

Return of Organization Exempt From Income Tax

2006

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning January 1, 2006, and ending December 31, 20 06

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
American-Canadian Genealogical Society
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. Box 6478
 City or town, state or country, and ZIP + 4
Manchester, NH 03108-6478

D Employer identification number
51 0185878
E Telephone number
 (**603**) **622-1554**
F Accounting method: Cash Accrual
 Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ _____
H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ **www.acgs.org**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ▶ _____
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a		9,420.78	
	b Direct public support (not included on line 1a)	1b			
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d			
	e Total (add lines 1a through 1d) (cash \$ _____ noncash \$ _____)	1e			9,420.78
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			31,984.32
	3 Membership dues and assessments	3			52,411.75
	4 Interest on savings and temporary cash investments	4			92.18
	5 Dividends and interest from securities	5			0.00
	6a Gross rents	6a		11,375.00	
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c			11,375.00	
7 Other investment income (describe ▶ _____)	7				
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a			
	b Less: cost or other basis and sales expenses	8b			
	c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d				
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ _____ of contributions reported on line 1b)	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			
10a Gross sales of inventory, less returns and allowances	10a		3,744.60		
	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			3,744.60
11 Other revenue (from Part VII, line 103)	11			331.88	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			109,360.51	
Expenses	13 Program services (from line 44, column (B))	13		43,577.84	
	14 Management and general (from line 44, column (C))	14		43,011.96	
	15 Fundraising (from line 44, column (D))	15		0.00	
	16 Payments to affiliates (attach schedule)	16		0.00	
	17 Total expenses. Add lines 16 and 44, column (A)	17			86,589.80
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		22,878.10	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		730,198.44	
	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			753,076.54

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 the instructions.)

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
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)				
25b	b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
25c	c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
26	Salaries and wages of employees not included on lines 25a, b, and c				
27	Pension plan contributions not included on lines 25a, b, and c				
28	Employee benefits not included on lines 25a - 27				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees	175.00		175.00	✓
33	Supplies	3,446.93	3,446.93		✓
34	Telephone	1,602.77	1,602.77		✓
35	Postage and shipping	6,533.54	5,883.54	650.00	✓
36	Occupancy	38,297.48		38,297.48	✓
37	Equipment rental and maintenance	2,080.20	2,080.20		✓
38	Printing and publications	25,997.78	25,997.78		✓
39	Travel				
40	Conferences, conventions, and meetings	363.75	363.75		✓
41	Interest	2,101.94	2,101.94		
42	Depreciation, depletion, etc. (attach schedule)	1,994.55			
43	Other expenses not covered above (itemize):				
43a	a Bank Fees	408.70	408.70		✓
43b	b Insurance & Bonds	2,113.00		2,113.00	✓
43c	c Subscriptions	470.50	470.50		✓
43d	d Credit Card Fees	332.07		332.07	✓
43e	e Computer & Internet Exp	2,236.14	791.73	1,444.41	✓
43f	f Membership - Advertising & refunds	430.00	430.00		✓
43g	g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	86,589.80	43,577.84	43,011.96	

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? 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 the instructions.)

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.

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.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a PUBLICATIONS - American-Canadian Genealogist [quarterly journal]; REPERTOIRES - preservation and dissemination of church vital records; Maps & Charts - to record research & findings and for teaching tools for researchers _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	39,573.54
b RESEARCH SERVICES - for members and non-members who wish to have their genealogy research done by ACGS Used mostly by distant members _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	3,352.55
c CONFERENCES - workshops for all levels of genealogical research held bi-annually _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	363.75
d ACQUISITIONS - increase our holdings of genealogical & historical data. _____ _____ _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	282.00
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ▶	43,571.84

Part IV Balance Sheets (See the instructions.)

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	350.00	45	350.00 ✓
	46 Savings and temporary cash investments	28,569.09	46	31,628.16
		27,154.08		2
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	489.70	47c 641.76 ✓
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b		48c
	49 Grants receivable			49
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b		51c 5
	52 Inventories for sale or use		64,908.82	52 64,908.82
	53 Prepaid expenses and deferred charges			53
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54a
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b
	55a Investments—land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b		55c
	56 Investments—other (attach schedule)			56
57a Land, buildings, and equipment: basis	57a			
b Less: accumulated depreciation (attach schedule)	57b		57c	
58 Other assets, including program-related investments (describe ►)		340,288.59	58 340,798.59 ✓	
59 Total assets (must equal line 74). Add lines 45 through 58		746,312.82	59 752,315.98 ✓	
Liabilities	60 Accounts payable and accrued expenses	746,897.81	60	607 ✓
	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)		952,640	64a
	b Mortgages and other notes payable (attach schedule)		37,247.38	64b 19,963.36 ✓
	65 Other liabilities (describe ►)		37,952.64	65
	66 Total liabilities. Add lines 60 through 65		37,247.38	66 19,963.36 ✓
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	389,273.4	70	22,776.71 ✓
	71 Paid-in or capital surplus, or land, building, and equipment fund 53? 798.15	39,087.99	71	517,014.97 ✓
	72 Retained earnings, endowment, accumulated income, or other funds	516,504.53	72	192,560.94 ✓
	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)	153,472.95	73	732,352.62 ✓
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	732,198.42	74	752,315.98 ✓

746,897.81

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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	32,061	4,323	7,899	6,316	50,599
16 Membership fees received	54,789	56,057	61,242	61,242	233,330
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	36,660	33,667	36,136	22,483	128,946
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	100	117	212	250	679
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	123,610	105,747	105,489	90,291	413,554
24 Line 23 minus line 17	86,950	72,080	69,353	67,808	284,608
25 Enter 1% of line 23	1,236	1,057	1,054	903	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶	26a	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total 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," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2005) **-0-** (2004) **-0-** (2003) **-0-** (2002) **-0-**

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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 11b, as well as individuals.) **Do not file this list with your return.** 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:

(2005) **0-0** (2004) **-0-** (2003) **-0-** (2002) **-0-**

c Add: Amounts from column (e) for lines: 15 <u>50,599</u> 16 <u>233,330</u> 17 <u>128,946</u> 20 <u>-0-</u> 21 <u>-0-</u> ▶	27c	412,875
d Add: Line 27a total _____ and line 27b total _____ ▶	27d	412,875
e Public support (line 27c total minus line 27d total) ▶	27e	-0-
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶	27f	-0-
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	-0- %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	-0- %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	109,360.51
b	Amounts included on line a but not on Part I, line 12:		
	1 Net unrealized gains on investments	b1	
	2 Donated services and use of facilities	b2	
	3 Recoveries of prior year grants	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 12, but not on line a :		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	109,360.51

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

a	Total expenses and losses per audited financial statements	a	86,583.80
b	Amounts included on line a but not on Part I, line 17:		
	1 Donated services and use of facilities	b1	
	2 Prior year adjustments reported on Part I, line 20	b2	
	3 Losses reported on Part I, line 20	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 17, but not on line a :		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	86,583.80

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(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 plans	(E) Expense account and other allowances
Gerard Savard, President 10 Franklin St., Salem, NH 03079	25	-0-	-0-	-0-
Robert Paquette, Vice President 483 Brown Rd., Candia, NH 03034	15	-0-	-0-	-0-
Pauline Cusson, Treasurer 34 Pleasant St., Salem, NH 03079	35	-0-	-0-	-0-
Mary Jean Chaput, Corresponding Secretary 25 Ridge Rd., Manchester, NH 03104	15	-0-	-0-	-0-
Muriel Normand, Recording Secretary 6 Karen Rd., Windham, NH 03087	10	-0-	-0-	-0-
Jeanne Boisvert, Dir. 30 Riverview Pk., Manch., NH 03102	15			
Lorraine Huppe, Dir., 85 So Elm St, Manchester, NH 03103	10	-0-	-0-	-0-
Roger Lancot, Dir. -512 Weare Rd, New Boston, NH 03070	15			
Paul R. Lambert, Dir. - 49 Linden Concord, NH 03301	10	-0-	-0-	-0-
Anne Gleason, Dir. - 231 Comeau, Manchester, NH 03102	10			
Julie Smith, Dir. - 721 Brent St., Manchester, NH 03103	10	-0-	-0-	-0-
Constance Hebert, Dir. - 313 Elgin, Manchester, NH 03104	15			
Jackie Watson, Dir. - 6 Watkins Ln, Merrimack, NH 03054	10	-0-	-0-	-0-

Part VI Other Information (continued)		Yes	No
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?		✓
	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 in Part III.)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
83b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	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.		
	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 on line 85f?		
	85g		
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	85h		
86	501(c)(7) orgs. 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	501(c)(12) orgs. 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		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
88b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
	89b		
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶		
	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
	89e		
	f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
	89f		
	g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
	89g		
90a	List the states with which a copy of this return is filed ▶ New Hampshire		
	b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	-0-
91a	The books are in care of ▶ Pauline Cusson Telephone no. ▶ (603) 622-1554 Located at ▶ 4 Elm Street, Manchester, NH ZIP + 4 ▶ 03108-6478		
	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ Canada See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
	91b	✓	

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ _____
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | **92** |

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: 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					19,396.48
b Society Journal					464.70
c Library					5,238.59
d Research Services					6,711.90
e Conference & Workshops					172.65
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					52,411.75
95 Interest on savings and temporary cash investments					92.18
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					3,744.60
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Space Rental					11,375.00
b Currency Exchange					(24.64)
c Cash Over					356.52
d Donations					9420.78
e _____					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E))					109,360.51

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

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).
93	Program Services - Collect, preserve, disseminate genealogical information.
94	Membership Dues - Includes receipt of quarterly journal
103a	Space Rental - To State of NH for book depository

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	✓

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.

Please Sign Here

▶ _____ Date _____
Signature of officer

▶ **Pauline Cusson, Treasurer**
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____ Date _____ Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. X) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____ EIN ▶ _____ Phone no. ▶ () _____

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 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

2006

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 page 2 of the instructions. 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-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. 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 ▶

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services ▶

Part III **Statements About Activities** (See page 2 of the instructions.)

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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1		✓

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.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a** Sale, exchange, or leasing of property? **2a** ✓
- b** Lending of money or other extension of credit? **2b** ✓
- c** Furnishing of goods, services, or facilities? **2c** ✓
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? **2d** ✓
- e** Transfer of any part of its income or assets? **2e** ✓

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) **3a** ✓

b Did the organization have a section 403(b) annuity plan for its employees? **3b** ✓

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement **3c** ✓

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? **3d** ✓

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g **4a** ✓

b Did the organization make any taxable distributions under section 4966? **4b** ✓

c Did the organization make a distribution to a donor, donor advisor, or related person? **4c** ✓

d Enter the total number of donor advised funds owned at the end of the tax year ▶ -0-

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . ▶ -0-

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ -0-

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ -0-

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that 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.)
- 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: **(1) 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, and **(2) 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. 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

05/04/07

American-Canadian Genealogical Society

Balance Sheet

As of December 31, 2006

	<u>Dec 31, 06</u>
ASSETS	
Current Assets	
Checking/Savings	
1000 · BANK ACCOUNTS	
1001 · CHECKING ACCOUNT-BNH	14,637.57
1002 · CHEQUING - CANADIAN FUNDS	1,404.25
1003 · BUILDING FUND-BNH	4,593.92
1004 · BOOK FUND-SMB	7,263.51
1005 · CASH ON HAND-CASH REG	150.00
1006 · PETTY CASH-VOLUNTEERS	200.00
1007 · C.D. SMB 10/18/2002	1,113.06
1009 · LIFE MEMB. ACCT. BNH	2,609.85
Total 1000 · BANK ACCOUNTS	<u>31,972.16</u>
Total Checking/Savings	31,972.16
Accounts Receivable	
1100 · ACCOUNTS RECEIVABLE	
1101 · Paid Invoices	-216.14
1100 · ACCOUNTS RECEIVABLE - Other	857.90
Total 1100 · ACCOUNTS RECEIVABLE	<u>641.76</u>
Total Accounts Receivable	641.76
Other Current Assets	
1300 · INVENTORY-RESALE	64,908.85
Total Other Current Assets	<u>64,908.85</u>
Total Current Assets	97,522.77
Fixed Assets	
1500 · Fixed Assets	
1501 · LIBRARY BUILDING	230,172.38
1502 · FURNITURE & EQUIPMENT	110,626.21
1503 · ACGS HOLDINGS	313,988.62
Total 1500 · Fixed Assets	<u>654,787.21</u>
Total Fixed Assets	<u>654,787.21</u>
TOTAL ASSETS	<u>752,309.98</u>
LIABILITIES & EQUITY	
Liabilities	
Long Term Liabilities	
2700 · NOTE PAYABLE	
2701 · NOTES PAYABLE (DROUIN)	80,000.00
Total 2700 · NOTE PAYABLE	80,000.00
2703 · . DROUIN PRINCIPLE	-60,144.03
Total Long Term Liabilities	<u>19,855.97</u>
Total Liabilities	19,855.97

05/04/07

American-Canadian Genealogical Society

Balance Sheet

As of December 31, 2006

	<u>Dec 31, 06</u>
Equity	
3000 · OPENING BALANCE EQUITY	517,014.97
3900 · RETAINED EARNINGS	192,560.94
Net Income	22,878.10
Total Equity	<u>732,454.01</u>
TOTAL LIABILITIES & EQUITY	<u><u>752,309.98</u></u>

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05/04/07
Accrual Basis

American-Canadian Genealogical Society
Income/Expense
January through December 2006

	<u>Jan - Dec 06</u>
Income	
4100 · MEMBERSHIP	
4101 · Dues	51,727.00
4102 · Lifetime Dues	684.75
Total 4100 · MEMBERSHIP	<u>52,411.75</u>
4200 · PUBLICATIONS	
4201 · Used Book Sales	194.95
4202 · AFGS Income	30.00
4203 · Repertoires	11,614.00
4204 · Index & Holdings	322.75
4205 · Jette & White	3,063.28
4206 · CD Roms	973.45
4207 · Fr, Croteau Publications	579.50
4208 · Orphan Pub. & Index	1,943.55
4209 · Other	675.00
Total 4200 · PUBLICATIONS	<u>19,396.48</u>
4300 · GENEALOGIST	
4301 · Back Issues	464.70
Total 4300 · GENEALOGIST	<u>464.70</u>
4400 · LIBRARY	
4401 · All Copies except Drouin copies	2,546.39
4402 · Maps-Charts-Beginners' Course	1,463.65
4403 · Guest Fees	1,228.55
4404 · Drouin Computer Time	2,554.45
4405 · Beverages	267.52
4407 · Logo Mdse (resale items)	17.00
4410 · Drouin Copies & CDs	905.63
Total 4400 · LIBRARY	<u>8,983.19</u>
4500 · RESEARCH	
4501 · Reasearch Income	4,558.50
4502 · Drouin Research Income	2,153.40
Total 4500 · RESEARCH	<u>6,711.90</u>
4600 · CONFERENCE	
4602 · Raffle	54.00
4605 · Refreshments	118.65
Total 4600 · CONFERENCE	<u>172.65</u>
4700 · SOCIETY	
4701 · Drouin Fund Donations	8,387.24
4702 · Bldg Fund	469.54
4703 · Book Fund (Border crossings)	564.00
4704 · Currency Exchange	-24.64
4705 · Cash Over & Short	356.52
4706 · Ckg Act Int	12.04
4707 · Bid Fnd Int	4.90

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Accrual Basis

American-Canadian Genealogical Society
Income/Expense
January through December 2006

	<u>Jan - Dec 06</u>
4708 · Sav Act Int	74.79
4709 · Other	0.45
Total 4700 · SOCIETY	<u>9,844.84</u>
4800 · BUILDING	
4801 · Rent	11,375.00
Total 4800 · BUILDING	<u>11,375.00</u>
Total Income	<u>109,360.51</u>
Gross Profit	109,360.51
Expense	
6100 · MEMBERSHIP EXP	
6101 · Postage	749.81
6102 · Supplies	176.96
6103 · Advertising Expense	400.00
6105 · membership refunds	30.00
Total 6100 · MEMBERSHIP EXP	<u>1,356.77</u>
6200 · PUBLICATIONS EXP	
6201 · Postage	823.00
6202 · Supplies	1,816.13
6203 · Print Reps	7,207.36
6204 · Index & Holdings	33.00
6205 · Jette & White	1,824.64
6206 · CD Roms	553.88
6208 · Orphan Publications	600.00
6209 · Marketing	822.00
Total 6200 · PUBLICATIONS EXP	<u>13,680.01</u>
6300 · GENEALOGIST EXP	
6301 · Postage	4,286.73
6303 · Printing	14,929.72
Total 6300 · GENEALOGIST EXP	<u>19,216.45</u>
6400 · LIBRARY EXP	
6401 · Postage	24.00
6402 · Supplies	930.37
6403 · Printing Maps & Info Sheets	27.18
6404 · Equip. Maint	2,080.20
6407 · Acquisitions - New Books	0.00
6410 · Drouin expenses	88.59
Total 6400 · LIBRARY EXP	<u>3,150.34</u>
6600 · CONFERENCE EXP	
6603 · Printing & Supplies	274.45
6605 · Caterer & Refreshments	89.30
6609 · Other	0.00
Total 6600 · CONFERENCE EXP	<u>363.75</u>

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05/04/07
Accrual Basis

American-Canadian Genealogical Society
Income/Expense
January through December 2006

	<u>Jan - Dec 06</u>
6700 · SOCIETY EXP	
6701 · Postage	650.00
6702 · Supplies	434.88
6703 · Telephone	1,602.77
6704 · Insurance Content/Bond	2,113.00
6705 · Subscriptions	470.50
6707 · Bank Charges	408.70
6709 · Computer Expenses	791.73
6710 · Credit Card Charges	332.07
6712 · Internet Services	1,444.41
6713 · Legal Expenses	175.00
6714 · Drouin-Interest Exp.	1,994.55
Total 6700 · SOCIETY EXP	<u>10,417.61</u>
6800 · BUILDING EXP	
6801 · Heat	14,841.68
6802 · Electricity	3,867.33
6803 · Water-Sewer	571.75
6804 · Insurance - Bldg. & Liab.	2,627.00
6805 · Building Maint.	12,039.72
6806 · Grounds Maint.	3,870.00
6807 · Fire Alarm Fee	480.00
Total 6800 · BUILDING EXP	<u>38,297.48</u>
Total Expense	<u>86,482.41</u>
Net Income	<u><u>22,878.10</u></u>

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2006

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning **January 1**, 2006, and ending **December 31**, 20 **06**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.	C Name of organization American-Canadian Genealogical Society Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. Box 6478 City or town, state or country, and ZIP + 4 Manchester, NH 03108-6478	D Employer identification number 51 0185878 E Telephone number (603) 622-1554 F Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
---	--	--

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ▶ **www.acgs.org**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶
M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

	Description	a	b	c	d	Total
Revenue	1 Contributions, gifts, grants, and similar amounts received:					
	a Contributions to donor advised funds	9,420.98				
	b Direct public support (not included on line 1a)					
	c Indirect public support (not included on line 1a)					
	d Government contributions (grants) (not included on line 1a)					
	e Total (add lines 1a through 1d) (cash \$_____ noncash \$_____)					9,420.78
	2 Program service revenue including government fees and contracts (from Part VII, line 93)					31,984.32
	3 Membership dues and assessments					52,411.75
	4 Interest on savings and temporary cash investments					91.73
	5 Dividends and interest from securities					0.00
	6a Gross rents	11,375.00				
	b Less: rental expenses					
c Net rental income or (loss). Subtract line 6b from line 6a					11,375.00	
7 Other investment income (describe ▶)						
Revenue	8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other			
	b Less: cost or other basis and sales expenses					
	c Gain or (loss) (attach schedule)					
	d Net gain or (loss). Combine line 8c, columns (A) and (B)					
	9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>					
	a Gross revenue (not including \$_____ of contributions reported on line 1b)					
	b Less: direct expenses other than fundraising expenses					
	c Net income or (loss) from special events. Subtract line 9b from line 9a					
	10a Gross sales of inventory, less returns and allowances	3,744.60				
	b Less: cost of goods sold					
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a					3,744.60	
11 Other revenue (from Part VII, line 103)					331.88	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11						109,360.51
Expenses	13 Program services (from line 44, column (B))					45,566.89
	14 Management and general (from line 44, column (C))					40,566.89
	15 Fundraising (from line 44, column (D))					791.73
	16 Payments to affiliates (attach schedule)					0.00
	17 Total expenses. Add lines 16 and 44, column (A)					
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12					22,776.71
	19 Net assets or fund balances at beginning of year (from line 73, column (A))					731,842.18
	20 Other changes in net assets or fund balances (attach explanation)					
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20					

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 the instructions.)

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a			
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b			
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26			
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32	175.00		175.00
33 Supplies	33	3,446.93	3,446.93	
34 Telephone	34	1,602.77	1,602.77	
35 Postage and shipping	35	6,533.54	5,883.54	650.00
36 Occupancy	36	38,297.48		38,297.48
37 Equipment rental and maintenance	37	2,080.20	2,080.20	
38 Printing and publications	38	25,997.78	25,997.78	
39 Travel	39			
40 Conferences, conventions, and meetings	40	363.75	363.75	
41 Interest	41	2,101.94	2,101.94	
42 Depreciation, depletion, etc. (attach schedule)	42	402.70	402.70	
43 Other expenses not covered above (itemize):				
a Bank Fees	43a	402.70	402.70	
b Insurance & Bonds	43b	2,113.00		2,113.00
c Subscriptions	43c	470.50	470.50	
d Credit Card Fees	43d	332.07		332.07
e Computer & Internet Exp	43e	2,236.14	791.73	1,444.41
f Membership - Advertising & refunds	43f	430.00	430.00	
g	43g			
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	86,583.80	43,571.84	43,011.96

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? 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 the instructions.)

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.

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.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a PUBLICATIONS - American-Canadian Genealogist [quarterly journal]; REPERTOIRES - preservation and dissemination of church vital records; Maps & Charts - to record research & findings and for teaching tools for researchers <hr/> <hr/> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	39,573.54
b RESEARCH SERVICES - for members and non-members who wish to have their genealogy research done by ACGS Used mostly by distant members <hr/> <hr/> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	3,352.55
c CONFERENCES - workshops for all levels of genealogical research held bi-annually <hr/> <hr/> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	363.75
d ACQUISITIONS - increase our holdings of genealogical & historical data. <hr/> <hr/> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	282.00
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ▶	43,571.84

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing	350.00	45	350.00
	46 Savings and temporary cash investments	26,569.09	46	31,628.16
	47a Accounts receivable			
	b Less: allowance for doubtful accounts	489.70	47c	641.76
	48a Pledges receivable			
	b Less: allowance for doubtful accounts		48c	
	49 Grants receivable		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use	64,908.82	52	64,908.82
	53 Prepaid expenses and deferred charges		53	
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
	55a Investments—land, buildings, and equipment: basis			
	b Less: accumulated depreciation (attach schedule)		55c	
	56 Investments—other (attach schedule)		56	
	57a Land, buildings, and equipment: basis			
	b Less: accumulated depreciation (attach schedule)	340,288.59	57c	340,798.59
58 Other assets, including program-related investments (describe ►)	313,706.62	58	313,988.62	
59 Total assets (must equal line 74). Add lines 45 through 58	746,312.82	59	752,315.98	
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)	37,247.38	64b	19,963.36
	65 Other liabilities (describe ►)		65	
66 Total liabilities. Add lines 60 through 65	37,247.38	66	19,963.36	
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	39,087.99	70	22,776.71
	71 Paid-in or capital surplus, or land, building, and equipment fund	516,504.53	71	517,014.97
	72 Retained earnings, endowment, accumulated income, or other funds	153,472.95	72	192,560.94
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)	709,065.47	73	732,352.62	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	746,312.85	74	752,315.98	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	109,360.51
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	109,360.51

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

a	Total expenses and losses per audited financial statements	a	86,583.80
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	86,583.80

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(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 plans	(E) Expense account and other allowances
Gerard Savard, President 10 Franklin St., Salem, NH 03079	25	-0-	-0-	-0-
Robert Paquette, Vice President 483 Brown Rd., Candia, NH 03034	15	-0-	-0-	-0-
Pauline Cusson, Treasurer 34 Pleasant St., Salem, NH 03079	35	-0-	-0-	-0-
Mary Jean Chaput, Corresponding Secretary 25 Ridge Rd., Manchester, NH 03104	15	-0-	-0-	-0-
Muriel Normand, Recording Secretary 6 Karen Rd., Windham, NH 03087	10	-0-	-0-	-0-
Jeanne Boisvert, Dir. 30 Riverview Pk., Manch., NH 03102	15	-0-	-0-	-0-
Lorraine Huppe, Dir., 85 So Elm St, Manchester, NH 03103	10	-0-	-0-	-0-
Roger Lanctot, Dir. -512 Weare Rd, New Boston, NH 03070	15	-0-	-0-	-0-
Paul R. Lambert, Dir. - 49 Linden Concord, NH 03301	10	-0-	-0-	-0-
Anne Gleason, Dir. - 231 Comeau, Manchester, NH 03102	10	-0-	-0-	-0-
Julie Smith, Dir. - 721 Brent St., Manchester, NH 03103	10	-0-	-0-	-0-
Constance Hebert, Dir. - 313 Elgin, Manchester, NH 03104	15	-0-	-0-	-0-
Jackie Watson, Dir. - 6 Watkins Ln, Merrimack, NH 03054	10	-0-	-0-	-0-

Part VI Other Information (continued)		Yes	No
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?		✓
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 in Part III.)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
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.		
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 on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. 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	501(c)(12) orgs. 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	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	✓
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	✓
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	✓
90a	List the states with which a copy of this return is filed New Hampshire		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	-0-
91a	The books are in care of Pauline Cusson Telephone no. (603) 622-1554 Located at 4 Elm Street, Manchester, NH ZIP + 4 03108-6478		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country Canada See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	Yes ✓ No

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: 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					19,396.48
b Society Journal					464.70
c Library					5,238.59
d Research Services					6,711.90
e Conference & Workshops					172.65
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					52,411.75
95 Interest on savings and temporary cash investments					92.18
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					3,744.60
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Space Rental					11,375.00
b Currency Exchange					(24.64)
c Cash Over					356.52
d Donations					9420.78
e _____					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E)) ▶					109,360.51

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

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).
93	Program Services - Collect, preserve, disseminate genealogical information.
94	Membership Dues - Includes receipt of quarterly journal
103a	Space Rental - To State of NH for book depository

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	✓

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.

Please Sign Here

▶ _____ Date _____
Signature of officer

▶ **Pauline Cusson, Treasurer**
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____	Date _____	Check if self-employed ▶ <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. X) _____
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____	EIN ▶ _____	Phone no. ▶ () _____	

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No. 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

51-0185879

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. 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-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. 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

Total number of others receiving over \$50,000 for professional services ▶

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation

Total number of other contractors receiving over \$50,000 for other services ▶

Part III **Statements About Activities** (See page 2 of the instructions.)

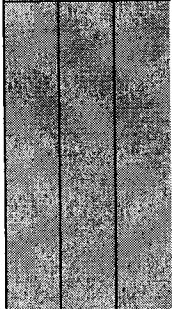
Yes No

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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1		X
---	--	---

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.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)



a Sale, exchange, or leasing of property?

2a		X
----	--	---

b Lending of money or other extension of credit?

2b		X
----	--	---

c Furnishing of goods, services, or facilities?

2c		X
----	--	---

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?

2d		X
----	--	---

e Transfer of any part of its income or assets?

2e		X
----	--	---

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a		X
----	--	---

b Did the organization have a section 403(b) annuity plan for its employees?

3b		X
----	--	---

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c		X
----	--	---

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d		X
----	--	---

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a		X
----	--	---

b Did the organization make any taxable distributions under section 4966?

4b		X
----	--	---

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c		X
----	--	---

d Enter the total number of donor advised funds owned at the end of the tax year ▶

4d	0	
----	---	--

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . ▶

4e	0	
----	---	--

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶

4f	0	
----	---	--

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶

4g	0	
----	---	--

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that 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.)
- 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: **(1) 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, and **(2) 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. 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	32,361	4,323	7,899	6,316	50,899
16 Membership fees received	54,789	56,057	61,242	61,242	233,330
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	36,667	33,667	36,136	22,489	128,949
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	100	117	212	250	679
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	123,610	105,747	105,479	92,297	413,454
24 Line 23 minus line 17	86,950	72,080	69,343	69,808	284,608
25 Enter 1% of line 23	1,236	1,057	1,055	923	

26 Organizations described on lines 10 or 11:

a Enter 2% of amount in column (e), line 24 ▶ 26a

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total 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," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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 11b, as well as individuals.) Do not file this list with your return. 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:
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

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 from 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 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)
(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?		
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?		
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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
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?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	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?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40	41	
	Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body.
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

