Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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 requirements.

| 4          | For the     | e 2005 caid                              | endar ye        | ear, or t | ax year beginn            | ing              | , and end                 | ing          |               |                        |              |            |                    |                     |
|------------|-------------|--|-----------------|-----------|---------------------------|------------------|---------------------------|--------------|---------------|------------------------|--------------|------------|--------------------|---------------------|
| В          | Check if    | f applicable:                            | Please          | 1 0 140   | ame of organization       |                  |                           |              |               |                        | D            | Employe    | er identificat     | ion no.             |
|            | Address     | change                                   | use IRS         |           | onnection                 | cut Rec          | reation                   | and P        | ark           | 3                      |              | 22-2       | <u>662056</u>      | 5                   |
|            | Name ch     | hange                                    | print or        | A         | ssociati                  | ion, In          | ic.                       |              |               |                        | E            | Telepho    | ne number          |                     |
| Ħ          | Initial ret | · ·                                      | type.           | Νι        | umber and street (d       | or P.O. box if m | nail is not delivered t   | o street add | ress)         | Room/sui               | te           |            |                    |                     |
| 4          |             |  | See<br>Specific | 1         | <u>.800 Sila</u>          | as Dean          | e Highwa                  | У            |               | 172                    | <u>  F</u> _ | Account    | ing method:        | Cash                |
|            | Final ret   | turn                                     | Instruc-        | · ·       | ty or town, state or      | country, and Z   | <u>IP + 4</u>             |              |               |                        | X            | Accrual    | Other              | (specify)           |
|            | Amende      | ed return                                | tions.          | R         | ocky Hil                  | L1               | CT                        | 06067        | 1             |                        |              |            |                    |                     |
|            | Applicat    | tion pending                             |                 |           | •                         |                  | 7(a)(1) nonexempt         |              | <b>H</b> and  | I are not applicable   | to section   | n 527 orga | nizations.         |                     |
|            | ••          |  | tru             | usts mus  | st attach a compl         | leted Schedul    | e A (Form 990 or 9        | 990-EZ).     | H(a)          | Is this a group retu   | rn for affil | iates?     | Yes                | X No                |
| G_         | Websit      | te: 🕨 ww                                 | w.crp           | pa.com    | n                         |                  |                           |              | H(b)          | If "Yes," enter number | ber of affi  | liates 🕨 . |                    |                     |
| J          | Organi      | ization typ                              | е               |           |                           |                  | _                         | _            | H(c)          | Are all affiliates inc | luded?       |            | Yes                | No                  |
|            | (check      | only one)                                | ▶  X            | 501(c) (  | <b>3</b> ) <b>∢</b> (inse | ert no.)         | 4947(a)(1) or             | 527          |               | (If "No," attach a lis | t. See ins   | tr.)       |                    |                     |
| Κ          | Check h     | nere 🕨                                   | if the          | organizat | ion's gross receipt       | s are normally   | not more than \$25,0      | 000. The     | H(d)          | Is this a separate re  | eturn filed  | by an      | _                  | _                   |
|            | organiza    | ation need n                             | _               | •         |                           | -                | nooses to file a return   | I            |               | organization covere    | ed by a gi   | oup ruling | ? Yes              | No                  |
|            | ·           |  |                 |           | ates require a co         | · ·              |                           | ,            |               | Group Exemption        |              |            |                    |                     |
|            |             |  |                 |           |                           |                  |                           |              | M             | Check ▶ X i            | f the org    | anization  | is <b>not</b> requ | ired                |
|            | Gross       | receipts: A                              | dd lines        | 6b, 8b,   | 9b, and 10b to li         | ine 12           | 320                       | 5,051        |               | to attach Sch. B       | (Form 9      | 90, 990-E  | EZ, or 990-l       | PF).                |
| P          | art I       | Reve                                     | enue, I         | Expen     | ses, and Ch               | anges in         | Net Assets o              | r Fund E     | <u> Balan</u> | ces (See the           | instru       | ctions.)   |                    |                     |
|            | 1           | Contributi                               | ons, gifts      | s, grants | s, and similar an         | nounts receiv    | red:                      |              |               |                        |              |            |                    |                     |
|            | а           | Direct put                               | olic supp       | ort       |                           |                  |                           | -            | 1a            |                        |              |            |                    |                     |
|            | b           | Indirect p                               | ublic sup       | port      |                           |                  |                           |              | 1b            |                        |              |            |                    |                     |
|            | С           | Governme                                 | ent contr       | ributions | (                         |                  |                           |              | 1c            |                        |              |            |                    |                     |
|            | d           |  |                 |           |                           |                  | none                      |              |               |                        | ) 1          | ld         |                    | 0                   |
|            | 2           |  |                 |           |                           |                  | nd contracts (fron        |              | line 93       | )                      |              | 2          | 106                | ,962                |
|            | 3           | 3 Membership dues and assessments        |                 |           |                           |                  |                           |              |               | 3                      |              | ,465       |                    |                     |
|            | 4           |  |                 |           |                           |                  |                           |              |               | 4                      |              | 749        |                    |                     |
|            | 5           | 5 Dividends and interest from securities |                 |           |                           |                  |                           |              | 🗀             | 5                      | 2            | ,418       |                    |                     |
|            | 6a          | Gross ren                                |                 |           |                           |                  |                           |              | 6a            |                        |              |            |                    |                     |
|            | b           | Less: ren                                |                 |           |                           |                  |                           | ····· 🗖      | 6b            |                        |              |            |                    |                     |
|            | C           |  | •               |           | ) (subtract line 6        |                  |                           | ······ 🗀     | <del></del>   |                        |              | Sc         |                    |                     |
| _          | 7           |  |                 | ,         | (describ <b>▶</b>         |                  | ~                         | )            |               |                        | · · · ·      | 7          |                    |                     |
| Revenue    | 8a          |  |                 |           | of assets other           | Γ                | (A) Securitie             | 29           | ····          | (B) Other              | •••          | -          |                    |                     |
| š          | "           | than inver                               |                 | iii dalaa |                           | <u> </u>         | (r.y cocurrent            |              | Ва            | (D) Gallor             |              |            |                    |                     |
| 8          | b           |  |                 | r hasis : | and sales expen           |                  |                           |              | Bb            |                        | -            |            |                    |                     |
|            | C           | Gain or (le                              |                 |           |                           | ····             |                           |              | BC            |                        |              |            |                    |                     |
|            | l 4         |  |                 |           | e line 8c, colum          | ns (A) and (F    | 3))                       | <u> </u>     | <del></del>   |                        |              | 3d         |                    |                     |
|            | 9           | _  |                 |           |                           |                  | amount is from <b>g</b> a | mina che     |               | ٠                      | ··· 📙        | ,a         |                    |                     |
|            | a           | Gross rev                                |                 |           |                           | adic). If dify c | of                        | iiiiig, ch   |               | <u> </u>               |              |            |                    |                     |
|            | "           | contribution                             |                 |           | line del                  |                  | _                         | 1.           | 9a            | 179,4                  | 157          |            |                    |                     |
|            | b           |  | •               |           | er than fundraisi         |                  |                           |              | 9b            | 163,7                  | 794          |            |                    |                     |
|            | C           |  |                 |           |                           | · .              | 9b from line 9a)          |              |               | 10371                  |              | Эс         | 15                 | ,663                |
|            | 10a         |  |                 |           |                           |                  |                           |              | 0a            |                        | ··· 📑        |            |                    | 7005                |
|            | b           | Less: cos                                |                 |           |                           |                  |                           |              | 0b            |                        | -            |            |                    |                     |
|            | C           |  | _               |           |                           |                  | <br>:hedule) (subtract    |              |               | o 10a)                 |              | Oc         |                    |                     |
|            | 11          | •  | •               | •         | VII, line 103)            | • `              | , ,                       |              |               | ,                      | ··· 🗀        | 11         |                    |                     |
|            | 12          |  |                 |           |                           |                  |                           |              |               |                        | · · · · —    | 2          | 162                | ,257                |
|            | 13          |  |                 |           | ne 44, column (E          | 311              |                           |              |               |                        |              | 13         | 42                 | <u>,237</u><br>,982 |
| es         | 14          |  |                 |           |                           |                  |                           |              |               |                        | · · · -      | 14         | 92                 | ,895                |
| Expenses   | 15          |  |                 |           | column (D))               |                  |                           |              |               |                        |              | 15         | <u> </u>           | ,000                |
| ă          | 1           |  |                 |           | ach schedule)             |                  |                           |              |               |                        | ···          | 16         |                    |                     |
| Ш          | 16          |  |                 |           |                           |                  |                           |              |               |                        | ⊢            | 17         | 125                | ,877                |
| ς.         | 17          |  |                 |           |                           |                  |                           |              |               |                        | ···   ,      |            |                    |                     |
| set        | 18          |  |                 |           | year (subtract li         |                  |                           | ۸۱۱          |               |                        | · · · · —    | 18         | 120                | ,380                |
| As         | 19          |  |                 |           |                           |                  | line 73, column (         | A))          |               |                        |              | 19         |                    | ,900                |
| Net Assets | 20          |  | •               |           | ets or fund balan         | •                | explanation)              |              | SC            | atement 1              |              | 20         |                    | ,219<br>061         |
| _          | 1 77        | INIOT OCCOP                              | e or time       | a naiana  | DE OF ANA OF WAR          | r icombino lii   | י לאחר נוך או סבר         |              |               |                        | , ,          | /1 I       | 1 6 4              | - (100 1            |

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.) Statement of

| _     | Functional Expenses organizations a                                       | 110 000110 | 11 10 17 (a)(1) Horioxor | TIPE OFFICIALITIES ET GOLO | Dat optional for others.   | (OCC the motivations |
|-------|---|------------|--------------------------|----------------------------|----------------------------|----------------------|
|       | Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I. |            | (A) Total                | (B) Program services       | (C) Management and general | (D) Fundraising      |
| 22    | Grants and allocations (attach schedule)                                  |            |                          |                            |                            |                      |
|       | (cash\$ non-cash\$ )  | 22         |                          |                            |                            |                      |
|       | If this amount includes foreign grants, check here ▶                      | 22         |                          |                            |                            |                      |
| 23    | Specific assistance to individuals (attach                                |            |                          |                            |                            |                      |
|       | schedule)   | 23         |                          |                            |                            |                      |
| 24    | Benefits paid to or for members (attach                                   |            |                          |                            |                            |                      |
|       | schedule)   | 24         |                          |                            |                            |                      |
| 25    | Compensation of officers, directors, etc.                                 | 25         |                          |                            |                            |                      |
| 26    | Other salaries and wages  | 26         | 55,008                   | 24,754                     | 30,254                     |                      |
| 27    | Pension plan contributions  | 27         | 33,333                   |                            | 30,232                     |                      |
| 28    | Other employee benefits   | 28         |                          |                            |                            |                      |
|       | Decimal Leaves  | 29         | 4,796                    | 2,158                      | 2,638                      |                      |
|       | Professional fundraising fees   | 30         | 27730                    | 2,130                      | 2,000                      |                      |
| 31    | Accounting fees   | 31         | 3,118                    |                            | 3,118                      |                      |
| 32    | Legal fees  | 32         | 37110                    |                            | 37110                      |                      |
| 32    | Legal fees Supplies   | 33         | 31,285                   |                            | 31,285                     |                      |
|       | * *   | 34         | 2,817                    |                            | 2,817                      |                      |
| 35    | Telephone   | 35         | 2,424                    |                            | 2,424                      |                      |
| 36    | Postage and shipping  | 36         | 6,610                    |                            | 6,610                      |                      |
| 30    | Occupancy   | 37         | 0,010                    |                            | 0,010                      |                      |
| 20    | Equipment rental and maintenance  | 38         | 7,182                    | 4,668                      | 2,514                      |                      |
| 30    | Printing and publications   | 39         | 7,102                    | 7,000                      | 2,314                      |                      |
| 39    | Travel  | 40         | 370                      |                            | 370                        |                      |
|       | Conferences, conventions, and meetings                                    | 41         | 370                      |                            | 370                        |                      |
|       | Interest  | $\vdash$   |                          |                            |                            |                      |
|       | Depreciation, depletion, etc. (attach schedule)                           | 42         |                          |                            |                            |                      |
|       | Other expenses not covered above (itemize):                               | 40-        | 22 267                   | 11 402                     | 10 065                     |                      |
|       | s See Statement 2   | 43a        | 22,267                   | 11,402                     | 10,865                     |                      |
|       | <b>.</b>  | 43b        |                          |                            |                            |                      |
|       |   | 43c        |                          |                            |                            |                      |
|       | d   | 43d        |                          |                            |                            |                      |
| •     | 9   | 43e        |                          |                            |                            |                      |
| 1     |   | 43f        |                          |                            |                            |                      |
|       | 9   | 43g        |                          |                            |                            |                      |
| 44    | Total functional expenses. Add lines 22                                   |            |                          |                            |                            |                      |
|       | through 43. (Organizations completing                                     |            |                          |                            |                            |                      |
|       | columns (B)-(D), carry these totals to lines                              |            | 405 055                  | 40.000                     | 22 22=                     | _                    |
| _     | 13-15)  | 44         | 135,877                  | 42,982                     | 92,895                     | 0                    |
|       | int Costs. Check▶ ☐ if you are following SOP 98-2.                        |            |                          |                            |                            |                      |
|       | e any joint costs from a combined educational campaign a                  | nd fundra  |                          |                            |                            | Yes X No             |
|       | Yes," enter (i) the aggregate amount of these joint cos                   |            |                          | t allocated to Program s   |                            | ;                    |
| (iii) | the amount allocated to Management and gener                              |            | ; and (iv) the amour     | nt allocated to Fundraisi  | n <b>§</b>                 |                      |

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

| All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)  a To promote public awareness of and support for the value | 17(a)(1)   |
|---|------------|
| a To promote public awareness of and support for the value  |            |
| of recreation and parks in the lives of individuals. To provide services that contribute to the development of CRPA members.  |            |
|   |            |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ ☐ 42,   | <u>982</u> |
| b   |            |
|   |            |
|   |            |
|   |            |
|   |            |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶   |            |
| c C   |            |
|   |            |
|   |            |
|   |            |
|   |            |
|   |            |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □ d   |            |
| <b>4</b>  |            |
|   |            |
|   |            |
|   |            |
|   |            |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □   |            |
| e Other program services (attach schedule)  |            |
| (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □   |            |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services)  • 42, Form 990  | <u>982</u> |

Balance Sheets (See the instructions.) Part IV **Note:** Where required, attached schedules and amounts within the description (A) (B) Beginning of year End of year column should be for end-of-year amounts only. 45 Cash-non-interest-bearing ..... 45 Savings and temporary cash investments 101,835 121,735 46 46 47a Accounts receivable ..... 3,647 47a Less: allowance for doubtful accounts 47b 47c 3,647 48a Pledges receivable ..... 48a Less: allowance for doubtful accounts 48b 48c b Grants receivable 49 49 50 Receivables from officers, directors, trustees, and key employees (attach schedule) 51a Other notes and loans receivable (attach schedule) 51a Less: allowance for doubtful accounts ..... b 51b 51c Inventories for sale or use ..... 52 Prepaid expenses and deferred charges ..... 53 53 Investments-securities See Statement 3  $\blacktriangleright$   $\bigsqcup$  Cost  $\bigsqcup$  FMV 42,213 38,065 54 54 55a Investments-land, buildings, and equipment: basis 55a **b** Less: accumulated depreciation (attach schedule) 55b 56 Investments-other (attach schedule) 56 57a Land, buildings, and equipment: basis 57a **b** Less: accumulated depreciation (attach schedule) [57b |
Other assets (describe ▶ ) \_57b 57c 58 58 139,900 167,595 Total assets (must equal line 74). Add lines 45 through 58. 59 59 Accounts payable and accrued expenses ..... 60 60 548 61 Grants payable ..... 61 62 Deferred revenue ..... 62 Loans from officers, directors, trustees, and key employees (attach Liabilities 63 64a Tax-exempt bond liabilities (attach schedule) 64a Mortgages and other notes payable (attach schedule) 64b Other liabilities (describe ► See Statement 4 ) 2,986 65 Total liabilities. Add lines 60 through 65 .... 0 66 3,534 Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. **Net Assets or Fund Balances** 139,900 164,061 67 Unrestricted 67 Temporarily restricted ..... 68 68 Permanently restricted 69 Organizations that do not follow SFAS 117, check her▶ ☐ and complete lines 70 through 74. Capital stock, trust principal, or current funds ..... 70 Paid-in or capital surplus, or land, building, and equipment fund 71 71 Retained earnings, endowment, accumulated income, or other funds 72 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) 139,900 73 164,061 139,900 167,595 Total liabilities and net assets/fund balances. Add lines 66 and 73.

Form **990** (2005)

| Forn | 1990 (2005) Connecticut Recreation and Parks                             | 22-2662056            |           | Page <b>5</b> |
|------|--|-----------------------|-----------|---------------|
| Pa   | rt IV-A Reconciliation of Revenue per Audited Financial Sta              | tements With Revenue  | per Retur | n (See the    |
|      | instructions.)   |                       |           |               |
| а    | Total revenue, gains, and other support per audited financial statements |                       | а         | 162,257       |
| b    | Amounts included on line <b>a</b> but not on Part I, line 12:            |                       |           |               |
| 1    | Net unrealized gains on investments                                      | b1                    | _         |               |
| 2    | Donated services and use of facilities                                   | b2                    | _         |               |
| 3    | Recoveries of prior year grants  | b3                    | _         |               |
| 4    | Other (specify):   |                       |           |               |
|      |  |                       | _         |               |
|      | Add lines <b>b1</b> through <b>b4</b>                                    |                       | b         |               |
| С    | Subtract line <b>b</b> from line <b>a</b>                                |                       | С         | 162,257       |
| d    | Amounts included on Part I, line 12, but not on line a:                  |                       |           |               |
| 1    | Investment expenses not included on Part I, line 6b                      | d1                    |           |               |
| 2    | Other (specify):   |                       |           |               |
|      |  |                       |           |               |
|      | Add lines d1 and d2  |                       | d         |               |
| е    | Total revenue (Part I, line 12). Add lines <b>c</b> and <b>d</b>         |                       | е         | 162,257       |
| Pa   | rt IV-B Reconciliation of Expenses per Audited Financial St              | atements With Expense | s per Ret | urn           |
| а    | Total expenses and losses per audited financial statements               |                       | а         | 135,877       |
| b    | Amounts included on line <b>a</b> but not Part I, line 17:               |                       |           |               |
| 1    | Donated services and use of facilities                                   | b1                    |           |               |
| 2    | Prior year adjustments reported on Part I, line 20                       | b2                    |           |               |
| 3    | Losses reported on Part I, line 20                                       | b3                    |           |               |
| 4    | Other (specify):   |                       | 7         |               |
|      |  | 64                    |           |               |
|      | Add lines <b>b1</b> through <b>b4</b>                                    |                       | b         |               |
| С    | Subtract line <b>b</b> from line <b>a</b>                                |                       | С         | 135,877       |
| d    | Amounts included on Part I, line 17, but not on line a:                  |                       |           |               |
| 1    | Investment expenses not included on Part I, line 6b                      | d1                    |           |               |
| 2    | Other (specify):   |                       | ]         |               |
|      |  | d2                    |           |               |
|      |  |                       |           |               |

Add lines d1 and d2

Total expenses (Part I, line 17). Add lines c and d Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

| or noy omployee at any time during the year even in the | oy more more compensation                                | ) ( <b>3</b> 3 3 11 5 11 13 13 | ,  |  |
|---|--|--|--|--|
| (A) Name and address                                    | (B) Title and average hours per week devoted to position | (C) Compensation<br>(If not paid, enter<br>-0)   | (D) Contrib. to<br>employee benefit<br>plans & deferred<br>compensation plan | (E) Expense account and other allowances |
| John P. Silsby  | Pres Elect   |  |  |  |
| 45 Fort Hill Road Groton CT 06340                       | As Needed  | 0  | 0  | 0  |
| Mary K. Hill  | Secretary  |  |  |  |
| 120 Broad Street New London CT 0632                     |  | 0  | 0  | 0  |
| Paul Norris   | President  |  |  |  |
| 599 Matianuck Av Windsor CT 06095                       | As Needed  | 0  | 0  | 0  |
| Carole Cipriano   | Treasurer  |  |  |  |
| PO Box 392 Middlebury CT 06762                          | As Needed  | 0  | 0  | 0  |
|   |  |  |  |  |
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|   |  |  |  |  |
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|   |  |  |  |  |
|   |  |  |  |  |

135,877

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| Form      | <u> 1990 (2005) Connecticut Recreation an</u>  | d Parks 22                            | -2662056              |   |            | F                              | Page 6                |
|-----------|--|---------------------------------------|-----------------------|---|------------|--------------------------------|-----------------------|
| Pa        | art V-A Current Officers, Directors, Trustees, ar  | nd Key Employees                      | (continued)           |   |            | Yes                            | No                    |
| 75a       | Enter the total number of officers, directors, and trustees permitted  | ed to vote on organization            | business at board     |   |            |                                |                       |
|           | meetings   |                                       |                       |   |            |                                |                       |
| b         | Are any officers, directors, trustees, or key employees listed in Form employees listed in Schedule A, Part I, or highest compensated p  | -                                     | •                     |   |            |                                |                       |
|           | contractors listed in Schedule A, Part II-A or II-B, related to each   |                                       | •                     |   |            |                                |                       |
|           | relationships? If "Yes," attach a statement that identifies the indivi   |                                       |                       |   | 75b        |                                | х                     |
|           | Total of the first |                                       | σ.ασρ (σ)             |   |            |                                |                       |
| С         | Do any officers, directors, trustees, or key employees listed in Fo  | rm 990, Part V-A, or higl             | hest compensated      |   |            |                                |                       |
|           | employees listed in Schedule A, Part I, or highest compensated p   | rofessional and other inc             | dependent             |   |            |                                |                       |
|           | contractors listed in Schedule A, Part II-A or II-B, receive compen  | -                                     | -                     |   |            |                                |                       |
|           | tax exempt or taxable, that are related to this organization through   | •                                     | common control? .     |   | 75c        |                                | X                     |
|           | Note. Related organizations include section 509(a)(3) supporting   | organizations.                        |                       |   |            |                                |                       |
|           | If "Yes," attach a statement that identifies the individuals, explains   | the relationship between              | n thia                |   |            |                                |                       |
|           | organization and the other organization(s), and describes the com  | •                                     |                       |   |            |                                |                       |
|           | including amounts paid to each individual by each related organization   | -                                     | ·,                    |   |            |                                |                       |
| d         | Does the organization have a written conflict of interest policy?  |                                       |                       |   | 75d        |                                | Х                     |
| Pa        | art V-B Former Officers, Directors, Trustees, an   |                                       |                       |   | or O       | ther                           | Benefi                |
|           | (If any former officer, director, trustee, or key employe  | ·                                     |                       | •   | _          |                                |                       |
|           | the year, list that person below and enter the amount  | of compensation or othe               | r benefits in the app | ropriate column. See  | .he        |                                |                       |
|           | instructions.)   | T                                     |                       |   |            |                                |                       |
|           | (A) Name and address   | (B) Loans and Advances                | (C) Compensation      | (D) Contrib. to employe<br>benefit plans & deferred<br>compensation plans | acco<br>al | E) Expo<br>ount and<br>Ilowand | ense<br>d other<br>es |
| N/        | A  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   | <u> </u>   |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           |  |                                       |                       |   |            |                                |                       |
|           | other Information (See the instructions.)  |                                       |                       |   |            | Yes                            | No                    |
| 76        | Did the organization engage in any activity not previously reported  |                                       |                       |   | 70         |                                | v                     |
| 77        | description of each activity  Were any changes made in the organizing or governing documen   | its hut not reported to the           |                       |   | 76<br>77   | $\vdash$                       | X                     |
| ' '       | If "Yes," attach a conformed copy of the changes.  | ns par nor reported to the            | · INO:                |   |            |                                |                       |
| 78a       | Did the organization have unrelated business gross income of \$1,  | ,000 or more during the v             | year covered by this  | return?   | 78a        | 1                              | Х                     |
| b         | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?  | · · · · · · · · · · · · · · · · · · · |                       |   | 78b        |                                |                       |
| 79        | Was there a liquidation, dissolution, termination, or substantial co   | ntraction during the year             | ? If "Yes," attach    |   |            |                                |                       |
|           | a statement  |                                       |                       |   | 79         |                                | X                     |
| 80a       | Is the organization related (other than by association with a statew   |                                       |                       |   |            |                                |                       |
|           | common membership, governing bodies, trustees, officers, etc., t   |                                       |                       | on?   | 80a        |                                | X                     |
| b         |  | ن نا به طلع مایی یام مام ام م         |                       | 7   |            |                                |                       |
| 212       | Enter direct and indirect political expenditures. (See line 81 instruc   | and check whether it i                | s exempt or 81a       | nonexempt   |            |                                |                       |
| o ia<br>b |  |                                       |                       | N/A   | 81b        | 1                              |                       |
|           | Dia nio organization nio i orini i izo i OE ioi tilio year:  |                                       |                       | <u></u>   | <u></u>    | 1                              |                       |

| Form | 990 (2005) Connecticut Recreation and Parks 22-2662  | 2056                 |       | F   | Page <b>7</b> |
|------|--|----------------------|-------|-----|---------------|
| Pa   | rt VI Other Information (continued)  |                      |       | Yes | No            |
| 82a  | Did the organization receive donated services or the use of materials, equipment, or facilities at no  | charge               |       |     |               |
|      | or at substantially less than fair rental value?   |                      | 82a   |     | X             |
| b    | If "Yes," you may indicate the value of these items here. Do not include this  |                      |       |     |               |
|      | amount as revenue in Part I or as an expense in Part II.   |                      |       |     |               |
|      | (See instructions in Part III.)  | 82b                  |       |     |               |
| 83a  | Did the organization comply with the public inspection requirements for returns and exemption appl   | ications?            | 83a   | X   |               |
| b    | Did the organization comply with the disclosure requirements relating to quid pro quo contributions?   | N/A                  | 83b   |     |               |
| 84a  | Did the organization solicit any contributions or gifts that were not tax deductible?  |                      | 84a   |     | X             |
| b    | If "Yes," did the organization include with every solicitation an express statement that such contribu   |                      |       |     |               |
|      | gifts were not tax deductible?   | N/A                  | 84b   |     |               |
| 85   | 501(c)(4), (5), or (6) organizations.<br><b>a</b> Were substantially all dues nondeductible by members? $\dots$  | N/A                  | 85a   |     |               |
| b    | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  | N/A                  | 85b   |     |               |
|      | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization  |                      |       |     |               |
|      | received a waiver for proxy tax owed for the prior year.   |                      |       |     |               |
| С    | Dues, assessments, and similar amounts from members  | 85c                  |       |     |               |
| d    | Section 162(e) lobbying and political expenditures   | 85d                  |       |     |               |
| е    | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices   | 85e                  |       |     |               |
| f    | Taxable amount of lobbying and political expenditures (line 85d less 85e)  | 85f                  | _     |     |               |
| g    | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  | N/A                  | 85g   |     |               |
| h    | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on  | line 85f             |       |     |               |
|      | to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for  | the                  |       |     |               |
|      | following tax year?  | N/A                  | 85h   |     |               |
| 86   | 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on   |                      |       |     |               |
|      | line 12  | 86a                  |       |     |               |
| b    | Gross receipts, included on line 12, for public use of club facilities   | 86b                  |       |     |               |
| 87   | 501(c)(12) orgs. Enter: <b>a</b> Gross income from members or shareholders   | 87a                  |       |     |               |
| b    | Gross income from other sources. (Do not net amounts due or paid to other  |                      |       |     |               |
|      | sources against amounts due or received from them.)  | 87b                  |       |     |               |
| 88   | At any time during the year, did the organization own a 50% or greater interest in a taxable corporate   |                      |       |     |               |
|      | partnership, or an entity disregarded as separate from the organization under Regulations sections   |                      |       |     |               |
|      | and 301.7701-3? If "Yes," complete Part IX   |                      | 88    |     | X             |
| 89a  | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:   |                      |       |     |               |
|      | section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955   | <b>&gt;</b>          |       |     |               |
| b    | 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit trans   | action               |       |     |               |
|      | during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes,"   | attach               |       |     |               |
|      | a statement explaining each transaction  |                      | 89b   |     | <u> </u>      |
| С    | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year  | •                    |       |     |               |
|      | sections 4912, 4955, and 4958  | <b>-</b>             |       |     | 0             |
| d    | Enter: Amount of tax on line 89c, above, reimbursed by the organization  | <b>-</b>             |       |     | 0             |
| 90a  | List the states with which a copy of this return is filed None   |                      |       |     |               |
| b    | Number of employees employed in the pay period that includes March 12, 2005 (See   | 1 1                  |       |     |               |
|      | instructions.)  The books are in care of ▶ Alison Harle  | 90b                  | = 0.1 |     |               |
| 91a  | The books are in care of ► Alison Harle  1800 Silas Deane Hwy Suite 172  | Telephone no. ► 860- | 721   | -03 | 84            |
|      | 1800 Silas Deane Hwy Suite 1/2   |                      |       |     |               |
|      | Located at ROCKY HIII, CT  | ∠IP + 4 ▶ U6U6 /     |       |     |               |
| b    | At any time during the calendar year, did the organization have an interest in or a signature or other   | authority            |       |     |               |
|      | over a financial account in a foreign country (such as a bank account, securities account, or other f  |                      |       | Yes | No            |
|      | account)?  |                      | 91b   |     | X             |
|      | 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   | gn Bank              |       |     |               |
|      | and Financial Accounts.  | _                    |       |     |               |
|      | At any time during the calendar year, did the organization maintain an office outside of the United S  | tates?               | 91c   |     | <u> </u>      |
| С    | If "Yes," enter the name of the foreign country  |                      |       |     |               |
| 92   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041-</b> Check here and enter the amount of tax-exempt interest received or accrued during the tax year |                      |       |     | ▶ ∐           |
|      | and enter the amount of tax-exempt interest received or accrued during the tax year  | <b>▶</b>   02        |       |     |               |

| Note:                  | Enter g    | ross amounts unless otherwise  | _   | Unrelate                                | ed business income                                 | Exclude                       | d by sec. 512                  | 2, 513, or 51                | 14 <b>(E)</b>                         |
|------------------------|------------|--|---|---|--|-------------------------------|--------------------------------|------------------------------|---------------------------------------|
| indica                 | ted.       |  |   | (A)<br>Business code                    | <b>(B)</b><br>Amount                               | (C)<br>Exclusion              | n (E                           | ))                           | Related or exempt function            |
| 93                     | Program    | service revenue:   |   | Business code                           | Amount   | code                          | Amo                            | ount                         | income                                |
| а                      | See        | Statement 5  |   |   |  |                               |                                |                              | 106,962                               |
| b                      |            |  |   |   |  |                               |                                |                              |                                       |
| С                      |            |  |   |   |  |                               |                                |                              |                                       |
| d                      |            |  |   |   |  |                               |                                |                              |                                       |
| е                      |            |  |   |   |  |                               |                                |                              |                                       |
| f                      | Medicar    | e/Medicaid payments  |   |   |  |                               |                                |                              |                                       |
| g                      | Fees an    | d contracts from government ag   | encies  |   |  |                               |                                |                              |                                       |
| 94                     | Member     | ship dues and assessments  |   |   |  |                               |                                |                              | 36,465                                |
| 95                     | Interest   | on savings and temporary cash  | investments   |   |  |                               |                                |                              | 749                                   |
| 96                     | Dividend   | ls and interest from securities  |   |   |  |                               |                                |                              | 2,418                                 |
|                        |            | al income or (loss) from real est  |   |   |  |                               |                                |                              |                                       |
| а                      | debt-fina  | anced property   |   |   |  |                               |                                |                              |                                       |
| b                      | not debt   | -financed property   |   |   |  |                               |                                |                              |                                       |
| 98                     | Net rent   | al income or (loss) from persona   | al property   |   |  |                               |                                |                              |                                       |
| 99                     | Other in   | vestment income  |   |   |  |                               |                                |                              |                                       |
|                        |            | (loss) from sales of assets othe   |   |   |  |                               |                                |                              | 1 - 440                               |
| 101                    | Net inco   | me or (loss) from special events   |   |   |  |                               |                                |                              | 15,663                                |
|                        |            | rofit or (loss) from sales of inver  |   |   |  |                               |                                |                              |                                       |
|                        | Other re   | venue: a   |   |   |  |                               |                                |                              |                                       |
| b                      |            |  |   |   |  |                               |                                |                              |                                       |
| С.                     |            |  |   |   |  |                               |                                |                              |                                       |
| d                      |            |  |   |   |  |                               |                                |                              |                                       |
| e<br>104               | Cubtotal   | (add columns (P) (D) and (E)   |   |   | (  | )                             |                                | 0                            | 162,257                               |
| 10 <del>4</del><br>105 | Total (a   | (add columns (B), (D), and (E) dd line 104, columns (B), (D), a              | '   |   |  |                               |                                |                              | 162,257                               |
| Note:                  | Line 10    | 5 plus line 1d, Part I, should equ   | al the amount on line                                   | 12 Part I                               |  |                               |                                | . –                          | 102/237                               |
|                        | rt VIII    | Relationship of Activ  |   |   | nt of Exempt Pu                                    | irposes                       | (See th                        | e instru                     | ctions.)                              |
|                        | No.        | Explain how each activity for v  |   |   |  | _                             | •                              |                              |                                       |
| ,                      | 7          | of the organization's exempt p   |   |   |  |                               | ,                              |                              |                                       |
|                        |            | See Statement  | 5   |   |  |                               |                                |                              |                                       |
|                        |            |  |   |   |  |                               |                                |                              |                                       |
|                        |            |  |   |   |  |                               |                                |                              |                                       |
|                        |            |  |   |   |  |                               |                                |                              |                                       |
| Pa                     | rt IX      | Information Regarding  | g Taxable Subs  | <u>sidiaries an</u>                     | d Disregarded I                                    | <b>Entities</b>               | (See th                        | <u>e instru</u>              | ctions.)                              |
| N                      | ame. add   | (A)<br>dress, and EIN of corporation,  | (B)<br>Percentage of                                    |   | (C) Nature of activities                           |                               | ( <b>D)</b><br>Total inco      | me                           | (E)<br>End-of-year                    |
|                        | partner    | ship, or disregarded entity  | ownership intere  | est                                     |  |                               |                                |                              | assets                                |
|                        | N/A        | •  |   | %                                       |  |                               |                                |                              |                                       |
|                        |            |  |   | %                                       |  |                               |                                |                              |                                       |
|                        |            |  |   | %                                       |  |                               |                                |                              |                                       |
| -                      |            |  | <u> </u>  |   | '41 D 1 D  |                               |                                | <u> </u>                     | - '()                                 |
|                        | rt X       | Information Regarding  |   |   |  |                               |                                | •                            |                                       |
| •                      | •          | e organization, during the year,   | •   | •                                       |  | •                             |                                | it contract                  | · <b>—</b> —                          |
|                        |            | e organization, during the year,   |   |   | on a personal benefi                               | t contract                    | t?                             |                              | Yes X No                              |
| N                      | ote: IT "Y | es" to (b), file Form 8870 and f   | •   |   |  |                               |                                | 14 4 1                       |                                       |
|                        |            | Under penalties of perjury, I declar and belief, it is true, correct, and co | e that I have examined the<br>Implete. Declaration of p | nis return, includ<br>reparer (other th | ing accompanying sche<br>an officer) is based on a | dules and :<br>Il information | statements, a<br>on of which p | and to the be<br>reparer has | est of my knowledge<br>any knowledge. |
| Plea                   | se         | •  |   |   | ,  |                               | ·                              | i.                           | , ,                                   |
| Sign                   | ۱          | Signature of officer   |   |   |  |                               |                                | Doto                         |                                       |
| Here                   | •          | Signature of officer   |   |   |  |                               |                                | Date                         |                                       |
|                        |            | Type or print name and title.  |   |   |  |                               |                                |                              |                                       |
|                        |            |  |   |   | Date   |                               | Chook if                       |                              | Preparer's SSN or PTIN                |
| Paid                   |            | Preparer's signature   | (1) (III ) 1111C  | CD 2                                    |  | 17/11                         | Check if self-                 | _                            | (See Gen. Instr. W)                   |
|                        | arer's     | , CHILL H  | CASTANHO,   |   |  | 17/11                         | . employed                     |                              | P00479486                             |
|                        | Only       | Firm's name (or yours  | STANHO FIN.<br>22 MAIN ST                               |   | GROUP, LLC   |                               |                                |                              | 06-1408160                            |
|                        | -          |  | ST HARTFOR  |   | 06108  |                               |                                | Phone                        | 60-289-2777                           |
|                        |            | EA   | DI HAKIFUK  | D, CI                                   | 00700  |                               |                                | no. 🚩 O                      | 00-203-2111                           |

**SCHEDULE A** (Form 990 or 990-EZ)

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

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

**Employer identification number** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

**Supplementary Information-(See separate instructions.)** ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

| COLLICCO                        | icut Recreation and Parks Association   |   |                       | 22-26620  |                    |
|---------------------------------|---|---|-----------------------|---|--------------------|
| Part I                          | Compensation of the Five Highest Paid Employer (See page 1 of the instructions. List each one. If   |   |                       | rs, and Tru   | stees              |
|                                 | (a) Name and address of each employee paid more than \$50,000                                       | (b) Title and average hour per week devoted to position |                       | (d) Contrib. to<br>empl. ben. pla<br>& deferred con | ans account & othe |
| ONE                             |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
| otal number o                   | of other employees paid over \$50,000   |   |                       |   |                    |
| Part II-A                       | Compensation of the Five Highest Paid Independ<br>(See page 2 of the instructions. List each one (w |   |                       |   |                    |
|                                 | (a) Name and address of each independent contractor paid more than \$                               |   | (b) Type of           |   | (c) Compensation   |
| ONE                             |   |   |                       |   | <u> </u>           |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
| otal number o<br>rofessional se | of others receiving over \$50,000 for   |   |                       |   |                    |
| Part II-B                       | Compensation of the Five Highest Paid Independent   | dent Contractors fo                                     | r Other Servi         | CAS   |                    |
| I dit ii D                      | (List each contractor who performed services oth firms. If there are none, enter "None." See page 2 | ner than professiona                                    | l services, wl        |   | viduals or         |
|                                 | (a) Name and address of each independent contractor paid more than \$                               |   | ( <b>b)</b> Type of : | service   | (c) Compensation   |
| IONE                            |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
|                                 |   |   |                       |   |                    |
| Fotal number of                 | of other contractors receiving over   |   |                       |   |                    |

| Pa      | art II | Statements About Activities (See page 2 of the instructions.)   |         | Yes   | No        |
|---------|--------|---|---------|-------|-----------|
| 1       | Dur    | ing the year, has the organization attempted to influence national, state, or local legislation, including any                        |         |       |           |
|         | atte   | mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid                        |         |       |           |
|         | or ir  | ncurred in connection with the lobbying activities \$ (Must equal amounts on line 38,   |         |       |           |
|         | Par    | t VI-A, or line <b>i</b> of Part VI-B.)   | 1       |       | X         |
|         | Org    | anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other                              |         |       |           |
|         | orga   | anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of                             |         |       |           |
|         | the    | lobbying activities.  |         |       |           |
| 2       | Dur    | ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any                      |         |       |           |
|         | sub    | stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or                       |         |       |           |
|         | with   | any taxable organization with which any such person is affiliated as an officer, director, trustee, majority                          |         |       |           |
|         | owr    | ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the                    |         |       |           |
|         | tran   | nsactions.)   |         |       |           |
|         |        |   |         |       |           |
| а       | Sale   | e, exchange, or leasing of property?  | 2a      |       | X         |
| b       |        | ding of money or other extension of credit?   | 2b      |       | Х         |
| c       | Fur    | niching of goods, comicos, or facilities?   | 2c      |       | X         |
| d       |        | rinshing of goods, services, or facilities?  /ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?    | 2d      |       | X         |
| u       | ıay    | Then to compensation to payment or reinbursement of expenses if more than \$1,000):   | Zu      |       |           |
| _       | Tro    | nafar of any part of its income or constal  | 20      |       | х         |
| e<br>^- |        | nsfer of any part of its income or assets?  | 2e      |       |           |
| 3a      |        | you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how                           | _       |       | 37        |
| _       |        | determine that recipients qualify to receive payments.)   | 3a      |       | <u>X</u>  |
| b       | Do     | you have a section 403(b) annuity plan for your employees?  | 3b      |       | <u> </u>  |
| С       |        | ing the year, did the organization receive a contribution of qualified real property interest under section 170(h)?                   | 3c      |       | _X_       |
| 4a      |        | you maintain any separate account for participating donors where donors have the right to provide advice on                           |         |       |           |
|         |        | use or distribution of funds?   | 4a      |       | X         |
| b       | Do     | you provide credit counseling, debt management, credit repair, or debt negotiation services?  | 4b      |       | X         |
| Pa      | art l' | Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)   |         |       |           |
| -1      |        | institution in most of a minute formulation becomes it in (Discourse basels and ONE annihilated base)                                 |         |       |           |
|         |        | nization is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)                                    |         |       |           |
| 5       |        | A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  |         |       |           |
| 6       |        | A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)   |         |       |           |
| 7       |        | A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).   |         |       |           |
| 8       |        | A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  |         |       |           |
| 9       |        | A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name,        | city,   |       |           |
|         |        |   |         |       |           |
| _       |        | and state▶  |         |       |           |
| 0       |        | An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(      | A)(iv). |       |           |
|         |        | (Also complete the <b>Support Schedule</b> in Part IV-A.)   |         |       |           |
| 1a      |        | An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Sec     | tion    |       |           |
|         |        | 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)   |         |       |           |
| 1b      | Ш      | A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)                                |         |       |           |
| 2       | X      | An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross           | eceipt  | S     |           |
|         |        | from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support | ort     |       |           |
|         |        | from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the             |         |       |           |
|         |        | organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)                    |         |       |           |
| 3       |        | An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations        |         |       |           |
|         | ш      | described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check  |         |       |           |
|         |        | the box that describes the type of supporting organization:   Type 1  Type 2  Type 3  |         |       |           |
|         |        | Provide the following information about the supported organizations. (See page 6 of the instructions.)                                |         |       |           |
|         |        |   | Line ı  | numbe |           |
|         |        | (a) Name(s) of supported organization(s)  | from a  |       | <b>21</b> |
|         |        |   | a       | 2016  |           |
|         |        |   |         |       |           |
|         |        |   |         |       |           |
|         |        |   |         |       |           |
|         |        | <u> </u>  |         |       |           |
| 4       |        | An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)                |         |       |           |

Schedule A (Form 990 or 990-EZ) 2005Connecticut Recreation and Parks 22-2662056

Page 2

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (a) 2004 **(b)**2003 (d) 2001 Calendar year (or fiscal year beginning in) (c) 2002 (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 25,252 32,505 30,450 27,058 115,265 16 Membership fees received ...... 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the 13,305 82,297 58,000 219,042 65,440 organization's charitable, etc., purpose ... Gross income from interest, dividends. amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired 2,809 5,168 3,944 4,016 15,937 by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 ... Tax revenues levied for the organization's benefit and either paid to it or expended on 0 its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 48,619 87,268 Total of lines 15 through 22 35,618 35,314 31,002 29,268 131,202 24 Line 23 minus line 17 873 25 Enter 1% of line 23 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a 0 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c d Add: Amounts from column (e) for lines: 18 19 26b 26d e Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ..... 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2003) ..... (2002) 0 (2001) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: Add: Amounts from column (e) for lines: 17 **219,042** 20 27c and line 27b total **d** Add: Line 27a total. 27d e Public support (line 27c total minus line 27d total) ...... 27e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ..... g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 95.4497% 27g h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ...... 4.5503% Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Schedule A (Form 990 or 990-EZ) 2005Connecticut Recreation and Parks 22-2662056 Private School Questionnaire (See page 7 of the instructions.) Part V (To be completed ONLY by schools that checked the box on line 6 in Part IV)

|     | (10 be completed ONL1 by schools that checked the box on line on 11 Fart 14)   |                 |          |      |     |
|-----|--|-----------------|----------|------|-----|
| 29  | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,                              | N/A_            | Y        | es N | No_ |
|     | other governing instrument, or in a resolution of its governing body?  |                 | 29       |      |     |
| 30  | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its                                    |                 |          |      |     |
|     | brochures, catalogues, and other written communications with the public dealing with student admissions,   |                 |          |      |     |
|     | programs, and scholarships?  |                 | 30       |      |     |
| 31  | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during                                |                 |          |      |     |
|     | the period of solicitation for students, or during the registration period if it has no solicitation program, in a way                           |                 |          |      |     |
|     | that makes the policy known to all parts of the general community it serves?   |                 | 31       |      |     |
|     | If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)                                       |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 |          |      |     |
|     | B. d   |                 |          |      |     |
| 32  | Does the organization maintain the following:  |                 |          |      |     |
| a   | Records indicating the racial composition of the student body, faculty, and administrative staff?  | <u>3</u>        | 2a       |      | —   |
| b   | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory                                 | ,               | 2h       |      |     |
| _   | basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing                               | <u>3</u>        | 2b       |      | —   |
| C   |  | ,               | 2c       |      |     |
| d   | with student admissions, programs, and scholarships?  Copies of all material used by the organization or on its behalf to solicit contributions? | ·····           | 20<br>2d |      | —   |
| u   | Copies of all material used by the organization or on its benait to solicit contributions?   |                 | Zu       |      |     |
|     | If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)                                 |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 |          |      |     |
| 33  | Does the organization discriminate by race in any way with respect to:   |                 |          |      |     |
|     | 2000 the enganization alcommunicacy race in any man respect to   |                 |          |      |     |
| а   | Students' rights or privileges?  | 3               | 3a       |      |     |
|     |  |                 |          |      | _   |
| b   | Admissions policies?   | 3               | 3b       |      |     |
|     |  |                 |          |      |     |
| С   | Employment of faculty or administrative staff?   | 3               | 3c       |      |     |
|     |  |                 |          |      |     |
| d   | Scholarships or other financial assistance?  | <u>3</u>        | 3d       |      |     |
|     |  |                 |          |      |     |
| е   | Educational policies?  | 3               | 3e       |      |     |
|     |  |                 |          |      |     |
| f   | Use of facilities?   | <u>  3</u>      | 3f       |      | —   |
|     |  |                 | _        |      |     |
| g   | Athletic programs?   | <u>  3</u>      | 3g       | _    | —   |
|     |  |                 |          |      |     |
| h   | Other extracurricular activities?  |                 | 3h       |      |     |
|     | If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)                                |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 |          |      |     |
|     |  |                 | 1        |      |     |
| 34a | Does the organization receive any financial aid or assistance from a governmental agency?  | 3               | 4a       |      |     |
|     | <u> </u>   | ······          |          |      | _   |
| b   | Has the organization's right to such aid ever been revoked or suspended?   | 3               | 4b       |      |     |
|     | If you answered "Yes" to either 34a or b, please explain using an attached statement.  | · · · · · · · · |          |      |     |
|     | -<br>-   |                 |          |      |     |
| 35  | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05                                |                 |          |      |     |
|     | of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation  | :               | 35       |      |     |

| P  |  | ditures by Electi<br>d ONLY by an eli  | •  |   | _           |                            |             | ns.)   |
|--|--|--|--|---|-------------|----------------------------|-------------|--|
| Che  | eck <b>a</b> if the organization belo  |  |  |   |             |                            |             | ontrol" provisions apply.                          |
|  | <u> </u>   | n Lobbying Expe  |  |   |             | (a)<br>Affiliated<br>total |             | (b) To be completed for ALL electing organizations |
|  |  | litures" means amount  |  | 1   |             |                            |             | organizations                                      |
|  | Total lobbying expenditures to influence   |  |  |   | 36          |                            |             |  |
|  | Total lobbying expenditures to influence   |  |  |   | 37          |                            |             |  |
| 38   | Total lobbying expenditures (add lines   | 36 and 37)   |  |   | 38          |                            |             |  |
| 39   | Other exempt purpose expenditures .  |  |  |   | 39          |                            |             |  |
| 40   | Total exempt purpose expenditures (a   | dd lines 38 and 39) $_{\dots}$   |  |   | 40          |                            |             |  |
| 41   | Lobbying nontaxable amount. Enter th   | e amount from the follo  | owing table-   |   |             |                            |             |  |
|  | If the amount on line 40 is-   |  | ontaxable amount is  | — — IIII  |             |                            |             |  |
|  | Not over \$500,000   | 20% of the amount  | on line 40   |   |             |                            |             |  |
|  | Over \$500,000 but not over \$1,000,000  | \$100,000 plus 15%   | 6 of the excess over \$500   | ,000  |             |                            |             |  |
|  | Over \$1,000,000 but not over \$1,500,000.   | \$175,000 plus 10%   | 6 of the excess over \$1,0   | 00,000  | 41          |                            |             |  |
|  | Over \$1,500,000 but not over \$17,000,000   | \$225,000 plus 5%  | of the excess over \$1,50  | 0,000   |             |                            |             |  |
|  | Over \$17,000,000  | \$1,000,000  |  |   |             |                            |             |  |
| 42   | Grassroots nontaxable amount (enter  | 25% of line 41)  |  |   | 42          |                            |             |  |
| 43   | Subtract line 42 from line 36. Enter -0  | - if line 42 is more thar  | line 36  |   | 43          |                            |             |  |
| 44   | Subtract line 41 from line 38. Enter -0  | - if line 41 is more thar  | line 38  |   | 44          |                            |             |  |
|  |  |  |  |   |             |                            |             |  |
|  | Caution: If there is an amount on eith   |  |  |   |             |                            |             |  |
|  |  | 4-Year Aver  | aging Period Un  | der Section                                     | n 501(      | h)                         |             |  |
|  | (Some organizati   | ons that made a section  | on 501(h) election do r  | not have to co                                  | mplete al   | l of the fiv               | e columns l | below.   |
|  |  | See the instructions for   | or lines 45 through 50   | on page 11 o                                    | f the insti | ructions.)                 |             |  |
|  |  |  | Lobbying Expe  | enditures Du                                    | rina 4-Ye   | ar Avera                   | ging Perio  | d  |
|  |  |  | , .  |   | 5           |                            |             |  |
|  | Calendar year (or  | (a)  | (b)  | (c)   |             | (                          | d)          | (e)  |
|  | Calendar year (or<br>fiscal year beginning in) ▶   | (a)<br>2005  |  |   |             |                            | ( <b>d)</b> | <b>(e)</b><br>Total                                |
|  | fiscal year beginning in) ▶  |  | (b)  | (c)   |             |                            | -           | * *  |
| 45   | fiscal year beginning in) ▶  Lobbying nontaxable amount  |  | (b)  | (c)   |             |                            | -           |  |
| 45<br>46   | fiscal year beginning in) ▶  Lobbying nontaxable amount  Lobbying ceiling amount (150% of  |  | (b)  | (c)   |             |                            | -           |  |
| 45<br>46   | fiscal year beginning in) ▶  Lobbying nontaxable amount  |  | (b)  | (c)   | J           |                            | -           | * *  |
| 45<br>46   | fiscal year beginning in) ▶  Lobbying nontaxable amount  Lobbying ceiling amount (150% of  |  | (b)  | (c)   |             |                            | -           |  |
| 45<br>46<br>47   | Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  |  | (b)  | (c)   |             |                            | -           | * *  |
| 45<br>46<br>47<br>48   | Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  |  | (b)  | (c)   |             |                            | -           | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of  | 2005   | (b)  | (c)   |             |                            | -           | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  | 2005   | (b)  | (c)   |             |                            | -           | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount   | 2005   | (b)  | (c)   |             |                            | -           | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  | 2005   | (b)<br>2004  | (c)<br>2003                                     |             |                            | -           | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount   | 2005   | (b)<br>2004  | (c)<br>2003                                     |             | 20                         | 002         | Total  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B Lobbying Activit (For reporting on   | 2005  by by Nonelecting by by organization   | (b)<br>2004<br>9 Public Charitiens that did not co   | (c)<br>2003                                     | art VI-A    | 20                         | 002         | * *  |
| 45<br>46<br>47<br>48<br>49   | Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B Lobbying Activit (For reporting on ling the year, did the organization attentions  | 2005  Ey by Nonelecting ally by organization on the influence national control of the influence national con | (b)<br>2004<br>y Public Charitie<br>ns that did not co<br>al, state or local legisla   | somplete Pation, including                      | art VI-A    | 20                         | 002         | Total  |
| 45<br>46<br>47<br>48<br>49<br>50<br>P  | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B Lobbying Activit (For reporting on ling the year, did the organization attenmpt to influence public opinion on a leg   | 2005  Ey by Nonelecting ally by organization apt to influence national gislative matter or refer   | (b) 2004  J Public Charitie as that did not co   | s omplete Pation, including se of:              | art VI-A    | 2(<br>) (See               | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>Durratte   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B Lobbying Activit (For reporting on ing the year, did the organization attenmpt to influence public opinion on a leg Volunteers   | 2005  Ey by Nonelecting ally by organization apt to influence national gislative matter or refer   | (b) 2004  J Public Charitie as that did not coal, state or local legislarendum, through the u  | s omplete Pation, including se of:              | art VI-A    | 2(<br>) (See               | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>Our eatte<br>a b   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ing the year, did the organization attenmpt to influence public opinion on a leg Volunteers  Paid staff or management (Include of  | zy by Nonelecting ly by organization ppt to influence nationa gislative matter or refer  | (b) 2004  Public Charitiens that did not coal, state or local legislatendum, through the unser reported on lines   | somplete Pation, including se of:               | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>Dur atte<br>a<br>b<br>c  | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit  (For reporting on ling the year, did the organization attenant to influence public opinion on a leg Volunteers  Paid staff or management (Include of Media advertisements   | 2005  Ey by Nonelecting ly by organization on the influence national gislative matter or reference compensation in expension of the influence  | (b) 2004  Public Charitie as that did not could, state or local legislatered must be seen the country that the country the country that the co | somplete Pation, including se of:               | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>50<br>Puratte<br>a<br>b<br>c<br>d  | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ing the year, did the organization attenmpt to influence public opinion on a leg Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or   | zy by Nonelecting ly by organization ppt to influence nationa gislative matter or refer compensation in expen  | (b) 2004  Public Charitiens that did not coal, state or local legislatendum, through the unser reported on lines   | somplete Pation, including se of:               | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>50<br>P<br>Our atte<br>a<br>b<br>c<br>d<br>e   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ing the year, did the organization attenment to influence public opinion on a leg Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or Publications, or published or broadce  | 2005  Ey by Nonelecting ally by organization on the influence national gislative matter or reference compensation in expension of the public asst statements   | (b) 2004  J Public Charitie as that did not could be a seen that did not c | somplete Pation, including se of:               | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>50<br>Pour atte<br>a b c d e f   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ing the year, did the organization attenment to influence public opinion on a leg Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or Publications, or published or broadd Grants to other organizations for lob   | 2005  Ey by Nonelecting ally by organization on the influence national gislative matter or reference compensation in expension of the public asst statements abying purposes   | Public Charitiens that did not coal, state or local legislatendum, through the uses reported on lines  | somplete Pation, including se of:               | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>50<br>P<br>Our atte<br>a b<br>c d<br>e f<br>g  | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ling the year, did the organization attenant to influence public opinion on a legal Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or Publications, or published or broadd Grants to other organizations for lob Direct contact with legislators, their                                      | zy by Nonelecting ally by organization apt to influence nationa gislative matter or refer compensation in expen the public ast statements abying purposes staffs, government offi  | (b) 2004  g Public Charitie as that did not could be a state or local legislative to the ses reported on lines cials, or a legislative to  | somplete Pation, including se of:               | art VI-A    | 2(See                      | page 11     | Total  of the instruction ≴ ♣                      |
| 45<br>46<br>47<br>48<br>49<br>50<br>Pour atte<br>a b c d e f g h   | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit  (For reporting on ling the year, did the organization attenant to influence public opinion on a leg Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or Publications, or published or broadd Grants to other organizations for lob Direct contact with legislators, their Rallies, demonstrations, seminars, or | 2005  Ey by Nonelecting ally by organization of the public compensation in expension of the public conventions, speeches on the public conventions, speeches on the public conventions, speeches   | (b) 2004  2004  Public Charitiens that did not coal, state or local legislatendum, through the unser reported on lines  cials, or a legislative to lectures, or any other  | somplete Pation, including se of: through c h.) | art VI-A    | ) (See                     | page 11     | Total  of the instruction ≴ ♣                      |
| 15<br>16<br>17<br>18<br>19<br>20<br>20<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40<br>40 | Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  art VI-B  Lobbying Activit (For reporting on ling the year, did the organization attenant to influence public opinion on a legal Volunteers  Paid staff or management (Include of Media advertisements  Mailings to members, legislators, or Publications, or published or broadd Grants to other organizations for lob Direct contact with legislators, their                                      | 2005  Ey by Nonelecting Bly by organization Input to influence national gislative matter or refer compensation in expen the public East statements Belying purposes staffs, government officenventions, speeches es through c h.)  | (b) 2004  Public Charitiens that did not coal, state or local legislatendum, through the unser reported on lines cials, or a legislative by lectures, or any other   | somplete Pation, including se of: through c h.) | art VI-A    | ) (See                     | page 11     | Total  Of the instruction ≴♣                       |

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.) 1 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section

|                | 501(c) of th    | e Code (other than se     | ction 501(c)    | (3) organizations) or in section 52  | 7, relating to political organizations?                |           |          |    |
|----------------|-----------------|---------------------------|-----------------|--|--|-----------|----------|----|
| а              | Transfers fr    | om the reporting organ    | nization to a   | noncharitable exempt organization  | n of:  |           | Yes      | No |
|                | (i) Cash        |                           |                 |  |  | 51a(i)    |          | X  |
|                | (ii) Other      |                           |                 |  |  | a(ii)     |          | X  |
| b              | Other trans     | actions:                  |                 |  |  |           |          |    |
|                | (i) Sales       | or exchanges of asse      | ts with a no    | ncharitable exempt organization  |  | b(i)      |          | X  |
|                | (ii) Purch      | nases of assets from a    | noncharital     | ole exempt organization  |  | b(ii)     |          | Х  |
|                | (iii) Renta     | al of facilities, equipme | nt or other     | assets   |  | b(iii)    |          | х  |
|                | (iv) Reiml      | hursement arrangeme       | nte             |  |  | b(iv)     |          | X  |
|                | (v) Loans       | s or loan guarantees      |                 |  |  | b(v)      |          | X  |
|                |                 |                           |                 | and the state of t |  |           |          | X  |
| _              |                 |                           |                 |  |  | b(vi)     |          | X  |
| C              | Snanng or i     | acilities, equipment, m   | aiiing iists, t | other assets, or paid employees  | (6)  |           |          |    |
| d              |                 | •                         |                 |  | umn (b) should always show the fair market value       |           |          |    |
|                | -               | _                         |                 |  | nization received less than fair market value in any   |           |          |    |
|                |                 |                           | nt, snow in d   |  | other assets, or services received:                    |           |          |    |
|                | (a)<br>Line no. | (b)<br>Amount involved    | Namo o          | (c) If noncharitable exempt organization   | (d)  Description of transfers, transactions, and shari | na arrana | omont    |    |
|                | Line no.        | Amount involved           | ivaille 0       | in nonchantable exempt organization  | Description of transfers, transactions, and snam       | ng anang  | CITICITE |    |
|                |                 |                           |                 |  |  |           |          |    |
| _ <u>N</u>     | /A              |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
| 52a            |                 |                           |                 | ed with, or related to, one or more  |  |           | -        | =  |
|                |                 |                           |                 | r than section 501(c)(3)) or in sec  | tion 527?  | · [ Y     | es 2     | Nο |
| <u>      b</u> |                 | mplete the following so   |                 | T  |  |           |          |    |
|                | _               | (a)                       |                 | <b>(b)</b> Type of organization  | (c)  |           |          |    |
|                |                 | Name of organization      |                 | Type of organization   | Description of relationship                            |           |          |    |
|                | N/A             |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 |  |  |           |          |    |
|                |                 |                           |                 | 1  | 1  |           |          |    |

|               |          |                 |                     | Special Events | Schedule |        |             |                     |
|---------------|----------|-----------------|---------------------|----------------|----------|--------|-------------|---------------------|
| Form 99       | 90       |                 |                     | - •            |          |        |             | 2005                |
|               |          | For calendar ye | ar 2005, or tax yea | r beginning    | , and e  | ending |             |                     |
| Name          |          |                 |                     | _              |          |        | Employer Id | entification Number |
|               |          |                 | ion and Pa          | arks           |          |        | 22 266      | 2056                |
| Associa       | ation    | , inc.          | (4)                 | (D)            | (0)      | 044    | 22-266      |                     |
|               |          |                 | (A)                 | (B)            | (C)      | Oth    | ners        | Total               |
| Gross receipt | S        |                 | 179,457             | 0              | 0        |        | 0           | 179,457             |
| Less contril  |          |                 | 0                   |                | 0        |        | 0           | 0                   |
| Gross revenu  | ie       | _               | 179,457             | 0              | 0        |        | 0           | 179,457             |
| Less direct   | expenses | <u> </u>        | 163,794             | 0              | 0        |        | 0           | 163,794             |
| Net income (I | oss)     | <u>—</u>        | 15,663              | 0              | 0        |        | 0           | 15,663              |
|               |          |                 |                     |                |          |        |             |                     |
| Description:  | (A)      | Giv F           | lagg/Lake           | Compounce      |          |        |             |                     |
| Description.  | (A)      | SIX F.          | Lags/Lake           | Compounce      | -        |        |             |                     |
|               | (B)      | Basket          | ball Hall           | of Fame        | _        |        |             |                     |
|               |          |                 |                     |                |          |        |             |                     |
|               | (C)      |                 |                     |                | -        |        |             |                     |
|               | Others   |                 |                     |                |          |        |             |                     |
|               | Others   |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | -        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |
|               |          |                 |                     |                | _        |        |             |                     |

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### Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

| Description                                       | _  | Amount |
|---|----|--------|
| The unrestricted fund balance is being changed to | \$ |        |
| reflect the combining of previously segregated    |    |        |
| program service funds and recording of year end   |    |        |
| accrual accounts                                  |    | -2,219 |
| Total   | \$ | -2,219 |

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### Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

| Description           | <u>_</u> | Total<br>Expenses | Program<br>Service | Mgt &<br>General | Fund-<br>Raising |
|-----------------------|----------|-------------------|--------------------|------------------|------------------|
|                       | \$       | \$                | \$                 | \$               |                  |
| Expenses              |          |                   |                    |                  |                  |
| Insurance             |          | 5,259             |                    | 5,259            |                  |
| Salary Processing Fee |          | 840               | 840                |                  |                  |
| Utilities             |          | 4,824             |                    | 4,824            |                  |
| Association Dues      |          | 782               |                    | 782              |                  |
| Program Development   |          | 5,214             | 5,214              |                  |                  |
| Certification         |          | 5,348             | 5,348              |                  |                  |
| Total                 | \$       | 22,267 \$         | 11,402 \$          | 10,865 \$        | 0                |

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22-2662056

### Statement 3 - Form 990, Part IV, Line 54 - Investments in Securities

| Description                 | Beginning<br>of Year | End of<br>Year | Basis of<br>Valuation |
|-----------------------------|----------------------|----------------|-----------------------|
| US and State Government     |                      |                |                       |
| Galaxy Treasury Index       | 460                  |                |                       |
| Corporate Stock             |                      |                |                       |
| Banc of America Investments | 37,605               | 42,213         |                       |
|                             | 38,065               | 42,213         |                       |

### Statement 4 - Form 990, Part IV, Line 65 - Other Liabilities

| Description   | Beginning<br>of Year | _   | End of<br>Year        |
|---|----------------------|-----|-----------------------|
| Payroll Taxes Payable<br>Certification Reserve<br>Scholarship Reserve | \$                   | \$  | 1,110<br>857<br>1,019 |
| Total   | \$0                  | \$_ | 2,986                 |

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### Statement 5 - Form 990, Part VII, Line 93 - Program Service Revenue

| Description  | Business<br>Code | _   | Unrelated<br>Amount | Exclusion Code | _  | Exclusion<br>Amount |            | Related<br>Income  |
|--|------------------|-----|---------------------|----------------|----|---------------------|------------|--|
| Aquatics Institute CRPA Today Hershey Track and Field Playground Safety Institute Quarterly Meetings State Conference Entertainment Showcase |                  | \$  |                     |                | \$ |                     | \$         | 4,890<br>776<br>4,958<br>17,828<br>7,625<br>45,883<br>18,261 |
| Certification Miscellaneous Programs Legislative Day Marketing Makeover  |                  | _   |                     |                | _  |                     | . <u>-</u> | 373<br>5,321<br>315<br>732                                   |
| Total  |                  | \$_ | 0                   |                | \$ | 0                   | \$         | 106,962  |

### Statement 6 - Form 990, Part VIII - Relationship of Activities

| Line No. | Description  |  |  |  |  |  |  |
|----------|--|--|--|--|--|--|--|
| 93a      | Fees from conferences and sales of educational materials contribute to the development of CRPA members and promote public awareness. |  |  |  |  |  |  |
| 94       | Members are individuals with an interest in promoting and supporting the value of recreation and parks.                              |  |  |  |  |  |  |