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)

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

ΑF	or th	he 2008 calendar year, or tax year beginning	$_{7/01}$, 2008, and ending	06/3	30, 20 09
Во	heck if a	applicable: Please C Name of organization LOWER NAUGATUCK VA	LLEY PARENT CHILD R	D Employer identificati	on number
	Addr	ress use IRS Doing Flusinges As		06-0925826	
-	-1	print or Number and street (or P.O. box if mail is not delivered to st	reet address) Room/suite	E Telephone number	
-	-1	type.		, ' ,	
-	Initia	al return See 30 EI,IZABETH STREET Specific City or town at the or country and ZIR + 4		-	
		nination Instruc-			
	Ame retur	tions. DERBY, CT 06418		G Gross receipts \$	1,934,528.
	Appl pend	F Name and address of principal officer:		H(a) Is this a group return f affiliates?	or Yes X No
				H(b) Are all affiliates includ	ed? Yes No
1	Tax-e	exempt status: X 501(a) (3) ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a list. (s	ee instructions)
.]		site: ► HTTP://ELECTRONICVALLEY.ORG/LNVPCRC		H(c) Group exemption num	ber 🕨
K		of organization: X Corporation Trust Association Other		tion: 1975 M State of	
	art I	Summary	E rear or forma	101. 1975 M Glate of	legal domicile: CT
1					
	1	Briefly describe the organization's mission or most significant activi			
به		THE ORGANIZATION'S PURPOSE IS TO PROVID	E A MENTAL HEALTH R	ESOURCE FOR	
Governance		VALLEY PARENTS AND CHILDREN, USING A MU	LTI-DISCIPLINARY AP	PROACH	
r.		INCLUDING PSYCHIATRY, PSYCHOLOGY, SOCIA	L WORK		
ŏ	2	Check this box if the organization discontinued its operat		of its assets.	
න	3	Number of voting members of the governing body (Part VI, line 1a)			15
se se	4	Number of independent voting members of the governing body (Pa	rt VI line 1h)	4	15
Ě	5	Total number of employees (Part V. line 2a)		5	52
Activities		Total number of employees (Part V, line 2a)			
Ř	6	Total number of volunteers (estimate if necessary)		6	
	7 a	Total gross unrelated business revenue from Part VIII, line 12, colum	ın (C)		THE RESERVE THE PARTY OF THE PA
	b	Net unrelated business taxable income from Form 990-T, line 34 🐐	<u> </u>		
				Prior Year	Current Year
a	8	Contribution and grants (Part VIII, line 1h)		1,025,364.	1,075,520.
nue	9	Program service revenue (Part VIII, line 2g)		632,858.	827,870.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,161.	544.
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	le)	-2,354.	18,661.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column	(A) line 12)		
	+			1,658,029.	1,922,595.
					NONE
	14	Benefits paid to or for members (Part IX, column (A), line 4)			NONE
es		Salaries, other compensation, employee benefits (Part IX, column (A	A), lines 5-10)	1,401,560.	1,645,804.
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)			NONE
ă.	b	Total fundaciona amonaca Dart IV actions (D) I'm OF)			
ш		Other expenses (Part X, column (A), lines 11a-11d, 11f-24f)		511,001.	395,210.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), lin	e 25)	1,912,561.	2,041,014.
	19	Revenue less expenses. Subtract line 18 from line 12		-254,532.	-118,419.
or		and the second control of the second control		Beginning of Year	End of Year
ets anc	20	Total assets (Part V. lina 16)			the comment of the second comments of the sec
Net Assets or Fund Balances	24	Total liabilities (Part V. Van 00)		813,730.	754,838.
et /	21	Total liabilities (Part X, line 26)		515,323.	<u>574,850.</u>
No western to	AND PROPERTY.	Net assets or fund balances. Subtract line 21 from line 20		298,407.	179,988.
		Signature Block			
		Under penalties of perjury, I declare that I have examined this return, in	cluding accompanying schedules an	d statements, and to the	best of my knowledge
		and belief, it is true, correct, and complete. Declaration of preparer (oth	ner than officer) is based on all info	ormation of which prepar	er has any knowledge.
	ign	a fisher of Why Manual		1 12/3	21/09
H	ere	Signature of officer		Date	-4
		Michael To Williams	CFO		
		Type or print name and title	See the see	NAME OF THE PART O	
			Date - Check if	Drangenta	lentifying number
Paid		Preparer's	DEC 2008 self-	(see instructi	
Prep	arer's		employed		0034533
Use (Firm's name (or yours of the self-employed), but the self-employed), address, and ZIP + 4 corp. conponents of the self-employed (address, and ZIP + 4).	STERCZALA	F211.1	1308345
		I TOOK CORPORATE DRIVE, SUITE 488 SHELLON	L. CT U6484	Phone no. > 205	3-929-3535
May	the If	RS discuss this return with the preparer shown above? (See instruction	ons)		X Yes No
For	rivac	cy Act and Paperwork Reduction Act Notice, see the separate inst	uctions.	removed the control of the control o	Form 990 (2008)
JSA	10 2.00				(2000)
JE. 19.	1-7-3.UU				

orm 990 (20				- <i>U</i> × 25826	Page 2
Part III	Statement of Program Ser	vice Accomplishments (see			
	describe the organization's m	nission:			
SEE	STATEMENT 1				
	dana paratanan da Alaksen Per Per				
Did the	e organization undertake an	v significant program service	es during the year wh	hich were not listed on	
the pri	or Form 990 or 990-EZ?	y signineant program service	cs during the year wi	mon were not listed on	Yes X N
If "Yes	describe these new services	s on Schedule O.			ر شف
	e organization cease conduc				1
service	s?				Yes X N
	" describe these changes on		unization's throe largest	t program porviose by evapages	
				t program services by expenses ed to report the amount of grar	
	tions to others, the total expe				no arra
				•	
4a (Code:) (Expenses \$	901,815, including gran	nts of \$) (Revenue \$)
CHII	LD GUIDANCE CLINIC -	- PROVIDES PSYCHOTHE	ERAPY FOR CHILD	REN	
UP T	TO AGE 18 ACCOMPANIE	ED BY THEIR FAMILIES	5		
1b (Code:) (Revenue \$)
	ENSIVE OUTPATIENT -			RVICES TO	
KIDS	S AFFECTED BY SERIOU	JS EMOTIONAL OR BEHA	AVIOR PROBLEMS		
Apr. 100 (100 Apr. 100 Apr. 10	destruction (1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.	THE RESIDENCE OF THE PROPERTY			
			Mark 4 is a Market major and described and an address of the second section of the section of the second section of the		
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	The state of the s			Annual Management of Management of the Control of t	total resource of the contract of
c (Code:) (Expenses \$	164,740, including grant	te of ©	\/Payanua \$	
,				(Revenue \$	
	NT AIDE PROGRAM - C STANCE WHERE THERE				18 180 188 (1886) 188 (1886)
TIDU.L	DIANCE WHERE THERE	13 A KISK OF ABOSE	OK NEGLECT OF C	CHILIDREN	
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1 ()	vograna aprila (D) 3	0.1-1.1-0.			
	program services. (Describe i	•	\		
(Expense) • Total e	ses \$320,653, includi rogram service expenses ⊳) (Revenue \$)	
١	nogram service expenses >	\$ 1,748,319.(Mus	a equal Part IX, Line 25	ACCORDED TO THE PERSON OF THE	Farm 000 (000)
1020 1,000					Form 990 (2008

Part	Checklist of Required Schedules		, 1	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		,	İ
	Schedule C, Part II	4		X
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	. 1		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		i	
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		l	
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		ľ	
	Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	-	X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5,? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		,	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II .	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
ordinary on the control	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
JSA 8E 1021	1.000	Form	990	(2008)

Pari	V Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity	35 N.S.		Sec.
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
		28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
		28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
		28c		X
29		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
31	conservation contributions? <i>If "Yes," complete Schedule M</i>	30		X
31	Part I	31		17
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		_ X
~-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Χ
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	0.7		
	VI	37	L	X

Form **990** (2008)

Pai	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 2	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
ıa	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
С	gaming (gambling) winnings to prize winners?	1c		
2.0	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		16	
2 a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 52	7.4		
1.	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b			71	
•	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3 a		3 a		Х
	this return?	3 b	**********	
d	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	0.5		
4 a	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	4a		X
	account)?	4 a		
b	If "Yes," enter the name of the foreign country: >			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	F 0		37
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
	Prohibited Tax Shelter Transaction?	5 c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	9 9 9 0 0	REMAN
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? .	7a	X	ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8232?	7 c		RKC E.S.
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			100000
	benefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<u> </u>	
g	For all contributions of cualified intellectual property, did the organization file Form 8899 as required?	7 g		·}
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7 h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	ļ	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
3	Did the organization make any taxable distributions under section 4966?	9 a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			1
a	Initiation fees and capital contributions included on Part VIII, line 12			l. and
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			16.4
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			Taki.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		Form	990	(2008

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sect	ion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
-	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7 a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Χ
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9 b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sect	ion B. Policies			·
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	Are officers, directors of trustees, and key employees required to disclose annually interests that could give			
		12b	X	
С	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	X	
	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b	X	
	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy?			X
С	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	12c		X
c 13	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	12c	X	X
c 13 14	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	12c 13 14	X	X
c 13 14	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official?	12c 13 14	X	X
c 13 14 15	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	12c 13 14	X	
c 13 14 15 a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO. Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	12c 13 14	X	X
c 13 14 15	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	12c 13 14 15a 15b	X	X
c 13 14 15 a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14	X	X
c 13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	12c 13 14 15a 15b	X	X
c 13 14 15 a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	12c 13 14 15a 15b	X	X
c 13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12c 13 14 15a 15b	X	X
c 13 14 15 a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure	12c 13 14 15a 15b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO. Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CT,	12c 13 14 15a 15b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CT, Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3))	12c 13 14 15a 15b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO. Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CT. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply.	12c 13 14 15a 15b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CT. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request	12c 13 14 15a 15b 16a 16b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO. Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CT, Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interesting the programments of the programments of the organization makes its governing documents, conflict of interesting the programment of the organization makes its governing documents, conflict of interesting the programment of the organization makes its governing documents, conflict of interesting the programment of the organization makes its governing documents, conflict of interesting the programment of the organization makes i	12c 13 14 15a 15b 16a 16b	X	X
c 13 14 15 a b 16a b Sect 17 18	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O Fow this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CT. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interpolicy, and financial statements available to the public.	12c 13 14 15a 15b 16a 16b	X	X
c 13 14 15 a b 16a b Sect 17 18	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO. Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? In C. Disclosure List the states with which a copy of this Form 990 is required to be filed organization in point venture arrangement in make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of integolicy, and financial statements available to the public. State the name, physica address, and telephone number of the person who possesses the books and records of the public.	12c 13 14 15a 15b 16a 16b	X	X
c 13 14 15 a b 16a b	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O Fow this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CT. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interpolicy, and financial statements available to the public.	12c 13 14 15a 15b 16a 16b	X	X

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B)	Donit	ion ())	,	that an	(دراه	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated at employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DAVID MARCHITTO										
PRESIDENT	35.	X						NONE	NONE	10И
ANNE CRIBBINS										
FIRST VICE PRESIDENT		X			ļ			NONE	NONE	NOI
DAVID GRANT										
SECOND VICE PRESIDENT		X			ļ	ļ		NONE	NONE	NOI
ROBERT LISI								NONE	NONE	NO
TREASURER		X					 -	NONE	NONE	NOI
KAREN BUCK		37						NONE	NICANIE	NO
BOARD MEMBER		X						NONE	NONE	NO
LOUIS DAGOSTINE BOARD MEMBER		Х						NONE	NONE	NO
		Λ					-	NONE	NONE	INO.
ANTHONY R. DELUCIA JR. BOARD MEMBER	. show more bland below bearing	X					İ	NONE	NONE	NO
DAVID GARAMELLA		^_						NONE	NOINE	OVI
BOARD MEMBER		X			Ì			NONE	NONE	NO
JAMES GEISSLER								NONE	NOINI	110
BOARD MEMBER		Х						NONE	ИОИЕ	NO
MARK KIRSCHBAUM							ļ			
BOARD MEMBER		Х						NONE	NONE	NO
MICHAEL MARCINEK								Section 1 and 1 an		
BOARD MEMBER		X						NONE	NONE	NO
JOHN VAVRA										North Control of the
BOARD MEMBER		Х						NONE	NONE	NO
BRIAN WALSH								The second secon	100 mm 1 mm 1 mm 1 mm 1 mm 1 mm 1 mm 1	
BOARD MEMBER		Х						NONE	NONE	NO
JIM GUARRERA										
BOARD MEMBER		X						NONE	NONE	NO
VENDY GAYNOR										
SECRETARY		Χ						NONE	NONE	NC
IICHAEL WYNNE									And the same of th	
CEO	35.			Χ	X			81,332.	To the state of th	3,31

Form 990 (2008)

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es,	and F	ligi	nest Compensat	ed Employe	es (co.	ntinued)		
(A) Name and title	(B) Average				k all t	hat app		(D) Reportable	(E) Reportabl		(F Estim	nated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensati from relate organizatio (W-2/1099-N	ed ons	amou oth comper from organi and re organiz	ner nsatio the zation elated	on n t

											and the second s		

								and the second s			edial Manie. 19 and forced documents		* * * * * * * * * * * * * * * * * * * *
1b Total								*		NONE			313
2 Total number of individuals (including thos organization ► NONE	e in 1a) w	vho r	ece	ived	l m	ore th	han	\$100,000 in re	portable con	npensa	ition fro	m tl	ne
NOME												/es	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Sched	er, directoule J for suc	or or chind	tru <i>ividi</i>	iste ual	e, l	кеу є	emp	oloyee, or highes	t compensa	ted.	3		X
4 For any individual listed on line 1a, is the	e sum of	repor	tabl	е с	om	pensa	ntior	n and other com	pensation fr	om			
the organization and related organizations individual	-	ıan ş 					es, · ·				4	e e 188	Х
5 Did any person listed on line 1a receiv services rendered to the organization? If "Yes,"	e or accr	ue co Sched	omp ule d	ens J foi	atic	n fro ch pei	om rsor	any unrelated o	rganization	for 	5		X
Section B. Independent Contractors	The Constitution of the Marie and the Santon								and the state of t	AME 100 - 111 1 111			
1 Complete this table for your five highest compensation from the organization.	compensat	ed in	dep	enc	lent	cont	rac	tors that receive	d more thar	า \$100	0,000 6)†	
(A) Nam∈ and business add	ress							(B) Description of se	rvices	Co	(C) ompensa	tion	
			·			erakanan mana kerana				n - adad - 1775 William V. Jack 1971	n in a service construction and the control and		
							<u>.</u>				· · · · · · · · · · · · · · · · ·		
		er en en en en en en									The second second second second		
Total number of independent contractors (i compensation from the organization is	ncluding th	nose	in 1	l) w	vho	rece		d more than \$10					
JSA			-		-		. =				Form !	990 ((2003

12 Pateraled campaigns 10 10 10 10 10 10 10 1	Pa	rt VII	Statement of Revenue	9		06-0-25826							
Description Description							Related or exempt function	Unrelated business	Revenue excluded from tax				
Manufacts 10 10 10 10 10 10 10 1	S S	1a	Federated campaigns	1a									
1	ran	b	· -	1 1									
1	s, g amo	С		1. 1					\$14 · · ·				
1	gift	d	Related organizations	1d					THE E				
1	ns,	е	Government grants (contribution	ons) 1e	825,232.			6.0					
1	utio er s	f	All other contributions, gifts, grants	,			Control of the contro		Mark Miles				
1	trib oth		and similar amounts not included a	above . 1f	250,288.				174				
1	Son	g				ale na Salama							
3 investment income (including dividends, interest, and other similar amounts)		h	Total. Add lines 1a-1f		1	1,075,520.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	24 (1 Special Control of Control				
3 investment income (including dividends, interest, and other similar amounts)	enn		DAMASHAM DEED		Business Code	000 000	200 200	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
3 investment income (including dividends, interest, and other similar amounts)	Rev		PATIENT FEES			827,870.	827,870.						
3 investment income (including dividends, interest, and other similar amounts)	ce	1											
3 investment income (including dividends, interest, and other similar amounts)	gram Serv												
3 investment income (including dividends, interest, and other similar amounts)													
3 investment income (including dividends, interest, and other similar amounts)			All other program service rever	nue									
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. ▶ NONE 5 Royalties	Pro	1				827,870.							
Other similar amounts		3							1				
Second Company Compa						544.	544.						
Ga Gross Rents		4	Income from investment of tax	x-exempt bond p	oroceeds 🕨	NONE							
Ga Gross Rents		5	Royalties · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		NONE							
b Less: rental expenses				(ı) Real	(ii) Personal				8 23				
C Rental income or (loss)		6 a	Gross Rents			4 4 5		FIRE ALEXANDER					
d Net rental income or (loss)		b											
Ta Gross amount from sales of assets other than inventory		ì						****	31,933. 3				
a Gross amount from sciels of assets other than inventory b Less; cost or other basis and sales expenses		l a	Net rental income of (loss).			NONE							
b Less: cost or other basis and sales expenses		7 a	l l	.,									
and sales expenses		h						1.75					
C Gain or (loss)													
None None		С	· ·		1								
Page events (not including \$		d				NONE							
See Part IV, line 18		8 a	Gross income from fur	ndraising				4.4					
9a Gross income from gaming activities. See Part IV, line 19. b Less: direct expenses b c Net income or (loss) from gaming activities ▶ NONE 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ NONE Miscellaneous Revenue Business Code 11a b	пe		events (not including \$										
9a Gross income from gaming activities. See Part IV, line 19. b Less: direct expenses b c Net income or (loss) from gaming activities ▶ NONE 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ NONE Miscellaneous Revenue Business Code 11a b	ven		of contributions reported on lin	ne 1c).		4. 5. 5.							
9a Gross income from gaming activities. See Part IV, line 19. b Less: direct expenses b c Net income or (loss) from gaming activities ▶ NONE 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ NONE Miscellaneous Revenue Business Code 11a b	8		See Part IV, line 18	a		[전화일 시스 경험 경험 기계 기계 기계 기계 기계 기계 기계 기계 기계 기계 기계 기계 기계							
9a Gross income from gaming activities. See Part IV, line 19. b Less: direct expenses b c Net income or (loss) from gaming activities ▶ NONE 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ NONE Miscellaneous Revenue Business Code 11a b	thei	i				ì			128/1981 - 37/11/1				
See Part IV, line 19	0				S'[M'[: 2▶	18,661.	18,661.						
b Less: direct expenses b c Net income or (loss) from gaming activities None 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory None Miscellaneous Revenue 11a		9 a											
c Net income or (loss) from gaming activities		h											
10a Gross sales of inventory, less returns and allowances		ł				MONE							
returns and allowances		10a				Hora							
b Less: cost of goods sold b c Net income or (loss) from sales of inventory													
c None None Miscellaneous Revenue Business Code 11a Image: square of the properties of		b											
11a			Net income or (loss) from sales	of inventory		NONE							
b			Miscellaneous Revenue	9	Business Code								
c d All other revenue		11a	The second secon										
d All other revenue		d	If the decision of the experience of the date and control and the experience of the second										
c Total. Add lines 11a-11d		-	All ()	- Market Annual Control of the St. St. Control on the St.	l I				ļ				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,								2200					
					- 1	NONE	<u> </u>						
21. DR 2001 LIP		1 4				1.922.595	847 075						

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	NONE			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	NONE			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	81,333.	2,937.	78,396.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	1,320,822.	1,273,897.	46,925.	
8	Pension plan contributions (include section 401			The second secon	
	(k) and section 403(b) employer contributions)	39,395.	32,938.	6,457.	
9	Other employee benefits	85,658.	76,889.	8,769.	
0	Payroll taxes	118,596.	108,265.	10,331.	
1	Fees for services (non-employees):				
а	Management	NONE			
	Legal ,	NONE			
	Accounting	NONE			
	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17	NONE			
	Investment management fees	NONE			
	Other	NONE			
2	Advertising and promotion	NONE	PPSPPS SubMiddleSchwarzer (As an excesser season author costs (PPSPPS) P \$50 PR PPPPSP	CVPRACE CARCOLOGICAL AND AND AND AND AND AND AND AND AND AND	
3	Office expenses	34,180.	30,785.	3,395.	
4	Information technology	NONE			
	Povaltice	NONE			
6	Oggungagu	40,481.	39,184.	1,297.	
7	Travel	13,453.	13,348.	105.	
В	Payments of travel or entertainment expenses			e recommendado do como de como	
	for any federal, state, or local public officials	NONE			
9	Conferences, conventions, and meetings	3,447.	2,471.	976.	
	Interest	12 044			
	Payments to affiliates	NONE			
		41,514.		41,514.	
	Insurance STMT 3	NONE			
	Other expenses. Itemize expenses not		**************************************	TO BE THE REPORT OF THE PROPERTY OF THE PARTY	
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	CLIENT REIMBURSEMENTS	11,092.	11,092.		
	CONSULTANTS	75,948.	75,948.	CONTROL OF A STREET AND ADDRESS OF A STREET WAS A STREET	
	UTILITIES	21,464.	17,034.	4,430.	
	INSURANCE	21,724.	19,291.	2 422	
	PROFESSIONAL FEES	27,259.	25,550.	1 700	and the second of the second o
	All other expenses	90,704.	18,690.	70 014	
	Total functional expenses. Add lines 1 through 24f	2,041,014.	1,748,319.	292,695.	
4	Joint Costs. Check here ▶ If following	2,041,014.	1,740,319.	292,093.	
(SOP 98-2. Complete this line only if the organization				
r	reported in column (B) joint costs from a combined educational campaign and fundraising				
3	solicitation				
١	A CONTROL OF THE PARTY OF THE P	THE RESIDENCE OF THE PARTY OF T	The state of the second st	And the second s	and the second s

1	Pai	rt X	Balance Sheet		,			
2 Savings and temporary cash investments				(A) Beginning of year				
3 Pledges and grants receivable, net 5, 234 3 5, 727		1	Cash - non-interest-bearing	3,131.	1		10,	614.
A Accounts receivable, net		2	Savings and temporary cash investments	50,465.	2		55,	024.
For Receivables from current and formor officers, directors, trustees, key employees or other related parises. Complete Part III of Receivables from cities disqualified persons (as defined under section 4868(f)(1)) and persons described in section 4868(f)(3)(8). Complete Part III of Schedule I.		3	S S		3			
amployees or other related parties. Complete Part II of Schedule L 6 6 Reconsides from one discussified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 7 Notes and loans receivable, net 7 7 Notes and loans receivable, net 7 8 Notes and loans receivable, net 7 10 Land, buildings, and equipment cost bases 10 a 796, 531 b Less; accumulated depreciation. Complete Part II of Land, buildings, and equipment cost bases 10 a 796, 531 b Less; accumulated depreciation. Complete Part IV of Schedule D 12 Investments - publicly traded securities 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part IV, line 11 Investments - other securities See Part		4	Accounts receivable, net	254,054.	4		207,	088.
Receivables from other disqualified persons (as defined under section 4988(n)13) and persons described in section 4988(n)3(B). Complete Part II 6		5	· ·					
468(f)(11) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule I. 7 Notes and loans receivable, net					5			
of Schedule I. Notes and loans receivable, net		6						
1								
8 myentories for sales or use 8 13,306								
10a Land, buildings, and equipment cost basis 10a 796, 531.	ets				 			
10a Land, buildings, and equipment cost basis 10a 796, 531.	881	-		10.000			10	206
b Less: accumulated deprocation. Complete Part V of Schedule D. 10b 335,519 488,111 10c 461,012	٩				9		13,	306.
Part VI of Schedule D. 10b 335,519 488,111 10c 461,012								
1 Investments - publicly traded securities 11 12 12 13 Investments - other securities See Part IV, line 11 13 13 14 15 15 15 15 15 15 15		b		100 111	100		161	012
12 Investments - other socurities. See Part IV, line 11 13		11		400,111.			401,	UIZ
13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 14 Intangible assets 15 15 15 15 15 15 15 1			, -		·		***************************************	
14					+	Management of the second of th		
15 Other assets. See Part IV, line 11					+			
16 Total assets. Add I nes 1 through 15 (must equal line 34) 813,730, 16 754,838 17 Accounts payable and accrued expenses 221,251, 17 257,056 18 Grants payable 18 18 18 19 19 Deferred revenue STMT 11 16,222, 19 11,400 20 Tax-exempt bond liabilities 20 21 21 Escrow account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties STMT 12 215,375 23 215,668 24 Uncestured notes and loans payable 24 25 Other liabilities. Complete Part X of Schedule D 62,475 25 90,726 26 Total liabilities. Add lines 17 through 25 515,323 26 574,850 27 Unrestricted net assets 324,155 28 277,059 28 Temporarily restricted net assets 324,155 28 277,059 29 Permanently restricted net assets 324,155 28 277,059 29 Permanently restricted net assets 324,155 28 277,059 30 Capital stock or trust principal, or current funds 30 31 79,988 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 8 32 Retained earnings, endowment, accumulated income, or other funds 32 33 704			· · ·	866			2.	067
17 Accounts payable and accrued expenses 221,251 17 257,056 18 Grants payable 18 Grants payable 19 Deferred revenue 5TMT 11 16,222 19 11,400 20 Tax-exempt bond liabilities 20 21 21 Escrow account liabilities 20 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule 22 23 Secured mortsages and notes payable to unrelated third parties STMT 12 215,375 23 215,668 24 Unsecured notes and loans payable 24 25 Other liabilities. Complete Part X of Schedule 26 24 25 25 25 25 27 25 26 26 26 26 26 27 25 25 25 27 26 27 26 27 27 27 27								
18 Grants payable 18 Deferred revenue STMT 11 16,222 19 11,400					-			
19 Deferred revenue		ł i						
21 Escrow account liability. Complete Part IV of Schedule D		19	, ·		. 19		11,	400
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule I. 22 23 3215, 668 24 24 25 25 25 25 25 25		20	Tax-exempt bond liabilities		20			
23 Secured mortgages and notes payable to unrelated third parties STMT- 12 215,375, 23 215,668 24 Unsecured notes and loans payable. 24 25 Other liabilities. Complete Part X of Schedule D 62,475, 25 90,726 26 Total liabilities. Add lines 17 through 25 515,323, 26 574,850 7 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets -25,748, 27 -97,071 28 Temporarily restricted net assets -29 Permanently restr	S	21	Escrow account liability. Complete Part IV of Schedule D		21			
23 Secured mortgages and notes payable to unrelated third parties STMT- 12 215,375, 23 215,668 24 Unsecured notes and loans payable. 24 25 Other liabilities. Complete Part X of Schedule D 62,475, 25 90,726 26 Total liabilities. Add lines 17 through 25 515,323, 26 574,850 7 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets -25,748, 27 -97,071 28 Temporarily restricted net assets -29 Permanently restr	litie	22	Payables to current and former officers, directors, trustees, key employees,					
23 Secured mortgages and notes payable to unrelated third parties STMT- 12 215,375, 23 215,668 24 Unsecured notes and loans payable. 24 25 Other liabilities. Complete Part X of Schedule D 62,475, 25 90,726 26 Total liabilities. Add lines 17 through 25 515,323, 26 574,850 7 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets -25,748, 27 -97,071 28 Temporarily restricted net assets -29 Permanently restr	abi		highest compensated employees, and disqualified persons. Complete Part II					
24 Unsecured notes and loans payable. 24	Ξ				22			
25 Other liabilities. Complete Part X of Schedule D 62,475 25 90,726		23	Secured mortgages and notes payable to unrelated third parties STMT- 12 \cdot	215,375	. 23		215,	668
26 Total liabilities. Add lines 17 through 25. 515, 323. 26 574, 850 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets25, 748. 27 -97, 071 28 Temporarily restricted net assets25, 748. 27 -97, 079 29 Permanently restricted net assets25, 748. 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds		24	, , ,		+			
Organizations that follow SFAS 117, check here			·		+			
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26		515,323	. 26		574,	850
29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Ze Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 298,407, 33 Total liabilities and net assets/fund balances 813,730, 34 Financial Statements and Reporting Accounting method used to prepare the Form 990: Cash X Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements and independent accountant? 2b X If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and ON B Circular A-133? 3a X If "Yes." did the organization undergo the required audit or audits? 3b X	ses							
29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Ze Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 298,407, 33 Total liabilities and net assets/fund balances 813,730, 34 Financial Statements and Reporting Accounting method used to prepare the Form 990: Cash X Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements and independent accountant? 2b X If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and ON B Circular A-133? 3a X If "Yes." did the organization undergo the required audit or audits? 3b X	anc	27	Unrestricted net assets	-25,748	. 27		-97,	071
Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds		28	·	324,155	. 28		277,	059
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	р П	29		and a sounce of all regions of a second seco	29			
31 Paid-in or capital surplus, or land, building, or equipment fund								
Total net assets or fund balances	ets	30	Capital stock or trust principal, or current funds		30			
Total net assets or fund balances	SS	31			31			
34 Total liabilities and net assets/fund balances		32		VALUE - VALUE	32			
Financial Statements and Reporting Yes No	Z	33		298,407	. 33		179,	988
Accounting method used to prepare the Form 990: Cash X Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant? If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OVB Circular A-133? 3a X b If "Yes." did the organization undergo the required audit or audits?	2.2.000	my coverage court		813,730	34		754,	838
Accounting method used to prepare the Form 990: Cash X Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant?	LE		Financial Statements and Reporting				F	Τ
Were the organization's financial statements compiled or reviewed by an independent accountant?	1					1	Yes	Мо
b Were the organization's financial statements audited by an independent accountant?								
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?							 	X
audit, review, or compilation of its financial statements and selection of an independent accountant?						25	X	
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?								
the Single Audit Act and OMB Circular A-133?			·			· · 2c	X	-
b If "Yes," did the organization undergo the required audit or audits?								
								- <u>X</u>
	***	14 1 (3)	o. Gostaro organization univergo the required addit of addits?				J	(0000

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of t	he organizatio	n LOWER NAU	GATUCK VALLEY I	PARENT C	HILD RE	SOURCE		Employer	ngenuncau	
CENTER	, INC.								06-092	5826
Part I		and the same of th	ty Status (All organi	***************************************				e instruc	tions)	
The orga			lation because it is: (Pl							
1	A church, co	onvention of chui	rches, or association o	of churches	described	in section	170(b)(1)(A)(i).		
2	A school de	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (Att	ach Schedu	ıle E.)					
3	A hospital o	r a cooperative l	nospital service organi	zation desc	ribed in sec	ction 170(I	b)(1)(A)(iii). (Attad	ch Schedul	le H.)
4			zation operated in col							
		ame, city, and sta		,						
5	An organiza	ation operated fo	or the benefit of a coll	lege or uni	versity ow	ned or op	erated b	y a gove	rnmental u	unit described in
		(b)(1)(A)(iv). (Co	•							
6			vernment or governme							
7			lly receives a substant		its support	from a go	overnme	ntal unit	or from th	ne general public
			(1)(A)(vi). (Complete P							
8			d in section 170(b)(1)(
9 X	An organiza	ation that norma	lly receives: (1) more	than 331/3	% of its su	pport from	n contrib	utions, m	rembership	o fees, and gross
	receipts fro	m activities rela	ted to its exempt fun	ctions - sul	bject to ce	ertain exce	eptions, a	and (2) n	o more th	an 331/3% of its
	support fro	m gross investr	ment income and uni	related bus	siness taxa	able incom	ne (less	section	511 tax)	from businesses
			n after June 30, 1975.							
10			ind operated exclusive							
11	An organiz	ation organized	and operated exclusi	vely for th	e benefit	of, to per	form the	e function	ns of, or	to carry out the
	purposes of	f one or more p	ublicly supported orga	anizations d	described i	n section	509(a)(1	 or sect 	tion 509(a)(2). See section
	509(a)(3).	Check the box th	at describes the type o					lines 11e	through 1	1h.
	a Typ		Type II c		e III - Fund					oe III - Other
е	By checkin	g this box, I ce	ertify that the organiz	ation is no	t controlle	ed directly	or indi	irectly by	one or r	more disqualified
(L. 1)	persons oth	ner than foundat	ion managers and oth	er than on	e or more	publicly s	upported	d organiza	ations des	scribed in section
		r section 509(a)(
f	If the organ	nization received	d a written determina	tion from t	the IRS that	at it is a	Type I,	Type II o	r Type III	supporting
		n, check this box								
g	Since Augu	st 17, 2006, has	the organization acce	pted any g	ift or contri	ibution from	m any of	the		
	following pe								•	
	(i) A pers	on who directly	or indirectly controls	, either ald	one or tog	ether with	n persor	is describ	ped in (ii)	Yes No
	and (iii)) below, the gove	erning body of the sup	ported orga	nization?					11g(i) X
	(ii) A famil	y member of a p	person described in (i) a	bove?						11g(ii) X
	(iii) A 35%	controlled entity	of a person described	in (i) or (ii)	above?					11g(iii) X
h	Provide the	following inform	ation about the organi	zations the	organizati	ion suppor	ts.			
	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	rganization	(v) Did yo	ou notify		is the	(vii) Amount of
orga	anization		(described on lines 1-9 above or IRC section		sted in your document?	the organ	ization in of vour	organizai (i) organi	ized in the	support
			(see instructions))	governing	docamont.	supp			S.?	
				Yes	No	Yes	Мо	Yes	No	
				Ann						
		No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10								
THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.										
							STANDARD STREET STREET, STREET, ST.			
								T		
** Policies received and a magnitude of										and the second s
Contraction of the Contraction o	and the second of the second o	A THE RESIDENCE OF THE PROPERTY OF THE PROPERT								The second secon
Total										
America, i strategico contra programma de producto de la contra del la contra del la cont	. A. C		S.L. A.L		Landon - Carring State Conferen	James a second	and the second of the second	0.1-	Mula A (Ear	m 990 or 990-EZ) 2008
+ OF CHIVAC	y Actana Paper	toA neuticion Act	Notice, see the Instructions	i ior Porm 990	J.			OC118	zeurs A (FOH	111 230 OF 220-EE1 2000

Par	(Complete only if you chec	anizations Deked the box or	escribed in S n line 5, 7, or 8	ections 170(b) B of Part I.)	(1)(A)(iv) and	170(b)(1)(A)(vi)
Sect	ion A. Public Support				/ 1) 0007	(-) 2000	/#\ Tatal
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmen al unit to the organization without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.		200				
Sec	tion B. Total Support					<u></u>	
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10				35.00 S		
12	Gross receipts from related activities, etc. (See instructions.)		<i></i>		12	
13	First five years. If the Form 990 is for the	organization's fir	st, second, third, f	ourth, or fifth tax ye	ear as a 501(c)(3)		L
	organization, check this box and stop here			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · ·	>
Sec	tion C. Computation of Public Sup		×				
14	Public support percentage for 2008 (li	ne 6, column (f) divided by line	11, column (f))		14	9
15	Public support percentage from 2007	Schedule A, Pa	art IV-A, line 26f			[15]	9/
16a	33 1/3% support test - 2008. If the o						
	and stop here. The organization qualit						
b	33 1/3% support test \cdot 2007. If the o						
	box and stop here. The organization of						
17a	10%-facts-and-circumstances test - is 10% or more, and if the organizatio in Part IV how the organization meets organization	n meets the "fa the "facts and	ict-and-circumst circumstances"	ances" test, chec test. The organ	ck this box and s ization qualifies	st <mark>op here.</mark> Expla as a publicly sup	in ported
b	10%-facts-and-circumstances test - 3 15 is 10% or more, and if the organization Explain in Part IV how the organization supported organization	ation meets the meets the "fac	facts and circusts-and-circums	ımstances" test, tances"" test. Th	check this box a ne organization o	and stop here. qualifies as a pub	licly
18	Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
,	Gifts, grants, contributions, and						
1	membership fees received. (Do not include						
;	any "unusual grants.")	772,772.	854,712.	979,526.	1,035,533.	1,106,114.	4,748,657
	Gross receipts from admissions, merchandise						
,	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purposa	322,837.	441,994.	580,399.	680,214.	827,870.	2,853,314
	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						
	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
	· ·	1,095,609.	1,296,706.	1,559,925.	1,715,747.	1,933,984.	7,601,971
	Total. Add lines 1-5	1,093,009.	1,290,700.	1,339,923.	1,710,747.	1,955,564.	7,001,371
	Amounts included on lines 1, 2, and 3						
b	received from disqualified persons Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the						
	the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from						
	line 6.)						7,601,971
	ion B. Total Support	4-20004	4.) 2005	(-) 2000	(4) 2007	(e) 2008	(f) Total
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007		
	Amounts from line 6	1,095,609.	1,296,706.	1,559,925.	1,715,747.	1,933,984.	7,601,971
	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	35.	1,781.	690.	2,161.	544.	5,211
b	Unrelated business taxable ncome (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975					74 (MASSA 97 (MASSA 1 / 1885) MASSA 1 / 1885)	
c	Add lines 10a and 10b ,	35.	1,781.	690.	2,161.	544,	5,211
C.	No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				i		
1	Net income from unrelated business				1	1	
1	activities not included in line 10b,						
1							
1	activities not included in line 10b, whether or not the business is regularly						
1 2	activities not included in line 10b, whether or not the business is regularly carried on						
2	activities not included in line 10b, whether or not the business is regularly carried on	60,812.	11,014.	2,350.	500.		74,676
2	activities not included in line 10b, whether or not the business is regularly carried on	60,812.	11,014.	2,350.	500.		74,676
2 3	activities not included in line 10b, whether or not the business is regularly carried on			2,350.	500.		
3	activities not included in line 10b, whether or not the business is regularly carried on						7,681,858
11 12 13 13 13	activities not included in line 10b, whether or not the business is regularly carried on	the organization	s first, second,	third, fourth, or	fifth tax year a	s a section 501(c	7,681,858 c)(3)
11	activities not included in line 10b, whether or not the business is regularly carried on	the organization	s first, second, I	third, fourth, or	fifth tax year a	s a section 501(a	7,681,858
112	activities not included in line 10b, whether or not the business is regularly carried on	the organization	s first, second, l	third, fourth, or	fifth tax year a	s a section 501(7,681,858 c)(3)
11 12 13 Secti	activities not included in line 10b, whether or not the business is regularly carried on	the organization port Percenta column (f) divided	s first, second, l	third, fourth, or	fifth tax year a	s a section 501(a	7,681,858 c)(3) >
3 3 6 6 F	activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Sup Public support percentage from 2008 (line 8, Public support percentage from 2007 Sche	the organization' port Percenta column (f) divided dule A, Part IV-A, I	s first, second, l	third, fourth, or	fifth tax year as	15 16	7,681,858 c)(3)
2 ecti 5 ecti	activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here ion C. Computation of Public Sup Public support percentage for 2008 (line 8, Public support percentage from 2007 Scheion D. Computation of Investmen	the organization' port Percenta; column (f) divided dule A, Part IV-A, I	s first, second, lower second, lower second, lower second	third, fourth, or	fifth tax year a	15 16	7,681,858 c)(3) ▶ 98.96% 97.45%
2 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	activities not included in line 10b, whether or not the business is regularly carried on	the organization port Percenta column (f) divided dule A, Part IV-A, It Income Percenta 10c, column (f)	s first, second, loge J by line 13, colum ine 27g entage divided by line 13	n (f))	fifth tax year a	15 16 17	7,681,858 c)(3) ► [98.96% 97.45%
2	activities not included in line 10b, whether or not the business is regularly carried on	the organization' port Percenta column (f) divided dule A, Part IV-A, I tt Income Perc ne 10c, column (f) Schedule A, Part IV	s first, second, loge I by line 13, columine 27g entage divided by line 13	third, fourth, or	fifth tax year as	15 16 17 18	7,681,858 c)(3) ► [98.96% 97.45% 0.07% 0.05%
3 3 4 6 ecti 5 1 ecti 7 1 8 1 9 a 3	activities not included in line 10b, whether or not the business is regularly carried on	the organization' port Percenta column (f) divided dule A, Part IV-A, I t Income Perc ne 10c, column (f) Schedule A, Part IV anization did not	s first, second, loge I by line 13, colum ine 27g entage divided by line 13 V-A, line 27h, check the box of	third, fourth, or	fifth tax year as	s a section 501(a	7,681,858 c)(3) 98.96% 97.45% 0.07% 0.05% line
3 3 4 6 ecti 5 1 6 Fecti 7 1 8 1 99a 3	activities not included in line 10b, whether or not the business is regularly carried on	the organization' port Percenta, column (f) divided dule A, Part IV-A, I It Income Perc ne 10c, column (f) Schedule A, Part IV anization did not c and stop here. T	s first, second, location, second, location, second, location, second, location, second, location, second, location,	third, fourth, or	fifth tax year at the second s	15 16 17 18 13 %, and anization	7,681,858 c)(3)▶ [98.96% 97.45% 0.07% 0.05% line▶ [x
3 3 4 1 4 1 4 1 5 5 1 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	activities not included in line 10b, whether or not the business is regularly carried on	the organization' port Percental column (f) divided dule A, Part IV-A, I t Income Perc ne 10c, column (f) Schedule A, Part IV anization did not c and stop here. T	s first, second, local second, local second, local second	third, fourth, or	fifth tax year a	15 16 17 18 19 19 19 19 19 19 19	7,681,858 c)(3) 98.96% 97.45% 0.07% 0.05% line $\Rightarrow \begin{bmatrix} x \\ x \end{bmatrix}$
111	activities not included in line 10b, whether or not the business is regularly carried on	the organization port Percenta column (f) divided dule A, Part IV-A, It Income Percenta 10c, column (f) Schedule A, Part IV anization did not cand stop here. To box and stop here box and stop here	s first, second, lege I by line 13, columine 27g	third, fourth, or n (f))	fifth tax year as	15 16 17 18 18 19 19 19 19 19 19	7,681,858 c)(3) 98.96% 97.45% 0.07% 0.05% line≥ x

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization		Employer identification number
LOWER NAUGATUCK VA	LLEY PARENT CHILD RESOURCE	06-0925826
CENTER, INC. Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	undation
	501(c)(3) taxable private foundation	
organization can check box General Rule	es for both the General Rule and a Special Rule. See instructions.)	
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,00	00 or more (in money or
	y one contributor. Complete Parts I and II.	
Special Rules		
under sections 50	(c)(3) organization filing Form 990, or Form 990-EZ, that met the 331/3 % 09(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the 000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the shand II.	he year, a contribution of the
during the year, a	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that reaggregate contributions or bequests of more than \$1,000 for use <i>exclusive</i> or educational purposes, or the prevention of cruelty to children or anim	ely for religious, charitable,
during the year, s not aggregate to the year for an ex- applies to this org	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that recome contributions for use <i>exclusively</i> for religious, charitable, etc., purposemore than \$1,000. (If this box is checked, enter here the total contribution clusively religious, charitable, etc., purpose. Do not complete any of the parrization because it received nonexclusively religious, charitable, etc., contributions.	ses, but these contributions did ons that were received during earts unless the General Rule ontributions of \$5,000 or more
990-EZ, or 990-PF), but the Form 990-EZ, or on line 2 c 990-EZ, or 990-PF).	are not covered by the General Rule and/or the Special Rules do not file y must answer "No" on Part IV, line 2 of their Form 990, or check the boof their Form 990-PF, to certify that they do not meet the filing requireme	x in the heading of their nts of Schedule B (Form 990,
	eduction Act Notice, see the Instructions Scho	edule B (Form 990, 990-EZ, or 990-PF) (200

Schedule B (Form 990.	. 990-EZ, or 990-PF) (2008)	

Page	of	 of Part I

Name of organization

LOWER NAUGATUCK VALLEY PARENT CHILD RESOURCE CENTER, INC.

Employer identification number 06-0925826

Part I	Contributors	(see instructions)
	OOHIGHOGG	(000 11100 00000110	7

(a)	(b)	(c)	(d)
N o.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	DEPARTMENT OF CHILDREN AND FAMILIES	\$783,024.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	DPT OF MENTAL HEALTH AND ADDICTION SVCS	\$ 32,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3	UNITED WAY	\$ 39,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
4	FOUNDATIONS & GRANTS	\$211,288.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP ± 4	Aggregate contributions	Type of contribution
		. \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
JSA		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name	of the organization LOWER NZ	UGATUCK VALLEY	PARENT CHILD RESC	OURCE	Employer identification number
CEN	ITER, INC.				06-0925826
Pa		aining Donor Advisored "Yes" to Form	<mark>ed Funds or Other Simi</mark> 990, Part IV, line 6.	lar Funds or A	Accounts. Complete if
			(a) Donor advised fur	nds	(b) Funds and other accounts
1	Total number at end of year .				
2	Aggregate contributions to (du			1	
3	Aggregate grants from (during			1	
4	Aggregate value at end of year	• •			
5	Did the organization inform all	donors and donor adv			
•	funds are the organization's pr	operty, subject to the	organization's exclusive leg	gal control?	Yes No
6	Did the organization inform all	grantees, donors, and	donor advisors in writing	that grant funds	may be
	used only for charitable purpos	es and not for the ber	nefit of the donor or donor	advisor or other	
	impermissible private benefit?				Yes No
Pa	rt Conservation Easem	ents. Complete if the	he organization answere	ed "Yes" to For	m 990, Part IV, line 7.
1	Purpose(s) of conservation ea	sements held by the o	rganization (check all that a	pply).	
	Preservation of land for p	ublic use (e.g., recreat			an historically importantly land area
	Protection of natural hab		F	Preservation of	certified historic structure
	Preservation of open space				
2	Complete lines 2a-2d if the org	janization held a quali	fied conservation contribut	tion in the form	of a conservation easement
	on the last day of the tax year.			[···	Held at the End of the Year
а	Total number of conservation e				2a
d	Total acreage restricted by co				2 b
С	Number of conservation easer			(a)	2 c
d	Number of conservation ease	ments included in (c) a	acquired after 8/17/06		2 d
3	Number of conservation easer		erred, released, extinguisl	hed, or terminat	ed by the organization during
	the taxable year 🕨				
4	Number of states where prope	rty subject to conserv	ration easement is located	>	
5	Does the organization have a	written policy regardin	g the periodic monitoring,	inspection, viol	ations, and
	enforcement of the conservati	on easements it holds?			Yes No
6	Staff or volunteer hours devote	ed to monitoring, inspe	ecting, and enforcing ease	ments during th	e year >
7					ear > \$
8	Does each conservation ease				
	170(h)(4)(B)(i) and 170(h)(4)(B)(11)?		it- ununnun and	
9	In Part XIV, describe how the				
	balance sheet, and include, if the organization's accounting			zation's illiancia	
177	Gill Organizations Main	taining Collections	of Art, Historical Treas:	ires or Other	Similar Assets.
	Complete if the orga	inization answered "	Yes" to Form 990, Part	IV, line 8.	
1 a	If the organization elected, as	normitted under SEAS	S 116 not to report in ite r	ovenue stateme	
ld	art, historical treasures, or oth provide, in Part XIV, the text o	er similar assets held.	for public exhibition, educ	ation, or resear	ch in furtherance of public service,
b	If the organization elected, as	permitted under SFAS	3 116, to report in its rever	nue statement a	ind balance sheet works of art,
	historical treasures, or other s provide the following amounts	milar assets held for prelating to these items	oublic exhibition, educations:	n, or research ir	n furtherance of public service,
	(i) Revenues included in Form	n 990, Part VIII, line 1			
	(ii) Assets included in Form 99	00, Part X			
2	If the organization received or	held works of art, hist	orical treasures, or other	similar assets fo	or financial gain, provide the
	following amounts required to	be reported under SF.	AS 116 relating to these it	ems:	
a	Revenues included in Form 99	0, Part VIII, line 1			> \$
h	Assets included in Form 990, I	Part X			
Forf	Privacy Act and Paperwork Reduction A	ct Notice, see the Instruction	ons for Form 990.	n jagan salata sarrekka deriori artika pia da pada kana kanang salat denderan di Antas san kenga	Schedule D (Form 990) 2008

Par	t III — Organizations Maintaini	ng Colle	ctions o	T Art, H	istorica	ıı ıreasures	s, or c	Julier Sillillar A	SSELS (CO	Jiiiiiue	u)
	Using the organization's accession	and athor	rocorde	chock (any of th	ne following t	hat are	a significant us	e of its co	ollection	
3	3	and other	records,	, CHECK 6	arry Or tr	ie ionownig ti	nat are	s a significant ac	0 01 110 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	items (check all that apply):			d		Loan or ex	chand	a nrograms			
a	Public exhibition			d	-		Chang	e programs			
b	Scholarly research			е	Li	Other					
С	Preservation for future ge										
4	Provide a description of the organization	zation's co	ollections	and exp	olain hov	v they further	r the o	rganization's exe	mpt purp	ose in	
	Part XIV.										
5	During the year, did the organization										-
	assets to be sold to raise funds rat									Yes	No
Par	Trust, Escrow and Custo Part IV, line 9, or reporte	odial Arr ed an am	angeme rount on	ents. Co Form 9	mplete 990, Pa	e if organiza rt X, line 21.	tion a	nswered "Yes"	to Form	990,	
1 a	Is the organization an agent, truste									1	
	included on Form 990, Part X?								[Yes	No
b	If "Yes," explain the arrangement in	n Part XIV	and com	plete the	e follow	ng table:					
								Α	mount		
С	Beginning balance						1 c		~		~~~
d	Additions during the year						1 d				
е	Distributions during the year						1 e				
f	Ending balance										
2a	Did the organization include an am	ount on F	orm 990), Part X	, line 21'	?	,		[Yes	No
b	If "Yes," explain the arrangement in										
Pai	rt V Endowment Funds. Con	nplete if	organiz	ation ar	swere	d "Yes" to Fo	orm 9	90, Part IV, line) 10.		
		(a) Curr	ent Year	(b) P	rior year	(c) Two ye	ears bac	k (d) Three yea	ars back	(e) Four	years back
1a	Beginning of year balance		324,155.								
b	Contributions		975,948.								
С	Investment earnings or losses										
d	Grants or scholarships										,
е	Other expenditures for facilities .										
	and programs	1,0	023,044.			.					
f	Administrative expenses				-						
g	End of year balance		277,059.								
2	Provide the estimated percentage			lance he	ld as:	k					
a	Board designated or quasi-endowr	-		%							
b	Permanent endowment	%									
С	Term endowment ▶ 130.0000	%									
3a	Are there endowment funds not in		ession of	the org	anizatio	n that are he	ld and	administered for	the		
	organization by:									[-	Yes No
	(i) unrelated organizations		<i>.</i> .							3a(i)	Х
	(ii) related organizations									3a(ii)	X
b	If "Yes" to 3a(ii), are the related org									3 b	
4	Describe in Part XIV the intended u	•								l	11
	M Investments - Land, Buil						art X I	line 10	the granted colours of the appropriate control of the granted colors of the colors of	wineren a commercial and a second sec	
	Description of investment	,	(a) Cost	or other ba		(b) Cost or othe basis (other)		(c) Depreciation	((d) Book val	lue
1a	Land								A channel Banks common to 1+17 TATA E COMPT		
b	Buildings					510,6	39	97,895.		41	2,744.
С	Leasehold improvements					11,8		10,225.			1,610.
d	Equipment	ì				217,2		187,886.			9,332.
е	Other	ŀ				56,8	1	39,558.			7,281.
	I. Add lines 1a-1e. (Column (d) shou		-orm 990	Part X	column	(B) line 10/c	<u> </u>	JJ, JJO.			0,967.
	[a) [a a latter [a) allow	Jagaar 1	2	, ,,	- Jordiniii	12/, 1110 10/0	<u> </u>		L	40	.0,001.

Schedule D (Form 990) 2008

Part VII	Investments - Other Securities. See	Form 990, Part X, line	e 12.
	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
inancial deri	vatives and other financial products		
	equity interests		
ne not the soul time are the final t			
	was from the first first first than the first fi		
Total (Column	(b) should equal Form 990, Part X, col. (B) line 12.)	>	
Part VIII	Investments - Program Related. See	Form 990, Part X, Iir	ne 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation:
	(a) Boodington of investment type	, ,	Cost or end-of-year market value
T 1 1 /0 / 1 · · · ·	(b) should equal Form 990, Part X, col. (B) line 13.)		
	Other Assets. See Form 990, Part X	▶ 1 line 15	Language de la companya de la compan
Part IX		(a) Description	(b) Book value
		and and a second of the second	
7	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
Total. (Column Balt X	(b) should equal Form 990, Part X, col. (B) line 15.) . Other Liabilities. See Form 990, Part		· · · · · · · · · · · · · · · · · · ·
	(a) Description of liability	(b) Amount	
Federal incon		(b) Amount	
	The second of the second second of the secon	E 7 . 0.0.4	
	TIATIVE FUNDS	51,894.	
	BLE ADVANCES	33,750.	
DEFERRED	/ INCOME	5,082	
		COLUMN TO THE PROPERTY OF THE	 전환 경험 경험 경험 경험 경험 경험 경험 경험 경험 경험 경험 경험 경험
*		COLD TO A STATE CONTROL AND A STATE OF THE S	
Fotal. (Column	(b) should equal Form \$90, Part X, ccl. (B) line 25.)	> 90,726.	
	The second secon		A CONTROL OF THE PROPERTY OF THE PARTY OF TH

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2003

Schadula D (Fo	m 990) 2008	06	25826	Page 5
Part YIV	Supplemental Informat (continued)		·	
Part Aiv	Outpremental information (continues)			
	to the man was been any one any one and the control of the control			
	and the case with this little		and the same are the same and the same and the same and the same are the same	
				The same was the same and the same and the same and the same and
	2 THE TOTAL COLUMN THE		and hand hand room young young proof made and what which hand here have been been	
	2 MAY VAN THE THE THE THE THE THE THE THE THE THE			
	age que mais basé bide bide bide bide bide bide bide bide			
	and that that they make the time and the time to the time and the time to the time and the time to the			
	and the control was been than the control was			
	No. V Nov. 100 May the case and make the last that that the last the last the last that the last the			
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	and the said that that the said the said		para and the majority and the same and the test that the same and	
			was seen over the past ago that the seed that the seed that the	
			and the top of the second seco	
			water than the time time that the series are sent than the time to	

Schedule D (Form 990) 2008

SCHEDULE G

(Form 990 or 990-EZ) Department of the Treasury

upplemental Information Regarding Fundraising or Gaming Activities

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047 Inspection

Internal Revenue Service

ete if the organ	ization or			06-092582	6
ete if the organ	ization or				
	ization ai	nswered	"Yes" to Form 9	90, Part IV, line	17.
e f g ral agreement wi art VII) or entity i	Solic Solic Spec ith any ind in connect	itation of ritation of ritation of gitation of gitation dividual (in tion with properties) pursuar	non-government g government grants ising events icluding officers, d professional fundra nt to agreements t	rants irectors, trustees uising activities?	
(ii) Activity	custody or	control of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
	Yes	No			
	r licensec	I to solic	it funds or has b	peen notified it is	exempt from
	e f g ral agreement wi art VII) or entity uals or entities (fi the organization. (ii) Activity	e Solic Solic Solic Solic g Solic Spectral agreement with any indigent art VII) or entity in connection and or entities (fundraisers the organization. Form 990 (iii) Activity (iii) Did fund custody or contribution (iii) Activity Yes	e Solicitation of solicitation of general agreement with any individual (in art VII) or entity in connection with puals or entities (fundraisers) pursuar he organization. Form 990-EZ filers (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No is registered or licensed to solice.	e Solicitation of non-government grants golicitation of government grants Special fundraising events ral agreement with any individual (including officers, dart VII) or entity in connection with professional fundrals or entities (fundraisers) pursuant to agreements the organization. Form 990-EZ filers are not required to custody or control of contributions? Yes No Yes No is registered or licensed to solicit funds or has the solicit funds	ral agreement with any individual (including officers, directors, trustees art VII) or entity in connection with professional fundraising activities? Jals or entities (fundraisers) pursuant to agreements under which the fundralser of the organization. Form 990-EZ filers are not required to complete this table (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No No The professional fundraising activities? (IV) Gross receipts from activity from activity fundraiser listed in col. (i)) Yes No The professional fundraising activities? In professional fundraising activitie

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule G (Form 990 or 990-EZ) 2008

	Fundraising Events. Complemore than \$15,000 on Form	te if the organization 1990-EZ, line 6a. Lis	answered "Yes" to Fo t events with gross red	rm 990, Part IV, lind ceipts greater than	e 18, or \$5,000.	repo	orted	
		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2	(c) Other Events NONE (total number)	(d) Total (a) thr	Event		
Revenue	1 Gross receipts2 Less: Charitable contributions		13,680.			3	30,5	94
	3 Gross revenue (line 1 minus line 2)	16,914.	13,680.				30,5	94
	4 Cash prizes					·		
enses	5 Non-cash prizes							
Direct Expenses	6 Rent/facility costs							
Direc	7 Other direct expenses	6,563.	5,370.				11,9) 33
Pa	8 Direct expense summary. Add lines 9 Net income summary. Combine lines 11	3 and 8 in column (d).		<i>.</i> ▶			1,93 18,6	
	than \$15,000 on Form 990-	EZ, line 6a.	(b) Pull tabs/instant	(c) Other gaming	(d) Tot	al gan		
Revenue	1 Gross revenue		bingo/progressive bingo		COI. (a)	un out	gii coi	. (C))
ses	2 Cash prizes							
Direct Expenses	3 Non-cash prizes							encontrol of the second
Direct I	4 Rent/facility costs							
	5 Other direct expenses		// Yes %	Yes %				
	6 Volunteer labor	Yes %	Yes %	No No				
	7 Direct expense summary. Add lines	2 through 5 in column (c	l)		. (
	8 Net gaming income summary. Comb	oine lines 1 and 7 in colu	mn (d)	, , <u></u>				
9	Enter the state(s) in which the organiza is the organization licensed to operate					9a	Yes	No
	o If "No," Explain:							
	Were any of the organization's gaming of If "Yes," Explain:	licenses revoked, susp	ended or terminated duri	ng the tax year?		10a		
11	Does the organization operate gaming	activities with nonmemb	Prs?			11		
12	Is the organization a grantor, beneficiar	y or trustee of a trust o				12		

Schedule G (Form 990 or 990-EZ) 2008 Νo Indicate the percentage of gaming activity operated in: 13 Provide the name and address of the person who prepares the organization's gaming/special event books 14 and records: Name > 15a Does the organization have a contract with a third party from whom the organization receives gaming b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$_____ and the amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address: . Name ▶ Address ▶ 16 Gaming manager information: Gaming manager compensation ► \$ Description of services provided > Director/officer Employee Independent contractor Mandatory distributions: 17 Is the organization required under state law to make charitable distributions from the gaming proceeds to b Enter the amount of distributions required under state law distributed to other exempt organizations or spent

Schedule G (Form 990 or 990-EZ) 2008

in the organization's own exempt activities during the tax year > \$

SCHEDULE O (Form 990)

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service additional information Form 990 or

Name of the organization LOWER NAUGATUCK VALLEY PARENT CHILD RESOURCE CENTER, INC.	Employer identification number 06-0925826
FORM 990 PART VI SECTION B. POLICIES	
CONFLICT OF INTEREST POLICY	
THE ORGANIZATION REQUIRES OFFICERS, DIRECTORS AND KEY EMPLOYEES	TO
SELF-REPORT ANY CONFLICTS OF INTEREST	
	and the same case was the last and any case the last same pay ago and same part same and the case and same the

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE ORGANIZATION'S PURPOSE IS TO PROVIDE A MENTAL HEALTH RESOURCE FOR VALLY PARENTS AND CHILDREN, USING A MULTI-DISCIPLINARY APPROACH INCLUDING PSYCHIATRY, PSYCHOLOGY AND SOCIAL WORK AND ALLIED PROFESSIONAL AND PARAPROFESSIONAL ORIENTATIONS. SERVICES ARE ESSENTIALLY FAMILY ORIENTED WITH A FOCUS ON INDIVIDUAL CHILD BEHAVIOR AND THE PROBLEMS OF PARENTING.

EVENTS
FUNDRAISING
j
TITA
PART
,066
FORM

ななりより	INCOME	30,594.	30,594.
	DESCRIPTION	SPECIAL EVENTS	SOERE

NETINCOME	 	18,661.	18,661.
DIRECT		11,933.	11,933.
GROSS INCOME	† ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	30,594.	30,594.

LOWER NAUGRIUCK VALLEY PARENT CHILD RESOURCE

Description of Property

Current-year amortization depreciation Current-year ACRS CRS 179 class class expense ഗ 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 5.000 HY 7.000 5.000 Life HY | 5.000 Beginning Ending Accumulated Medepreciation depreciation thod Conv. 욠 ΗY Accumulated Accumulated amortization amortization code 2,338. SL 401. SI 300. SL 100. SI 20,000. SL 450. SL 11,106. SL SI1,611. SL 248. SL 4,702. SL 2,000. SL ડ 540. SL 50. SL 399. SI 1,000.|SL 13,244. SL 392. 1,075. 295. 11,106. 399. 401. 300. 4,702. 100. 20,000. 2,000. 1,075. 1,611. 2,338. 50. 1,000. 13,244. 540. 248. 450. 392. 295. Basis for depreciation 248. 1,611. 540. 300. 2,338. 100. 450. 11,106. 401. 4,702. 20,000. 2,000. 13,244. 1,075. 392. 50. 399. 1,000. 295. Basis Reduction 179 exp. reduction in basis 1,075. [200,000 1,611. 100.000 392, 100,000 540. 100.000 248, 100,000 2,338. 100.000 50. 100.000 401. 200.000 300. 100.000 4,762. [100.000 100.000 2,000. [200.000 399. 100.000 100, 100,000 1,000. 100.000 200.000 450, 100,000 295. 1500,000 Bus. % Unadjusted Cost 20,000. 13,244. or basis Cost or basis Date placed in \$861/10//0 11/11/1984 11/11/1984 06/01/1985 11/01/1986 06/30/1996 07/01/1984 04/30/1989 08/18/1989 10/25/1989 03/05/1992 06/30/1996 06/30/1996 06/30/1996 09/25/1996 03/26/1998 11/24/1997 07/15/1997 11/09/2007 Date placed in service service Asset description Asset description 4 BIR CONDITIONERS IONERS ROUTE COMPUTER EQUIPMENT AMORTIZATION COMPUTER BOUTPMENT DEPRECIATION Less: Retired Assets Less: Retired Assets OFFICE FURNITURE METSYS ENORGERED TOTALS.... Listed Property WORD PROCESSOR TOTALS. . . . Suptotals . . . TRENSCRIBING 2 ALR CONDIT PM/2 PROGRAM CANON COPIER Assets Retired CARPETING JSA 5X9024 1.000 POUTEMBRE FURNITURE VCR/FW

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X276

Description of Property		THE REAL PROPERTY AND ADDRESS OF THE PERSON										
DEPRECIATION												
Asset description	Date placed in service	Unadjusted Cost or basis	Bus.	179 exp. reduction in basis	Basis	Basis for	Beginning Accumulated	Accumulated Medepreciation that Conv	onv. Life	ACRS CRS class class	Current-year 179 expense	Current-year depreciation
SELUTON SHEET	07/13/1998	1 %	00			١.	172.	172.	വ			
XXP PEP4 PROCESS	02/02/1999	209.	100.000			209.	209.		5.000			
IM COMPUTER	08/23/1999	480.	100.000			480.	480.	480. SL	5.000			
SPSON 900 PRINTER	10/25/1999	454.	100.000			454.	454.	454. SL	5.000			
ERN DAIVE	01/01/2000	224.				224.	224.	224. SL	5.000			
BROTHER LASERPRINT	02/22/2000	369.				369.	369.		5.000			
AVC PR OFFICES	06/27/2000	191.	100.000			191.	191.	191. SL	5.000			
COMP NETWORK SETUP	09/25/2000	653.	100.000			653.	653.	653. SL	5,000			
2PRINTERS & MONITORS	10/26/2000		100.000			1,830.	1,830.	1,830. SL	5.000			
LOVESERT/OFFICE #6	12/27/2000	245.	100.000			245.	245.	245. SL	5.000			
	01/08/2001					291.	291.		5.000			
CD ROM	01/10/2001		100.000			110.	110.	110. SL	5.000			
<u> মূলত যত</u>	01/31/2001	65.	1200.000			65.	65.	65. SL	5.000			
CEBLE/INTERNET INS	02/07/2001	370.	100.000			370.	370.	370. SL	5.000			
MUSCOEN	03/07/2001	255.	100.000			255.	255.	255. SL	5.000			
COMP, SERVER LEASE	07/01/2000	12,174.	100.000			12,174.	12,174.	12,174. SL	4.000			
COMPUTER ADD-ONS	07/01/2001	190.	1,00,000			190.	190.	190. SI	4.000			
2 PRINTERS	08/01/2001	160.	100.000	- Lamping		160.	160.	160. SL	4.000			
MONITOR	08/20/2001		200.002			140.	140.	140. ST	4.000			
Less: Retired Assets												
Subtotals												
Listed Property												
-												
								77,72				
Less: Retired Assets												
Subsotals												
TOTALS												
A MORTIZATION												
Asset description	Date placed in service	Cost or basis					Accumulated amortization	Ending Accumulated amortization Code	Life			Current-year amortization
			ı T								-	
ti al appropriate de la constante de la consta												
TOTALS												
*Assets Retired												

586024 1.530 586024 1.530 749349 | 8276

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COMER NAUGRIUCK VALLEY PARENT CHILD RESOURCE

Description of Property

291. 291 291 Current-year depreciation Current-year amortization Current-year 179 expense ACRS CRS class class 7.000 5.000 5.000 4.000 4.000 5.000 4.000 4.000 4.000 4.000 3.000 3.000 4.000 7.000 7.000 7.000 7.000 7.000 Life Beginning Ending Accumulated Medepreciation depreciation thod Conv. Accumulated Accumulated amortization Code 70. SI 129. SL 200. SL 86. SL 168. SL 499. SI 136. SL 769. SL 1,010. SL 1,148. SL 191. SL 1,057. SL 1,842. SL 370. SL 1,203. SL 1,602. SL 1,602. SL 1,602. SL 406. SI 168. 1,057. 1,010. 1,148. 70. 136. 769. 200. 1,842. 129. 1,311. 1,311. 1,311. 499. 370. 984. 191. 86. 332. 136. 1,010. depreciation 1,057. 499. 1,842. 1,148. 129. 200. 370. 1,530. 2,040. 2,040. 515. 168. 86. 70. 769. 2,040. 191 Basis for Basis Reduction 179 exp. reduction in basis 70, 100,000 191. 100.000 86. 100.000 ,057, 100,000 499, 100,000 1,010. [100.000 100.000 136, 100.000 769. 100.000 1,842, [30,000 1000.000 129, [100,000 200. 100.000 370, 1100,000 1,530, 100,000 2,040. 100.000 2,040, 130,000 2,040. 100.000 Bus. Unadjusted Cost 168. 1,148. 515. or basis Cost or basis Date placed in 09/01/2001 07/09/2001 07/09/2001 11/15/2001 12/19/2001 04/21/2003 06/27/2002 12/04/2003 07/05/2002 02/25/2003 09/13/2001 10/25/2001 01/20/2003 04/29/2003 04/22/2003 04/22/2003 04/22/2003 04/22/2003 04/22/2003 Date placed in service service Asset description Asset description MORTIZATION COMPUTER EQUIPMENT MOTOROLA CELLPHONE Less: Refired Assets. DEPRECIATION CONFERENCE CABINE Less: Retired Assets 2 - IBM NETVISTA AIR CONDITIONER Listed Property 24 GREEN CHAIRS Subtotals . . . 24 GREY CHAIRS 24 BURG CHAIRS STYLUS PRINTER DEEL HAND HELD GREY CHAIRS Subtotals . . . 'Assets Retired JSA 8X9024 1 000 IBM NETVISTA IBM NETVISTA TOTALS LABEL MAKER MICROWRYE COMPUTAR COMPUTER TI/VCR

74934T

Description of Property

DEPRECIATION													
Asset description	Date placed in service	Unadjusted Cost or basis	Bus.	179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me- thod Conv.	Life cla	ACRS CRS class	Current-year 179 expense	Current-year depreciation
CONFERENCE CREDENZ	04/22/2003	415.	0			415.	267.	326.		7.000			.59.
2 - 30X36" IMBLE	05/14/2003		100.000			148.	95.	-		7.000			21.
2 - 30X36" LABLE	05/14/2003		200.001			148.	.95.	116. SL		7.000			21.
5 - 30X48" LABIR	05/14/2003	613	100.000			417.	269.	329. SI		7.000			.09
Se" ROUND IT OAK	05/14/2003	20	100.000			.82.	53.	65. SI		7.000			14 150 150
36" ROUND GREEN	05/14/2003		100.000			82.	53.	65. SI		7.000			12.
15.5" CHAIR BLUE	05/14/2003		100.000			26.	17.	21. SI		7.000			4.
15.5" CHAIR BLACK	05/14/2003	26.	100.000			26.	17.			7.000			4.
8-15.5" OFFIX TERI	05/14/2003	132.	100.000			132.	85.	-		7.000			193
6-15.5" CHAIR BURG	05/14/2003		100.000			159.	102.	125. SI		7.000			23.
25 EE CHAIRS BURG	07/01/2004	3,750.	1000.001			3,750.	2,411.	2,947. SI		7.000			536.
COMPUTER SYSTEM	07/01/2005		1000.001			41,282.	37,154.	41,282. SI		5.000			4,128.
PHONE SYSTEM	07/01/2004	41,960.	100.000			41,960.	26,974.	32,968. SI		7.000			5,994.
SIGN	01/01/2004	525.	100.000			525.	338.	413. SL		7.000			75.
OTHER COMPUTER	01/01/2004	1	100.000			432.	389.			5.000			43.
MOVING EXPENSE	01/01/5006	9,615.	100.00c			9,615.	8,654.	9,615. SL		5.000			961.
S SOX60"TABLE GREY	01/01/2004	760.	1000.001			760.	489.	598. SI		7.000			109.
18"X72" FOLD TABLE	07/01/2004		100.000			.06	58.	71. SL		7.000			13.
30"X72" FOID TABLE	07/01/2004	100.	100.000			100.	64.	78. SL		7.000			14.
Less: Retired Assets													
Subtotals													
Listed Property													
Less: Retired Assets											L		
Subtotals													
TOTALS						Aniso Park		-					
AMORTIZATION													
Asset description	Date placed in service	Cost or basis					Accumulated / amortization	Ending Accumulated amortization	Code Life				Current-year amortization
										T			
ALL ALL ALL ALL ALL ALL ALL ALL ALL ALL													
0 3 E C I]			
A Section Defined													
Assets Nation													

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LOWER NAUGRIUCK VALLEY PARENT CHILD RESOURCE

Description of Property

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138 31. 94. 83. 182. 371. 254. 27. 360. 199 130. 265. 333. 63. 517. 28. Current-year amortization depreciation Current-year Current-year 179 expense MA ACRS CRS class class 4.000 7.000 7.000 5.000 7.000 5.000 5.000 5.000 7.000 5.000 Life 5.000 7.000 7.000 5.000 5.000 5.000 Beginning Ending Accumulated Medepreciation depreciation thod Conv. Accumulated Accumulated amortization amortization code 189. SL 17,050. SL 457. SL 1,620. SL 136. SL 2,295. SL 516. SL 149. SL 813. SL 621. SL 487. SL 842. SL 1,328. SL 1,007. SI 79. SL 94. SL 1,266. SL SL1,486. SL 730. 957. 1,878. 422. 122. 105. 614. .099 742. 357. 374. 1,260. 483. 933. 17,050. 51. 126. 476. 969. 82. 1,272. 17,050. 690. 649. depreciation 2,922. 655. 582. 1,800. 986 1,855. 1,854. 2,332. 315. 1,271. 195. 190 154 2,583. 230. Basis for Basis Reduction 179 exp. reduction in basis G00.00E 17,050. 100,000 582, 1100,000 1,800. [100.000 996. 100.000 649. 100.000 2,922. [100.000 655, 1200,000 154, [300.000 690. 1100.000 1,272. 100.000 1,855. [100.000 1,854. 100.000 2,332, 100.000 315. [100,000 ,271. [500.000 195, 100,000 2,583,100.000 Bus. Unadjusted Cost 1990 or basis Cost or basis Date placed in 07/01/2004 07/01/2004 07/01/2004 07/01/2004 01/06/2005 06/24/2005 11/02/2005 07/01/2004 01/31/2005 12/29/2004 09/07/2005 10/24/2005 05/31/2006 06/30/2006 07/07/2006 08/10/2006 08/10/2006 Date placed in service service Asset description Asset description CLEAR CHANNEL TELE COMPUTER SQUIPMENT DISC. DESK CO. IOP CLASSRM PARTITIONS DISC. DESK CO. IOP AMORTIZATION DEPRECIATION HE COMMUNICATIONS WALKER SYSTEMS HP Less: Retired Assets 2 30"X60" TABLES WELKER SYSTEMS HP Less: Retired Assets Subtotals CONNECT COMPUTER 2 DRAWER CRBINET Listed Property WALKER SYSTEMS DISC. DESK CO. FILE CRBINETS WALKER SYSTEM REFRICERATOR TILE CABINET 5 BOOKCASES Assets Retired TOTALS. . . Subtotals. TOTALS. STARTS

5X9624 1,000

V08-8.1

2008

LOWER NAUGATOCK VALLEY PARENT CHILD RESOURCE

Description of Property

Current-year amortization Current-year depreciation ACRS CRS 179 class class expense 5,000 5.000 5.000 20.000 5.000 7.000 7.000 7.000 5.000 5.000 20.000 5.000 5.000 7.000 7.000 Life 20.000 7.000 Beginning Ending Accumulated Accumulated Accumulated depreciation depreciation thod Conv. Accumulated Accumulated amortization amortization code 738. SL 170. SL 245. SL 100. SL 91. SL 53. SL 84. SL 98. SI 358. SL 110. SL 1,185. SL 1,581. SL 2,240. SL 5,744. SL 132. SL 606. SI 160. SL 118. 136. 199. 108. 448. 84. 404. 59. 52. 74. 160. 43. 43. 1,185. 2,240. 89. 375. 1,581. 5,744. 240. 340. 796. 200. 206. 160. 5,744. 1,155. 544. 1,185. 2,240. depreciation 308. 1,343. 280. 1,672. 254. 1,581. 300. 330. Basis for Basis Reduction 179 exp. reduction in basis 100.000 160. 100.000 .185. 100.000 2,240. 1100.000 300.000.000 308. 100.000 343, 100,000 544. 100.000 796. 100.000 572. [100.000 100.000 340. 100.000 200. [100.000 206, 100,000 .581. 100.000 5,744. 100.000 1,155. [100.000 280.100.000 Bus. 330. 254. Unadjusted Cost 240. or basis Cost or basis 09/19/2006 09/27/2006 11/01/2006 05/31/2006 Date placed in 01/04/2007 04/04/2007 04/04/2007 04/12/2007 05/02/2007 05/25/2007 06/07/2007 06/21/2007 06/30/1994 06/30/1994 06/30/1994 09/01/1996 11/13/2006 06/07/2007 06/30/1994 Date placed in service service Asset description Asset description WYSE, MONIFOR, XEY LATERAL FILE CABIN AWORTIZATION HE LASERJET PRINTR CITAIN 5 USBR ACCE STAPLES PRINTER KY IOP METAL BOOKCASE TEL. EXT 1ST FLOOR PRINTER OFFICES 2 DRAWER FILE CABI PERCH TREE UPDATE Less: Retired Assets DEPRECIATION SECURITY AT FRONT Less: Retired Assets Subtotals 2ND FLOOR OFFICE WK OF CARING LEI 4 DRAWER CREINET Listed Property WALKER SYSTEMS DEED COMPUTER SCHIZE WOONIR Assets Retired SECOND EXIT Subtotals. TOTALS. . FIRE ALARM TOTALS. JSA 8X5024 1.000

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17. 10.

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159. 334.

109.

269.

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STATEMENT

V08-8.1

16,071.

Current-year depreciation

Current-year 179 expense

MA ACRS CRS class class

722. 390.

7.000 20.000 7.000 7.000 72.

390. 197 3,565. 120

58

10.000

20,000

5.000 5.000 7.000 5.000 5.000 5.000 5.000

37. 129. 133.

417 453. 41,514.

41,514.

Current-year amortization

305.

117.

2008

LOWER NAUGRIUCK VALLEY PARENT CHILD RESOURCE

10.000 20.000 20.000 Beginning Ending Accumulated Medepreciation depreciation thod Conv. Life Accumulated Accumulated amortization amortization Code 117. SL 53. SL 133. SL 305. SL 88,391. SL 3,972. SL 324. SI 617. SL 7,130.|SL 1,854. SI 87. SI 172. SL 614. SL 269. SI 1,854.|SL 240. SI 417. SL 453. SL 335,564. 335,564. 06-0925826 211. 72,320. 3,565. 120. 3,250. 420. 69 135. 485. 1,464. 1,464. 252. 120. 294,050. 294,050. Basis for depreciation 5,055. 257. 7,808. 3,949. 798. 482,136. 720. 600. 820. 1,828. 796,531. 796,531. 7,808. 129. 575. 17,825. 1,154. 2,588. 4,170. 6,800. Basis Reduction 179 exp. reduction in basis 5,055. 100.000 1,154. [.00.000 482,136, 100,000 720. 100.000 200.000 7,808. 100.000 129. | 100.000 100,000 2,588, 100.000 575. 1200.000 3,949. [500.000 7,808. 1200.000 100.000 320, 100,000 1,828. 100.000 4,170, 1100,000 6,800. 100.000 798. 100.000 Unadjusted Cost 257. 600. 17,825. 796,531. or basis 796,531 Cost or basis Date placed in 06/21/2007 01/01/2004 01/01/2004 09/01/2004 01/01/2005 07/01/2006 09/01/2004 09/01/2004 09/01/2004 11/01/2004 06/01/2005 07/01/2007 107/01/2007 07/11/2008 08/21/2008 09/04/2008 02/24/2009 01/14/2009 Date placed in service service Asset description Description of Property Asset description SAFETY GLASS SLIDE CLERRCHANNEL TELEC CORF. CONSTRUCTION URNITURE & BOUIPM Subtotals.... Subtotals CORP. CONSTRUCTION JERSEROLD IMPROVEM GRANTEE COMMUNICAT DEPRECIATION AMORTIZATION E & A DESIGN EXIT Less: Retired Assets Less: Retired Assets CONNECT COMPUTER REEN DEVELOPMENT ELEVATOR REPAIR Listed Property WALKER SYSTEMS WALKER SYSTEM WALKER SYSTEM WALKER SYSTEM

C. TRUST

DNIFERE BUILDING

FIRM

Assets Refired 3X9024 1.000

TOTALS. .

X276 749347

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FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

ENDING
BOOK VALUE

PREPAID INSURANCE
PREPAID OTHER

TOTALS

13,306.

LOWER NAUGATUCK VALLEY FRENT CHILD RESOURCE

06-0925826

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FORM 990, PART X - DEFERRED REVENUE	
DESCRIPTION	ENDING BOOK VALUE
DEFERRED INCOME	11,400.

TOTALS

LOWER NAUGATUCK VALLEY & RENT CHILD RESOURCE

06-0925826

11,400.

FORM	990,	PART	Χ	 SECURED	MORTGAGES	AND	NOTES	PAYABLE	

LENDER: WEBSTER BANK - LINE OF CREDIT

ORIGINAL AMOUNT: 225,000.

INTEREST RATE: 4.750000

MATURITY DATE: 05/31/2010

REPAYMENT TERMS: LINE OF CREDIT

SECURITY PROVIDED: ALL ASSETS OF THE PURPOSE OF LOAN: OPERATING NEEDS

ALL ASSETS OF THE ORGANIZATION

BEGINNING BALANCE DUE

215,375.

ENDING BALANCE DUE

215,668.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE

215,375. THE STATE ST

TOTAL ENDING MORIGAGES AND OTHER NOTES PAYABLE

215,668.