Department of the Treasury

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)

The organization may have to use a copy of this return to satisfy state reporting requiremen

OMB No. 1545-0047
2008
Open to Public

Form **990** (2008)

inte	mai Revenue		The organization may have to use a copy of this return to satisfy state in	reporting requ	ullelllel	its. Inspection
Α			year, or tax year beginning , and ending			
В	Check if applica	ble: Please use IRS	- ····································) Emp	loyer identification number
	Address change	label or	USA TRACK & FIELD-NEW ENGLAND	\mathbf{O} , INC.		
	Name change	print or	Doing Business As		04-	-3016191
百	Initial return	type.				hone number
=		See Specific	2001 BEACON STREET 2	07	617	7-566-7600
\sqsubseteq	Termination	Instruc-	City or town, state or country, and ZIP + 4	<u> </u>	Gross red	ceipts\$ 210,870
	Amended return	tions.	BRIGHTON MA 02135-7787			
	Application pen	ding F Nam	e and address of principal officer:	F	(a) Is this	s a group return for
Ш	FF F-	KE	N ROBICHAUD		affilia	tes? Yes X No
		12	07 OLD HOMESTEAD HWY		l(b) Are a	Ill affiliates Yes No
		SW	ANZEY NH 03446			o," attach a list. (see instructions)
ī	Tax-exempt	status: X	501(c) (3) ◄ (insert no.) 4947(a)(1) or 527			
J	•		FNE . ORG		I(c) Grou	p exemption number► 5062
	Type of organiz			of formation: 19		M State of legal domicile: MA
000000000000000000000000000000000000000	Part I	Summa				<u>J</u>
			the organization's mission or most significant activities.			
Φ			rate and organize athletic programs in Track &	Field	Τιοπα	
n C			Running, and Race Walking for both youth and a			 ist in
Activities & Governance			nal programs for coaches and adults.	idui es .	A33.	
Š			··· ··· ··········			
õ			if the organization discontinued its operations or disposed of more than 2	25% of its ass	i	
مخ			g members of the governing body (Part VI, line 1a)			20
ties			pendent voting members of the governing body (Part VI, line 1b)			20
Ξ			employees (Part V, line 2a)			1
Act			volunteers (estimate if necessary)			100
-	7a Tota	gross unre	lated business revenue from Part VIII, line 12, column (C)		7a	
			usiness taxable income from Form 990-T, line 34		. 7b	0
				Prior Year		Current Year
<u>o</u>	8 Cont	ributions ar	nd grants (Part VIII, line 1h)		<u>, 955</u>	3,249
Revenue	9 Prog	ram service	e revenue (Part VIII, line 2g)	187	<u>,806</u>	196,609
ě	10 Inves	stment inco	me (Part VIII, column (A), lines 3, 4, and 7d)	7	, 457	10,460
ď	11 Othe	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3	,268	552
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,486	
			lar amounts paid (Part IX, column (A), lines 1-3)			•
			or for members (Part IX, column (A), line 4)			
G			compensation, employee benefits (Part IX, column (A), lines 5–10)	52	,079	62,962
enses			draising fees (Part IX, column (A), line 11a)	<u> </u>	, , , ,	02/302
)en			Programme (Part IV, calvers (P)) line OF\			
Expe	17 Otho		(5) (1) (4) (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	121	042	117,925
	17 0010					
			Add lines 13-17 (must equal Part IX, column (A), line 25)	173	, <u>121</u> , 365	180,887 29,983
50	19 Reve	enue iess e	kpenses. Subtract line 18 from line 12	Beginning of		End of Year
Net Assets or	20 Total	assets (Da	urt X, line 16)	330		362,750
Ass	24 Total		2-4 // 15 (20)		, <u>451</u>	11,643
Set	21 10ta	•	nd balances. Subtract line 21 from line 20		, 1 24	351,107
	Part II		re Block	321	, 123	331,107
	artii					
		and belief, i	Ities of perjury, I declare that I have examined this return, including accompanying schedules is true, correct, and complete. Declaration of preparer (other than officer) is based on all info	and statements	s, and to th prepar	the best of my knowledge er has any knowledge.
o:					 I	, ,
Si	_					
He	ere	Signatu	re of officer		Date	9
		Type or	print name and title			
ъ-	امن	Preparer's	Date	Check if	_	Preparer's identifying number (see instructions)
Pa		signature	Paul J. DeVasto 11/10/0	self- employed	d ▶ L	023-40-4820
	eparer's	Cinnele	Campbell DeVasto & Associates (CPA's	EIN	▶ 04-2779892
Us	e Only	Firm's name if self-emplo	0001 7		Phone	
		address, an				617-731-2333
Ma	v the IRS d	iscuss this	return with the preparer shown above? (see instructions)		110.	X Yes No

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4d Other program services. (Describe in Schedule O.)

4e Total program service expenses ► \$

including grants of\$

) (Revenue \$

154, **913** (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Checklist of Required Schedules		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		Х
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		х
5	Section 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			
Ü	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," 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,"			
	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, Parts VI, VII, IX, or X as applicable	11	х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
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		Х
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		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		х
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			_
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	₁ 990	X

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Part IV Checklist of Required Schedules (continued)

Page 4

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	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			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
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			
	VI	37		X

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Part V Statements Regarding Other IRS Filings and Tax Compliance Page 5

ГС	Statements Regarding Other INST Imags and Tax Compliance				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1			100	110
	U.S. Information Returns. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors an	nd repo	ortable			
	gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return \dots	2a	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax		s?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	(see				
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year co	overed	by			
	this return?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or o		-			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er tinar	ıcıaı	40		v
h	account)? If "Yes," enter the name of the foreign country:▶			4a		X
IJ	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Form	eian Ra	 ank			
	and Financial Accounts.	cigii ba	arik			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	ar?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		on?	5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt E					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contri	ibutions	s or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а		more th	nan			
	\$75?					X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?					-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	it was				v
لہ	required to file Form 8282?	7d				X
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums o		reonal			
C	benefit contract?	ii a pei	Sorial	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of	contrac		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as requi			7g	Х	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 10		 as	······		
	required?			7h	X	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and	d section	on			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a	sponso	oring			
				8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а						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:	المدا				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b 14	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a				
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	ı ı a				
.,	amounts due or received from them	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

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

Section A. Governing Body and Management

Sec	Clon A. Governing body and management					
	For each "Vee" and the Control of the law and for a "Ne" and the Control of the law does	:	u.		Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, des	cribe i	ine			
4-	circumstances, processes, or changes in Schedule O. See instructions.	4.	20			
1a	Enter the number of voting members of the governing body	1a 1b	20			
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 relation	isnip v	WITH	•		v
2	any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under			2		X
3				3		x
4	supervision of officers, directors or trustees, or key employees to a management company or other	-		4		X
4 5	Did the organization make any significant changes to its organizational documents since the prior			5		X
6	Did the organization become aware during the year of a material diversion of the organization's as Does the organization have members or stockholders?			6	X	Λ
7a	Does the organization have members, stockholders, or other persons who may elect one or more				Λ	<u> </u>
<i>i</i> a	of the governing body?	mem	beis	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other p			7a	Λ	х
8	Did the organization contemporaneously document the meetings held or written actions undertake					21
0	the year by the following:	en dui	iiig			
а	The gaverning had 2			8a	X	
b	Each committee with authority to get on behalf of the governing heavy?				X	
9a	Does the organization have local chapters, branches, or affiliates?			9a	21	Х
b	If "Yes," does the organization have written policies and procedures governing the activities of suc	ch cha	entere	Ja		- 22
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	on one	ipiers,	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All	 I orgai	 nizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	orgai	lizations	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be	e rea	ched at			
••	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			11	X	
Sec	etion B. Policies					
					Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	-110
b	Are officers, directors or trustees, and key employees required to disclose annually interests that	 could	aive			
-	rise to conflicts?	000.0	9.10	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy?	If "Ye				-
	describe in Schedule O how this is done			12c	X	
13	Does the organization have a written whistlableway nalice?			13		Х
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and appro-	oval b	V			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		•			
а	The organization's CEO, Executive Director, or top management official?			15a		Х
b	Other officers or key employees of the organization?			4.5%		Х
	Describe the process in Schedule O. (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arran	geme	nt			
	with a taxable entity during the year?	_		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to e					
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to	safeg	guard			
	the organization's exempt status with respect to such arrangements?			16b		
Sec	ction C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be file MA					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990					
	available for public inspection. Indicate how you make these available. Check all that apply.					
	Own website X Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing document	s, cor	flict of interest			
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books	s and	records of the			
	organization: ▶ STEPHEN PECKICONIS 2001 BEACON					
B		A 0	2135	617-56	6-7	600

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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

- 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	Name and Title Average			((C)	that a		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated 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
Gary Snyder Past Pres	0	x						0	0	0
Tom Petrano Chair		X						0	0	0
Laurie Boem Official		x						0	0	0
Patrick Lav		x						0	0	0
Courtney Bi		x						0	0	0
Paul Kirsch Chair		x						0	0	0
David Callu		x						0	0	0
Justin Kuo Chair	6	X						0	0	0
Michael Tra		х						0	0	0
Skip Cleave Chair	r 1	х						0	0	0
Lisa Doucet Chair	t 1	x						0	0	0
Bill Newshar	m 1	х						0	0	0
Joshua Seeh Athlete Rep	erman 1-2	x						0	0	0
Joan Bohlke Athlete Rep	0	х						0	0	0
Laura Golit Athlete Rep	0	x						0	0	0
Stephen Pec Treasurer	4			х				0	0	0
Ken Robicha President	ud 9			х				0	0	0

Page

rait till seemen :	1		, .	,		,	,	, aa		T
(A)	(B)			. (0				(D)	(E)	(F)
Name and title	Average	Posit	tion (k all			reportable	Reportable	Estimated
	hours per week	Indi or d	Inst	Officer	Key	Hig	Former	compensation from	compensation from related	amount of other
	Week	vidu	ituti	cer	em'	hes	mer	the	organizations	compensation
		tor t	ona		Key employee	ee l		organization	(W-2/1099-MISC)	from the
		Individual trustee or director	Institutional truste		/ee	npe		(W-2/1099-MISC)		organization and related
		эе	stee			Highest compensated employee				organizations
Barry Auske	rn					ed				
Vice Pres	1			x				0	0	
John Oleski	_									
Vice Pres	1			X				0	0	(
Jim Garcia									_	
Vice Pres	3			Х				0	0	(
Stephen Vie	gas 2			v				_	_	
Secretary	2			X				0	0	
• • • • • • • • • • • • • • • • • • • •										
1b Total		<u>.</u>								
	dividuals (including those	in 1a) wh	no re	ceiv	ed n	nore	than \$100,000 in reporta	ble compensation from the	e
organization ► 0										Yes No
3 Did the organization	n list any former officer of	liract	or o	r tru	etaa	kov	, am	nployee, or highest compe	insated	Tes No
employee on line 1	a? If "Yes," complete Sch	edule	e J f	or su	uch	indiv	idua	al		3 X
4 For any individual li	isted on line 1a, is the sui	m of I	repo	ortab	le co	ompe	ensa	ation and other compensa	tion from	
								'Yes," complete Schedule		4 X
5 Did any person liste	ed on line 1a receive or a	ccrue		mpe	 nsat	ion f	rom	any unrelated organization	on for	
								for such person		5 X
Section B. Independen							. 1		th	
1 Complete this table compensation from		ipens	sate	a inc	iepe	naer	nt co	ontractors that received m		
	(A) Name and business address							Descrip	(B) tion of services	(C) Compensation
2 Total number of inc	dependent contractors (in	cludir	na th	1056	in 1) wh	o re	eceived more than \$100,0	00 in	
	the organization			_		_	_			0
DAA	-									Form 990 (200

art \	/III Statement of Revenue					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>1</u>	Federated campaigns 1a			.0.0		0.2, 0.0, 0.0
	Membership dues 1b					
c	Fundraising events 1c					
d d	Related organizations 1d					
e	Government grants (contributions) 1e					
f f	All other contributions, gifts, grants,					
	and similar amounts not included above 1f	3,249				
5 a	Noncash contributions included in lines 1a-1f: \$	- /				
b h	Total. Add lines 1a–1f		3,249			
	Total ridd inioo id iii	Busn. Code				
2a	Entry Fees	Buoin Goud	94,528	94,528		
b			44,257	44,257		
C	NE Dana Canabiana		42,197	42,197		
d	Dights Bass		7,567	7,567		
e			6,865	6,865		
, F	All other program service revenue		1,195	1,195		
,	Total. Add lines 2a–2f		196,609	1/133		
3	Investment income (including dividends, inte		1307003			
"		_	10,460	10,460		
4	other similar amounts)	nroceed	20,100	20,100		
5	Royalties	-				
"		ersonal				
6a		0.00.10.				
b						
	Rental inc. or (loss)		1			
4	Net rental income or (loss)					
7a	Cross amount from	Other				
	sales of assets	Other	1			
	other than inventory		1			
D	Less: cost or other					
_	basis & sales exps.		1			
	Gain or (loss)					
	Net gain or (loss)					
oa	Gross income from fundraising events					
	(not including \$					
	of contributions reported on line 1c).					
١.	See Part IV, line 18 a					
	Less: direct expenses b					
	Net income or (loss) from fundraising events					
9а	Gross income from gaming activities.					
١.	See Part IV, line 19 a					
	Less: direct expenses b					
	Net income or (loss) from gaming activities	····· •				
10a	Gross sales of inventory, less					
	returns and allowances a					
	Less: cost of goods sold b	<u> </u>				
С	Net income or (loss) from sales of inventory					
-	Miscellaneous Revenue	Busn. Code		005		
11a	· · · · • · · • · · · · · · · · · · · ·		285	285		
b	Merchandise Sales Revenue		267	267		
С						
d	All other revenue					
е	Total. Add lines 11a–11d	▶	552			
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d	, 7d, 8c,				
1	9c, 10c, and 11e		210,870	207,621	0	(

Page 10

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must con				<u> </u>
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b	, 8b, 9b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	46,821	37,457	9,364	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	13,281	10,625	2,656	
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				_
9	Other employee benefits				_
10	Payroll taxes	2,860	2,288	572	
11	Fees for services (non-employees):				
а	Management				_
b	<u> </u>				
С	Accounting	8,178		8,178	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	21,640	17,312	4,328	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	11 (50	11 (50		
	Conferences, conventions, and meetings	11,652	11,652		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
	Other company of the main or a contract of				
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
_	5% of total expenses shown on line 25 below.) Facilities Rentals	20,861	20,861		
a	Contract Services	18,999	18,999		
b	Event Awards	13,666	13,666		
c d	Officials	8,614	8,614		
a e	Event Supplies	5,189	5,189		
e f	All other expenses	9,126	8,250	876	
	Total functional expenses. Add lines 1 through 24f	180,887	154,913	25,974	
	Joint Costs. Check here if following	200,007	104,713	23,314	
20	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
					200

Page 11

Р	art)	K Balance Sheet							
					(A) Beginning of year		(B) End of		
	1	Cash—non-interest bearing			117,574	1	Liid Oi	•	977
	2				45,640		22	24,3	
	3	Savings and temporary cash investments Pledges and grants receivable, net			43,040	3			50 <i>7</i>
	4	A (4			,00
	5	Receivables from current and former officers, director				-			-
		employees, or other related parties. Complete Part II		•		5			
	6	Receivables from other disqualified persons (as defin-							
		4958(f)(1)) and persons described in section 4958(c)(
		Part II of Schedule L	. , , ,	00000		6			
S	7	Notes and loans receivable, net			7,969	7		7.9	969
set	8	Inventories for sale or use			. 7000	8		• , •	
Assets	9	Prepaid expenses and deferred charges			518	9		4.8	332
	-	Land, buildings, and equipment: cost basis	10a	4,321		-			
		Less: accumulated depreciation. Complete		_					
		Part VI of Schedule D	10b	4,321		10c			
	11	Increating anta acceptable traded as acception			156,828		11	.7,5	555
	12	Investments—other securities. See Part IV, line 11			,	12			
	13	Investments—program-related. See Part IV, line 11				13			
	14	Intangible assets		14					
	15	Other seeds Ose Deat IV line 44			2,046			4	130
	16	Total assets. Add lines 1 through 15 (must equal line			330,575		36	52,	
	17	Accounts payable and accrued expenses			,	17			003
	18	Grants payable				18			
	19	Deferred revenue			2,080	19			
	20	Tax-exempt bond liabilities			•	20			
es	21	Escrow account liability. Complete Part IV of Schedul	۰ D			21			
Liabilities	22	Payables to current and former officers, directors, trus							
ab		employees, highest compensated employees, and dis	squalified						
Ξ		persons. Complete Part II of Schedule L		22					
	23	Secured mortgages and notes payable to unrelated the				23			
_	24	Unaccured notes and leans navelle			24				
	25	Other liabilities. Complete Part X of Schedule D			7,371	25		2,6	640
	26	Total liabilities. Add lines 17 through 25			9,451	26	1	.1,6	643
ınces		Organizations that follow SFAS 117, check he							
an		complete lines 27 through 29, and lines 33 and 34.							
ā	27	Unrestricted net assets			293,278			35,0	
Ш	28	Temporarily restricted net assets			27,846	28	1	.6,0	90
Ĭ	29	Permanently restricted net assets	<u></u>			29			
or Fund Bala		Organizations that do not follow SFAS 117, check	he▶e						
ō		and complete lines 30 through 34.							
ts	30					30			
Assets	31	Paid-in or capital surplus, or land, building, or equipm				31			
ğ	32	Retained earnings, endowment, accumulated income	, or other fu	nds		32			
Net	33				321,124	33		1,1	
_	34	Total liabilities and net assets/fund balances			330,575	34	36	52,	<u> 150</u>
Р	art)	KI Financial Statements and Reporting					1	I	
								Yes	No
1		counting method used to prepare the Form 990:		Accrual Oth				v	
2		ere the organization's financial statements compiled or	-					Х	
		ere the organization's financial statements audited by a			lity for avarsight of		2b		Х
(Yes" to lines 2a or 2b, does the organization have a co		· · · · · · · · · · · · · · · · · · ·	-		0.5		х
3 .		e audit, review, or compilation of its financial statement a result of a federal award, was the organization requi					2c		
3		0					3a		
		Yes," did the organization undergo the required audit o							
	, 11	100, aid the organization undergo the required addit of	n auullo!				อม	000	

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

				FIETD-NEW ENGI		INC.					<u>-30161</u>			
P	art l	l Reas	on for Public Charity	y Status (All organization	ons mus	st comp	olete t	nis pa	rt.) (s	ee ins	structions)		
Γhe	orga	anization is no	t a private foundation beca	use it is: (Please check only o	ne organ	ization.)								
1	Ш	A church, co	onvention of churches, or as	ssociation of churches describ	ed in sec	tion 170	(b)(1)(A)(i).						
2	Ш	A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital ser	vice organization described in	section	170(b)(1)	(A)(iii).	(Attach	Sched	ule H.)				
4		A medical re	search organization operat	ed in conjunction with a hospi	tal descri	bed in se	ction 1	70(b)(1)	(A)(iii).	Enter t	the hospital's	s name	Э,	
	_	city, and stat	te:											
5		•		t of a college or university owr					al unit d	escribe	ed in			
	ш	-	(b)(1)(A)(iv). (Complete Pa	=	•	,	J							
6	П			governmental unit described i	n section	170(b)(1)(A)(v)							
7	H		=	a substantial part of its suppor					n the as	eneral r	oublic			
•	ш	•	section 170(b)(1)(A)(vi).			,			9.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
8	П			170(b)(1)(A)(vi). (Complete F	Part II \									
9	X	-				om contr	ihutions	memh	ershin i	fees ar	nd arnee			
9	22	An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its												
		-		and unrelated business taxable										
			=	30, 1975. See section 509(a)				i (ax) ii	oiii bus	11103303	5			
40	П		•					\(A\)_(cc	o inetri	iotione'	١			
10	Н	_	-	d exclusively to test for public	-		-)			
11	Ш	_	-	d exclusively for the benefit of	-						otion			
				orted organizations described in the type of supporting organic							CUOII			
		<u> </u>				•		\neg	e III–O					
_		a Type		c Type III–Function			d							
е	Ш		•	rganization is not controlled di			•		•		aatiaa			
		•	•	s and other than one or more	publicly s	supported	organiz	zations	uescrib	eu iii se	ection			
			section 509(a)(2).	termination from the IDC that	itia a Tum	al Tuma	II on T	ma III a						
f				termination from the IRS that	itisaiyp	е і, туре	ili, or i	ype III s	ирропі	ng				
		•	, check this box										Ш	
g		=	=	ation accepted any gift or con	tribution i	rom any	of the							
		following pe			•••								Τ	
				controls, either alone or togeth	-							Yes	No	
				of the supported organization	?						11g(i			
			member of a person descr								11g(i			
				described in (i) or (ii) above?							11g(i	ii)		
h		Provide the	following information about	the organizations the organiz	ation sup	ports.								
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization		organization	(v) Did y	ou notify	` '	s the	(vii) Ar	nount o	f	
	org	anization		(described on lines 1–9 above or IRC section		sted in your			organizat		sup	port		
				(see instructions))	governing	document?	supp	of your oort?	(i) organi U.S	2eu III (IIe S.?				
				(Yes	No	Yes	No	Yes	No				
									_					
	al .													

Schedule A (Form 990 or 990-EZ) 2008 USA TRACK & FIELD-NEW ENGLAND, INC.04-3016191 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (d) 2007 (e) 2008 (c) 2006 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, 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.) 11 **Total support.** Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 14 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here**. The organization qualifies as a publicly supported organization b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 USA TRACK & FIELD-NEW ENGLAND, INC.04-3016191

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (d) 2007 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 49,025 47,980 87,303 80,616 54,371 319,295 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 157,975 97,509 139,041 126,144 145,487 666,156 organization's tax-exempt purpose 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 5 furnished by a governmental unit to the organization without charge Total. Add lines 1-5 207,000 145,489 226,344 206,760 199,858 985,451 7a Amounts included on lines 1, 2, and 3 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 year or \$5,000 Add lines 7a and 7b Public support (Subtract line 7c from 207,000 145,489 226,344 206,760 199,858 line 6.) 985,451 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 6 985,451 207,000 145,489 226,344 206,760 199,858 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 2,288 5,656 6,935 7,457 10,460 32,796 sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b ... 2,288 5,656 6,935 7,457 10,460 32,796 Net income from unrelated business 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.) 9,032 11,645 2,380 3,269 552 26,878 13 Total support. (Add lines 9, 10c, 11, 218,320 162,790 235,659 210,870 217,486 and 12.) 1,045,125 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 94.2903 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 94.4357 Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 3.1380 % Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 2.1184 19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A	A (Form 990 or 990-EZ) 200	8 USA TRACK &	FIELD-NE	W ENGLAND,	INC.04-3016191	Page 4
Part IV	Supplemental Inf Part II, line 17a o	formation. Complet r 17b; or Part III, lin	e this part to p e 12. Provide	rovide the expla any other addition	ination required by Part I onal information. (see ins	I, line 10; structions)
Part	III, Line 12	- Other Inco	ome Detail	<u> </u>		
Misc	Income		\$	4,71	L 2	
Mercl	handise sales		\$	17,02	23	
Equip	pment rental		\$	4,73	36	
Outs	ide Service &	Other Revenu	ıe \$	40)7	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

OMB No. 1545-0047
2008
Open to Public Inspection

Name of the organization

Employer identification number

TT	SA TRACK & FIELD-NEW ENGLAND, INC.		04-3016191
	art I Organizations Maintaining Donor Advised F	unds or Other Similar Funds	
	the organization answered "Yes" to Form 990), Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing t	hat the assets held in donor advised	
	funds are the organization's property, subject to the organization's e	xclusive legal 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 purposes and not for the benefit of the dono	r or donor advisor or other	
	impermissible private benefit?		Yes No
Pa	art II Conservation Easements. Complete if the or	ganization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (che	ck all that apply).	
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically i	important land area
	Protection of natural habitat	Preservation of certified histori	c structure
	Preservation of open space		
2	Complete lines 2a–2d if the organization held a qualified conservation	on contribution in the form of a conserv	ration easement
	on the last day of the tax year.		
			Held at the End of the Year
а			
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure in	ncluded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/	17/06	2d
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the org	anization during
	the taxable year ▶		
4	Number of states where property subject to conservation easement		
5	Does the organization have a written policy regarding the periodic m	onitoring, inspection, violations, and	п., п.,
_			
6	Staff or volunteer hours devoted to monitoring, inspecting, and enfor		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing		
8	Does each conservation easement reported on line 2(d) above satis		☐ Yes ☐ No
9	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation ease		
9	balance sheet, and include, if applicable, the text of the footnote to the		
	the organization's accounting for conservation easements.	ie organization s inianolal statements	triat describes
Pa	art III Organizations Maintaining Collections of Ar	t. Historical Treasures. or Ot	her Similar Assets.
	Complete if the organization answered "Yes"	to Form 990, Part IV, line 8.	
	· •		
1a	If the organization elected, as permitted under SFAS 116, not to repo	ort in its revenue statement and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public exhibit		
	provide, in Part XIV, the text of the footnote to its financial statement	s that describes these items.	•
b	If the organization elected, as permitted under SFAS 116, to report in	n its revenue statement and balance s	heet works of art,
	historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance	of public service,
	provide the following amounts relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	(ii) Assets included in Form 990, Part X	or other similar assets for financial ga	in, provide the
	following amounts required to be reported under SFAS 116 relating		
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2008 USA							Page 2
-		Collections of Ar	•				ontinued
3 Using the organization's access items (check all that apply):	ion and other	records, check any of t	he following that a	re a significant use	of its collection	1	
a Public exhibition		d Loan o	or exchange progra	ams			
b Scholarly research		e Other					
c Preservation for future gene	rations						
4 Provide a description of the organization of the organization.		ollections and explain ho	w they further the	organization's exen	npt purpose in		
5 During the year, did the organiz	ation solicit o	r receive donations of a	rt, historical treasu	res, or other similar		□ v ₌₌	Пис
assets to be sold to raise funds Part IV Trust, Escrow ar		ial Arrangements.			wored "Ves	Yes	No OOO
		an amount on Forr			weieu ies	S to Form	990,
<u> </u>							
1a Is the organization an agent, tru		-					□
included on Form 990, Part X?						Yes	☐ No
b If "Yes," explain the arrangemen	nt in Part XIV	and complete the follow	ring table:			A	-1
					<u> </u>	Amour	11
c Beginning balance					1c		
d Additions during the year					1d		
e Distributions during the year					1e		
f Ending balance					1f		
2a Did the organization include an	amount on Fo	orm 990, Part X, line 21	?			Yes	☐ No
b If "Yes," explain the arrangemen			1 (0)	"			
Part V Endowment Fun	ds. Compl	lete if organization					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Fou	r years back
1a Beginning of year balance							
b Contributions							
c Investment earnings or losses							
d Grants or scholarships							
e Other expenditures for facilities							
and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage		r end balance held as:					
Board designated or quasi-endo							
b Permanent endowment ► _		~					
c Term endowment ►							
3a Are there endowment funds not		ssion of the organization	that are held and	administered for th	e		
organization by:	in the poode.	oolon of the organization	r triat are ricia aria	administered for th	C		Yes No
(i) unrelated organizations						3a(i)	100 110
/::\ roloted ermoni-ations						2-/::\	
b If "Yes" to 3a(ii), are the related		s listed as required on S	ahadula DO			2 h	
4 Describe in Part XIV the intende	•	·					1
		ings, and Equipme		990. Part X. lin	ne 10.		
Description of investment	, 	(a) Cost or other basis	(b) Cost or ot		preciation	(d) Book	c value
, , , , , , , , , , , , , , , , , , ,		(investment)	basis (other	` ,		(1)	
			+				
1a Land							
1a Land							
b Buildings							
b Buildingsc Leasehold improvements			A	. 321	4.321		
b Buildings			4	,321	4,321		

Schedule D (Form 990) 2008

	nvestments—Other Securities. See Fo	<u>, , , , , , , , , , , , , , , , , , , </u>	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivat	tives and other financial products		
Closely-held equ	uity interests		
Other			
		_	
		-	
		-	
		_	
		_	
		_	
		_	
		-	
Total (Column ((b) should equal Form 990, Part X, col. (B) line 12.)	>	
	nvestments—Program Related. See Fo		
i dit viii i	(a) Description of investment type	(b) Book value	(c) Method of valuation:
	(a) Bessingtion of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column ((b) should equal Form 990, Part X, col. (B) line 13.)	>	
Part IX (Other Assets. See Form 990, Part X, lin	e 15.	
Part IX (Other Assets. See Form 990, Part X, lin (a) Description		(b) Book value
Part IX ((b) Book value
Part IX ((b) Book value
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Part IX ((b) Book value
	(a) Description		
Total. (Column ((a) Description (a) Description (b) Should equal Form 990, Part X, col. (B) line 15.)	on	(b) Book value
Total. (Column ((a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X,	line 25.	
Total. (Column ((a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability	on	
Total. (Column (Part X ((a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes	line 25. (b) Amount	
Total. (Column (Part X C	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes 'F' Membership	line 25. (b) Amount 1,959	
Total. (Column (Part X Column (OT USAT OF USAT	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes Presented the second	line 25. (b) Amount 1,959 1,650	
Total. (Column (Part X Compart X Com	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes IF Membership IF Sanctions IF Club	line 25. (b) Amount 1,959 1,650 545	
Total. (Column (Part X 0) USAT 07 USAT Payroll	(a) Description (b) Should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes IF Membership IF Sanctions IF Club Liabilities	line 25. (b) Amount 1,959 1,650 545 340	
Federal income of USAT 07 USAT 07 USAT Payroll 09 USAT	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes IF Membership IF Sanctions IF Club Liabilities IF Club	line 25. (b) Amount 1,959 1,650 545 340 150	
Total. (Column (Part X Column (Column	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes IF Membership IF Sanctions IF Club Liabilities IF Club Description	line 25. (b) Amount 1,959 1,650 545 340 150 111	
Total. (Column (Part X Column (OPart X Column	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes PF Membership PF Sanctions PF Club Liabilities PF Club Description of liability Liabilities PF Club Description of liability	line 25. (b) Amount 1,959 1,650 545 340 150 111 75	
Total. (Column (Part X 0) USAT 07 USAT 09 USAT 09 USAT 09 USAT Bank Am 10 USAT 11 USAT	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes PF Membership PF Sanctions PF Club Liabilities PF Club Perica PF Club PF Club PF Club	line 25. (b) Amount 1,959 1,650 545 340 150 111	
Total. (Column (Part X Column (Part	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes Pr Membership Pr Sanctions Pr Club Liabilities Pr Club Perica Pr Club	line 25. (b) Amount 1,959 1,650 545 340 150 111 75 50	
Federal income of O7 USAT O9 USAT Payroll O9 USAT Bank Am 10 USAT USATF MAIL Oth	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes IF Membership IF Sanctions IF Club Liabilities IF Club Merica Mer	line 25. (b) Amount 1,959 1,650 545 340 150 111 75 50 -2,240	
Federal income of O7 USAT O9 USAT Payroll O9 USAT Bank Am 10 USAT USATF MAIL Oth	(a) Description (b) should equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, (a) Description of liability taxes Pr Membership Pr Sanctions Pr Club Liabilities Pr Club Perica Pr Club	line 25. (b) Amount 1,959 1,650 545 340 150 111 75 50	

Sche	dule D (Form 990) 2008 USA TRACK & FIELD-NEW ENGLA				Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 99			}	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net). Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
Pa	art XII Reconciliation of Revenue per Audited Financial State			r Ret	urn
1	Total revenue, gains, and other support per audited financial statements \hdots			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV)	4b		_	
_	Add lines 4a and 4b			4c	
5 De	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)			5 0 F D	loturo.
	Int XIII Reconciliation of Expenses per Audited Financial Sta		-	191 K	Leturn
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	
2		00			
a	Donated services and use of facilities	1 1			
b	Prior year adjustments				
c d	Losses reported on Form 990, Part IX, line 25				
u	Other (Describe in Part XIV) Add lines 2a through 2d			20	
3				2e 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			3	
т a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Others (Describe in Dest VIV)	41-			
	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.			5	
	art XIV Supplemental Information	7			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	t III. lines 1	1a and 4: Part IV. lines 1	1b	
	2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, line				
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Schedule D (Form 990) 2008

Schedule D (I	Form 990)) 2008	ິ ບຣ	A T	RAC	K a	% F.	TE.	டம-	-NEV	v E.	NGT	ANI	Ι,	ΤN	C.04	1-3	лте	ΤЭ.	Т			Ρ	age 5
Schedule D (I	Supr	leme	ntal l	nfori	matio	on (c	contin	ued)																
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SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service

► 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.

National Masters Indoor Track Championships as well as

2008 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

USA TRACK & FIELD-NEW ENGLAND, INC.

Form 990, Part III, Line 4a - First Achievement

Employer identification number 04-3016191

other National and Regional championship events and race
series for our members.
Form 990, Part III, Line 4d - All Other Achievements
n/a
Form 990, Part VI, Line 6 - Classes of Members or Stockholders
There are youth members (under age 18) and adult members (age 18 and over)
only adult members have voting rights. There are no preferred members
The members elect the board of governors. The members approve significant
decisions of the governing body. The members do not receive a share of the
organizations excess dues or a share of the organizations net assets upon
the organizations dissolution as the funds would not go back to the
members, they would be remitted to the national organization.
Form 990, Part VI, Line 7a - Election of Members and Their Rights
Should a vacancy arise on the Board of Governors, the remaining board may
fill that position until the next election.
Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990
A copy of Form 990 was emailed to all members of the Board of Governors
prior to its filing. The Treasurer, the President, the Managing Director,

Schedule O (Form 990) 2008 Page **2**

Name of the organization USA TRACK & FIELD-NEW ENGLAND, INC.	Employer identification number 04-3016191
the secretary and at least one Vice President will r	review the form in
detail prior to filing, the rest of the board will h	ave it in their email
inbox and can review it at any time.	
Form 990, Part VI, Line 11 - Officers Who Cannot Be	
(SEE ATTACHED LIST)	
Form 990, Part VI, Line 12c - Enforcement of Conflic	
All members of the Board of Governors are required t	o annually fill out and
sign a form which asks for comprehensive information	on all activities in
which they are involved which overlap or conflict wi	th their duties and
activities on our Board. These forms are reviewed t	wice a year by the
Managing Director and Treasurer.	
Schedule O - Additional Information	
Part VI, Section C, 19: All governing documents are	available publicly on
our web site at www.usatfne.org. At our annual meet	ing every year in
September, we hand out Income and Expense, and Balan	ce Sheet statements.

Forms	Oth	er Notes an	nd Loans Recei	vable	1 2000
990 / 990-PF	For calendar year 2008,	or tax vear beginni	ina .	, and ending	2008
Name		y	,		nployer Identification Number
USA TRACK & F	IELD-NEW ENGL	AND, INC.		04	4-3016191
Form 990, Par	t X, Line 7 -	Addition	al Informat	ion	
No	ame of borrower			Relationship to disqua	plified person
(1) BOSTON TRACE			N/A	Trelationship to disque	aimed person
(2)					
(F)					
(6)					
(7)					
<u>(9)</u> (10)					
(10)			1		
Original amount		Maturity			Interest
borrowed	Date of loan	date		epayment terms	rate
(1) 9,14 3	3 2/28/06		OPEN ACCO	DUNT	0.000
<u>(2)</u> <u>(3)</u>					
<u>(4)</u>					
(5)					
(6)					
<u>(7)</u> (8)					
(9)					
(10)					
			1		
Coouri	to analidad bu barrawar			Durana of las	
(1) NONE	ty provided by borrower		NATIONAL	Purpose of loa CHAMPIONSHI	
(2)					
(3)					
(4)					
<u>(5)</u> <u>(6)</u>					
<u>(7)</u>					
(8)					
(9)					
(10)					
			Balance due at	Balance due at	Fair market value
	on furnished by lender		beginning of year	end of year	(990-PF only)
<i>S</i> - <i>t</i>	CHAMPIONSHIP	DEFAULT	7,969	7,969	9
<u>(2)</u> <u>(3)</u>					
(4)					
(5)					
(6)					
(7)					
(8) (9)					
<u>(10)</u>					
Totals			7,969	7,969	9

976 USA TRACK & FIELD-NEW ENGLAND, INC. 04-3016191 Federal Statements

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FYE: 12/31/2008

Total

Taxable Interest on Investments

Unrelated Exclusion Postal Description Amount **Business Code** Code Code 10,460 Interest Income \$

10,460

976 USA TRACK & FIELD-NEW ENGLAND, INC.

04-3016191 FYE: 12/31/2008

Federal Statements

11/10/2009 4:31 PM Page 2

Form 990, Part IX, Line 24f - All Other Expenses

Description	E	Total xpenses	Program Service	gement & eneral	 Fund Raising
Event Merchandise	\$	3 , 187	\$ 3,187	\$	\$
Telephone		1,806	1,806		
Postage		972	972		
Event Equipment & Materia		836	836		
Postage - Newsletter		544	544		
Telephone - Management		451		451	
Advertising		385	385		
Miscellaneous Expense		320	320		
Postage - Management		243		243	
Special Programs Expense		200	200		
Postage - Newsletter - Ma		136		136	
Bank Charges		46	 	 46	
Total	\$	9,126	\$ 8,250	\$ 876	\$ 0