TOTAL 1.0 MEMBERSHIP 2.0 PUBLICATION: 2.1 Repertoires 2.2 Indexes 2.3 Video S & R 2.4 Jette	61.184.60 <b>3</b> - <b>9</b> 4 6.921.88 693.95 44.00 7.430.00
TOTAL 2.0 PUBLICATION 3.0 GENEALOGIST: 3.1 Back Issues 3.2 Adv Sales	15,089.83 <b>2 - 93 3</b> 1,814.60 175.00
TOTAL 3.0 GENEALOGIST 4.0 LIBRARY: 4.1 Photocopy 4.2 Maps-Charts 4.3 Guest Fees 4.5 Can Soda 4.6 Candy 4.7 Hats 4.8 Fiche Copie 4.9 Other	1,989.60 2- 936 3,572.75 2
TOTAL 4.0 LIBRARY 5.0 RESEARCH: 5.1 Income	11,671.80
TOTAL 5.0 RESEARCH 6.0 CONFERENCE: 6.1 Attend. Fee 6.2 Raffle 6.3 Other	4,507.05 <b>2</b> -93d 2,604.00 2,905.03 540.00
TOTAL 6.0 CONFERENCE 7.0 SOCIETY: 7.1 Gen Fund 7.2 Bldg Fund 7.3 Book Fund 7.5 Sav Act Int 7.6 Bld Fnd Int 7.8 Ckg Act Int 7.9 Other	6,049.03 2 - 93 e  430.25 / 3   5824  687.30 / 3   43.22 4   - 95 260  108.78 4   108.06 4   1036
TOTAL 7.0 SOCIETY 8.0 BUILDING:	6,984.34

# 94-96-All Accounts 1/ 4/98

Category Description	1/ 1/97- 12/31/97
8.1 Rental Inc 8.9 Other	5,250.00 -7.98
TOTAL 8.0 BUILDING Income - Other	5,242.02 <b>3</b> - 103 A 757.31 11- 103
TOTAL INCOME	113,475.58
EXPENSES 11.0 MEMBERSHIP: 11.1 Postage 11.2 Supplies 11.3 Maine 11.9 Other	1,449.43 356 492.82 33 6 1,343.00 6 284.47 33 6
TOTAL 11.0 MEMBERSHIP 12.0 PUBLICATIO: 12.1 Postage 12.2 Supplies 12.3 Print Reps 12.5 Jette 12.9 Other 12.0 PUBLICATIO - Other	3,569.72 560.28 356 757.87 335 4,664.29 386 6,845.57 386 36.00 386 0.00
TOTAL 12.0 PUBLICATIO 13.0 GENEALOGIS: 13.1 Postage 13.2 Supplies 13.3 Printing	12,864.01 3,933.20 356 80.97 336 23,190.00 386
TOTAL 13.0 GENEALOGIS 14.0 LIBRARY: 14.1 Postage 14.2 Supplies 14.3 Equip Main 14.4 Print Info 14.5 Can Soda 14.6 Candy	27,204.17  194.87 356 603.73 376 340.97 376 438.84 366 199.00 43 C-C 1,226.68 43 C-C
TOTAL 14.0 LIBRARY 15.0 RESEARCH: 15.1 Postage 15.3 Returns 15.4 Other	$3,004.09$ $ \begin{array}{ccccccccccccccccccccccccccccccccccc$
TOTAL 15.0 RESEARCH 16.0 CONFERENCE: 16.1 Postage 16.2 Prt Broch 16.4 Refreshmen	706.50  855.75 356  369.50 386  231.67 406

94-96-All Accounts 1/ 4/98

Category Description	1/ 1/97- 12/31/97
16.5 Other (speakers)	~ 2,116.20 <b>406</b>
TOTAL 16.0 CONFERENCE 17.0 SOCIETY: 17.1 Postage 17.2 Supplies 17.4 Telephone 17.5 Oth Insur 17.6 Bad Checks 17.7 Bank Chg 17.8 Other 17.9 Fund Exp.	3,573.12 686.20 350 1,909.52 330 752.90 340 2,482.00 43 2-0 50.50 436-0 190.47 436-0 3.867.63 400-6 330.92 33.6
TOTAL 17.0 SOCIETY 18.0 BLDG&GRNDS: 18.1 Heat 18.2 Electric 18.3 Water&Sewe 18.5 Maint-Rep. 18.6 Fire Pro. 18.7 Snow Remov 18.9 Interest	10,270.14  7.306.38 366 2.701.57 366 490.52 366 4.688.71 366 480.00 366 3.270.00 366 1.713.60 416
TOTAL 18.0 BLDG&GRNDS Expenses - Other	20,650.78 150.53 <b>36 c</b>
TOTAL EXPENSES	81,993.06 82002
TOTAL INCOME/EXPENSE	31,482.52

17.8 175.00 Booth at NE + Ad

100.00 Donation (Flowers)

629.34 Copier Regiser

1826.00 Computer - Pentium

200,00 is Zyp Drive

330.00 Tax Dreps

308.19 Involving Farmiture

59.70 Internet

53.00 Flowers

31:00 Subscription

300.00 MEHEN