

Office of the New Hampshire Attorney General - Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397

ANNUAL REPORT CERTIFICATE

DON'T FORGET TO ATTACH:

NH APPENDIX (conflicts of interest) FILING FEE (\$75) DIRECTOR LIST (name, street address, telephone)

One of the following: NHCT-2A IRS Form 990 990-EZ or 990-PF.
 probate account (for testamentary trusts)

Are your revenues over \$500,000? If yes, include GAAP financial statement plus 990 (not for 990-PFs)
Are your revenues over \$1,000,000? If yes, include audited financial statement plus 990 (not for 990-PFs)

ANNUAL FILING FEE: \$75.00 Make check payable to: State of New Hampshire

<u>Abbot-Downing Historical Society</u>	<u>31 December 2018</u>		
Organization Name	Fiscal Year End		
<u>C. Peter James</u>	<u>2267</u>		
In Care of	NH Registration #		
<u>P. O. Box 627</u>	<u>NH</u>	<u>03753</u>	
Address	City	State	Zip

Under the penalties of perjury (RSA 641:1-3), I declare that I have examined this annual report, including all attachments, and to the best of my knowledge and belief, it is true, correct and complete.

<u><i>C. Peter James</i></u>	<u>1/3/2020</u>
Signature of	Date
PRESIDENT, TREASURER OR TRUSTEE	

<u>C. Peter James</u>	<u>Treasurer</u>
(Print or Type) Name of Officer/Trustee	Title

THE SIGNATURE OF THE EXECUTIVE DIRECTOR IS NOT ACCEPTABLE. (If the organization does not have the office of "President" or "Treasurer", attach an explanation of the signer's authority)

STATE OF New Hampshire
COUNTY OF Sullivan

Signed and sworn to (or affirmed) before me on the 3 day of January, 2020 by the above-named officer or trustee.

My Commission Expires: 12/21/2021
[Seal]

Carolyn Haron
Notary Public



OFFICE OF THE NEW HAMPSHIRE ATTORNEY GENERAL
CHARITABLE TRUSTS UNIT
33 Capitol Street
Concord, NH 03301-6397

Register of Charitable Trusts

Form NHCT-2A

ANNUAL REPORT

For the calendar year 2018
and ending _____

or fiscal year beginning _____
Registration number _____

NAME OF ORGANIZATION: Abbot-Downing Historical Society

ADDRESS: P.O. Box 4077, Concord, NH 03302

Please make name/address corrections here:

A) Employer or Federal ID Number: 02-333474

D) Tax exempt under section 501 (c) (): check here if application for exemption is pending ()

G) Group return filed for affiliates? Yes _____ No _____

Separate return filed by group affiliate? Yes _____ No _____

PART I STATEMENT OF SUPPORT, REVENUE, AND EXPENSES AND CHANGES IN FUND BALANCES:

Support and Revenue

1) Contributions, gifts, grants\$ 26,905

2) Program service revenue (see part V)..... _____

3) Membership dues and assessments..... 2,055

4) Interest on savings and cash investments..... 5

5) Dividends and interest from securities..... _____

9) Special fundraising events and activities

(Attach schedule, see instructions #6)

a) Gross revenue.....\$ 3,616

b) Minus: direct expenses..... 1,476

c) Net income (line 9a minus line 9b)..... 2,140

11) Other revenue (see part V)..... _____

12) Total revenue (add lines 1,2,3,4,5,9(c) and 11)..... 31,105

Expenses

13) Program services (program service charities only) (see Part III)..... _____

14) Management and general (see line 44)..... 30,689

17) Total expenses (add lines 13 and 14)..... _____

Fund Balances Lines 18 Through 21 Must Be Completed

18) Excess (deficit) for the year (line 12 minus line 17)..... 416

19) Fund balances or net worth at the beginning of the year..(see line 75)..... 39,290

20) Other changes in net assets or fund balance..... _____

(ATTACH EXPLANATION)

21) Fund balances or net worth at end of year (add lines 18 and 19)(see also line 75) 39,706

Organization Name: Abbot-Downing Historical Society

PART II STATEMENT OF FUNCTIONAL EXPENSES

22) Grants and allocations (ATTACH SCHEDULE).....	_____
23) Specific assistance to individuals.....	_____
24) Benefits paid to or for members.....	_____
25) Compensation of officers, directors, etc.....	_____
26) Other salaries and wages.....	_____
27) Pension plan contributions.....	_____
28) Other employee benefits.....	_____
29) Payroll taxes.....	_____
30) Professional fundraising fees.....	_____
31) Accounting fees.....	_____
32) Legal fees.....	_____
33) Supplies.....	_____
34) Telephone.....	_____
35) Postage and shipping.....	<u>72</u>
36) Occupancy.....	_____
37) Equipment rental and maintenance.....	<u>319</u>
38) Printing and publications.....	_____
39) Travel.....	_____
40) Conferences, conventions, meetings.....	_____
41) Interest.....	_____
42) Depreciation (attach schedule).....	<u>820</u>
43) Other expenses (itemized):	
a) <u>Insurance</u>	<u>4,307</u>
b) <u>NH Filing Fee</u>	<u>75</u>
c) <u>P. O. Box Rent</u>	<u>96</u>
d) <u>Purchase Repro coach</u>	<u>25,000</u>
e).....	_____
44) Total functional expenses (enter on line 14).....	<u>30,689</u>

Organization Name: Abbot-Downing Historical Society

Not Applicable

PART III STATEMENT OF PROGRAM SERVICES RENDERED (program service charities only)

DESCRIPTION	EXPENSES
a) _____ _____ _____	\$ _____
b) _____ _____ _____	\$ _____
c) _____ _____ _____	\$ _____
TOTAL - MUST EQUAL LINE 13	\$ _____

Organization Name: Abbot-Downing Historical Society

PART IV OFFICERS AND DIRECTORS *Please see attached list*

List ALL Officers, Directors and Trustees. Boards of Directors of voluntary corporations MUST have at least five (5) members who are not related by blood or marriage.

Name _____
Home Address _____

Position Held _____
Daytime Phone _____

Name _____
Home Address _____

Position Held _____
Daytime Phone _____

Name _____
Home Address _____

Position Held _____
Daytime Phone _____

Name _____
Home Address _____

Position Held _____
Daytime Phone _____

Name _____
Home Address _____

Position Held _____
Daytime Phone _____

Attach sheet if additional space is required.

Organization Name: Abbot-Downing Historical Society

PART V PROGRAM SERVICE REVENUE AND OTHER REVENUE (State nature)
(Program service charities only)

	<u>Program Service</u>	<u>Other</u>
a) _____	_____	_____
b) _____	_____	_____
c) _____	_____	_____
d) _____	_____	_____

PART VI BALANCE SHEETS

	<u>Beginning of Year</u>	<u>End of Year</u>
Assets		
45) Cash - non interest bearing	_____	_____
46) Savings and cash investments	<u>20,720</u> <u>Note 1</u>	<u>21,956</u>
47) Accounts receivable	_____	_____
48) Pledges receivable	Note 1: 2017 report did not reflect a check written in 2017 but cleared the bank in	
49) Grants receivable	January 2018	_____
50) Receivables due from Officers, Directors, etc.	_____	_____
51) Other notes and loans receivable	_____	_____
52) Inventories for sale or use	_____	_____
53) Prepaid	_____	_____
54) Investments - securities	_____	_____
55) Investments - real estate	_____	_____
56) Investments - other	_____	_____
58) Other assets	<u>18,570</u>	<u>17,750</u>
59) Total assets (add lines 45 through 58)	<u>39,290</u>	<u>39,706</u>
Liabilities		
60) Accounts payable	_____	_____
61) Grants payable	_____	_____
63) Loans from officers, directors, etc.	_____	_____
64) Mortgages/notes payable	_____	_____
65) Other liabilities	_____	_____
66) Total liabilities (add lines 60 through 65)	_____	_____
Fund Balances or Net Worth	<u>Line 75 Must Be Completed</u>	
75) Net worth (assets, line 59, minus liabilities, line 66)	<u>39,290</u>	<u>39,706</u>

**NOTE: PLEASE BE SURE TO SIGN THE ANNUAL REPORT CERTIFICATE BEFORE
A NOTARY PUBLIC AND RETURN THE CERTIFICATE AND REPORT TO:**

Office of the Attorney General, Charitable Trusts Unit, 33 Capitol St., Concord, NH 03301-6397

**FAILURE TO FILE ANNUAL FINANCIAL REPORTS WITH THE DEPARTMENT OF JUSTICE IN A
TIMELY MANNER MAY RESULT IN COURT ACTION AND THE IMPOSITION OF CIVIL PENALTIES
OF UP TO \$10,000.00 FOR EACH VIOLATION (RSA 7:28-f II (d))**

**OFFICE OF THE NEW HAMPSHIRE ATTORNEY GENERAL
CHARITABLE TRUSTS UNIT
33 Capitol Street, Concord, NH 03301-6397**

**MUST BE COMPLETED
AND ATTACHED TO FILING**

APPENDIX TO ANNUAL REPORT

Name of Organization: Abbot-Downing Historical Society

1. Is there currently a conflict of interest policy in effect? Yes No
A Conflict of Interest Policy is required by law. (see RSA 7:19, II)

If No, please provide explanation for not adopting a Conflict of Interest Policy (attach extra pages if necessary): _____

2. Did any officer, Director, Trustee, or member of his/her immediate family obtain a pecuniary benefit from the organization in the last year other than reasonable compensation for services of an executive director, or expenses incurred in connection with his/her official duties? (see RSA 7:19-a) Yes _____
No

If Yes, complete the following:

A. Was any real estate transaction involved? Yes _____ No _____

B. Was a loan made to any director, officer or trustee? Yes _____ No _____

C. Was a pecuniary benefit paid in excess of \$500? Yes _____ No _____
If Yes, attach copy of Meeting Minutes.

D. Was a pecuniary benefit paid in excess of \$5,000? Yes _____ No _____
If Yes, attach a copy of each of the following:
* Public Notice made pursuant to RSA 7:19-a, II (d)
* Meeting Minutes
* Employment Contract

E. Provide a **list** of each pecuniary benefit transaction involving a director, officer, trustee or member of their immediate family. Include name(s) of recipient(s) and amount(s) of benefit(s) as required under RSA 7:19-a, II (c) and RSA 7:28 (attach extra pages if necessary).

Name of Recipient: _____ Nature & Amount of Benefit: _____

Name of Recipient: _____ Nature & Amount of Benefit: _____

NOTE: The Director of Charitable Trusts may request **copies** of all contracts, payment records, vouchers and financial records or documents involving a director, officer, trustee or member of the immediate family as authorized under RSA 7:24.

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2018

Open to Public Inspection

A For the 2018 Calendar year, or tax year beginning 2018-01-01 and ending 2018-12-31

B Check if available

- Terminated for Business
 Gross receipts are normally \$50,000 or less

C Name of Organization: ABBOT-DOWNING HISTORICALSOCIETY INCPO Box 4077, Concord, NH,US, 03302

D Employee Identification

Number 02-0333474

E Website:

concordcoach.orgF Name of Principal Officer: Merwyn BaganPO Box 4077, Concord, NH,US, 03302

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

**ABBOT-DOWNING HISTORICAL SOCIETY
REVISED BOARD OF DIRECTORS
2019-2020**

OFFICERS AND DIRECTORS

- President Merwyn Bagan (2016)
173 School St.
Concord, NH 03301
603-224-1036 H
603-340-1321 C
mbagan@comcast.net
- Vice-president Karl Olson (2018)
65 Hooksett Turnpike
Concord, NH 03301
603-361-5533 H

nhtiger1@aol.com
- Treasurer C. Peter James (elected August 2019)
28 Splitrock Road
P.O. Box 627
Grantham, NH 03753
603-863-7330 H
603-470-8990 C
cpjvkj@gmail.com
- Secretary Sheila Knight (elected August 2019)
11 Wildmere Terrace
Concord, NH 03301
603-228-8029 (H)
No cell
No email
- Past-President Brian Erickson
1364 Clement Hill Road
Contoocook, NH 03229
603-746-3939 H
603-496-6939 C

Date in parentheses is year elected to current position
H = home phone number
C= cell phone number

Terms expire in May 2022

Robin Briscoe
95 Prescott Road
Epping, NH 03042
603-679-5680 H
603-502-6627 C
robin_briscoe@hillspet.com

Marcia Evans
64 Stumpfield Road
Hopkinton, NH 03229
603-746-3884 H

marciadawnmar@tds.net

Virginia Green
131 Oak Hill Road
Concord, NH 03301
603-545-5971 (C)
No email

Terms end in 2020

Thomas Prescott
122 Airport Road
Concord, NH 03301
603-225-5991 H

Terms expire in 2021

Patricia A. Andrews
149 East Side Drive #163
Concord, NH 03301
603-715-9074 (H)
603-252-0631 (C)
patriciaandrews@comcast.net

Sheila Knight
11 Wildmere Terrace
Concord, NH 03301
603-228-8029 (H)
No cell
No email

Patrick Maimone
79 Bay Hill Road
P.O. Box 1861
Alton, NH 03809
603-608-5266 (C)
patrickmaimone@gmail.com

Terms end in 2020 (elected April 2019 for one year)

Sandra Sims
234 Flagg Road
Loudon, NH 03307
angelmeadowsfarm@myfairpoint.net
603-783-8983; 603-731-3506

Bruce Crawford
357 Queen St.
Boscawen, NH 03303
603-796-6241
atraofnh@gmail.com

October 11, 2019

Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2019

Open to Public Inspection

A For the **2019** Calendar year, or tax year beginning **2019-01-01** and ending **2019-12-31****B** Check if available Terminated for Business Gross receipts are normally \$50,000 or less**C** Name of Organization: ABBOT-DOWNING HISTORICAL
SOCIETY INCPO Box 4077, Concord, NH,
US, 03302**D** Employee Identification
Number 02-0333474**E** Website:concordcoach.org**F** Name of Principal Officer: Merwyn BaganPO Box 4077, Concord, NH,
US, 03302

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