568

Department of Justice 33 Capitol Street Concord, NH 03301-6397



ANNUAL FILING FEE: \$75.00 Make check payable to: STATE OF NEW HAMPSHIRE

MAY 6 2011

ANNUAL REPORT CERTIFICATE

Oyster River Alumni Association 8754 Terrace Dr EI Cerrito CA 94530 CHARITABLE TRUSTS UNIT

Fiscal Year End: Dec 2010 State Registration # 18203

Under the penalties of perjury set forth in RSA 641:1-3, I declare that I have examined the attached report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of President, Treasurer or Irustee	5/3/11 Date		
ANITA K. MATHUR (print or type) Name of Officer/Invetee	PRESIDENT		
THE CLONATURE OF THE			

THE SIGNATURE OF THE EXECUTIVE DIRECTOR IS NOT ACCEPTABLE. (If the organization does not have the office of "President" or "Treasurer", please attach an explanation or definition of the authority vested in the signator.)

STATE OF CALFORNIA

COUNTY OF ALAMORA

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission Expires:

NARESHKUMAR BHAKTA
Commission # 1798456
Notary Public - California
Alameda County
MyComm. Expires May 18, 2012

Notary Public / Notary Public

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

ANNUAL FILING FEE: \$75.00

Make check payable to: State of New Hampshire

ANNUAL REPORT CERTIFICATE

A . D	Α1 Λ		
Uyster Kive	er Alumni Association	12/31/10	0
Organization Name	Mathur	Fiscal Year End	
Anita K.	Mathur		
In Care of 8754 Tev	race Drive El Cerrito City	State Registration #	94530
Address	City	State	94530 Zip
Under the pen report, including acco correct and complete.	alties of perjury set forth in RSA 641: mpanying schedules and statements a	1-3, I declare that I have example and to the best of my knowle	amined the attached edge and belief, it is true,
antole?	math	5/3/11	
Sign	ature of	Date	
PRESIDENT, TRE	ASURER OR TRUSTEE		
ANITA K.	MATHUR	PRESIDENT	
	Name of Officer/Trustee	Title	
does not have the office vested in the signator.		R IS NOT ACCEPTABLE se attach an explanation or contents.	. (If the organization lefinition of the authority
STATE OF CAL	FORVIA		
COUNTY OF A	AARCOSA		
named organization ar	day of MAY, 20// be acknowledged himself/herself to be that took oath or affirmed that the attacks of his/her knowledge and belief true	ne officer/trustee, President, hed report including accome	Treasurer of the above-
IN WITNESS	WHEREOF, I hereunto set my hand a	and official seal.	
My Commission Expir	res:	Lamman Mi	A.C.

Notary Public

NARESHKUMAR BHAKTA
Commission # 1798456
Notary Public - California
Alameda County
MyComm. Expres May 18, 2012

OFFICE OF THE NEW HAMPSHIRE ATTORNEY GENERAL CHARITABLE TRUSTS UNIT

33 Capitol Street Concord, NH 03301-6397

Register of Charitable Trusts

Form NHCT-2A

ANNUAL REPORT

For the calendar year 2010 and ending December 31, 2010	or fiscal year beginning Registration number	January 1, 2010 8203
NAME OF ORGANIZATION: Oyste ADDRESS: C/o Anita Mathur 87 Please make name/address corrections here:	r River Alumn 154 Terrace Drive,	i. Association El Cerrito CA 94530
D) Tax exempt under section 501 (c) (含): check h G) Group return filed for affiliates? Yes	$\begin{array}{cccc} & 7747 \\ & 1 & 1 & 2 & 3 & 4 \\ & 1 & 2 & 3 & 4 \\ & 2 & 2 & 3 & 4 \\ & 2 & 3 & 4 & 4 \\ & 2 & 3 & 4 & 4 \\ & 3 & 4$	tion is pending ()
PART I STATEMENT OF SUPPORT, REVENUE FUND BALANCES:	UE, AND EXPENSES AND	O CHANGES IN
Support and Revenue		
1) Contributions, gifts, grants	••••	s 2.323 74
2) Program service revenue (see part V)		
3) Membership dues and assessments		
4) Interest on savings and cash investments		
5) Dividends and interest from securities		
9) Special fundraising events and activities		
(Attach schedule, see instructions #6)		
a) Cross revenue	21.647.81	
h) Minus: direct expenses	17 727 50	
c) Net income (line 9a minus line 9b)		3.260.23
11) Other revenue (see part v)		
12) Total revenue (add lines 1,2,3,4,5,9(c) and 11 .	••••	5 5 8 3 9 2
Expenses		
13) Program services (program service charities onl	v) (see Part III)	
14) Management and general (see line 44)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4,495.51
17) Total expenses (add lines 13 and 14)	• • • • • • • • • • • • • • • • • • • •	4,495.51
Fund Balances Lines 18 Through 21 Mi	ust Be Completed	
18) Excess (deficit) for the year (line 12 minus line 1'	7)	1.088.46
19) Fund balances or net worth at the <u>beginning</u> of t	he year(see line 75)	669183
20) Other changes in net assets or fund balance	* * * * * * * * * * * * * * * * * * * *	
(ATTACH EXPLANATION)		***************************************
21) Fund balances or net worth at end of year (add l	ines 18 and 19)(see also line 75	5) 7,770.29

Organization Name: Oyster River Alumni Association

PART II STATEMENT OF FUNCTIONAL EXPENSES

22) Grants and allocations (ATTACH SCHEDULE)	1,950.00
23) Specific assistance to individuals	*
24) Benefits paid to or for members	
25) Compensation of officers, directors, etc	
26) Other salaries and wages	
27) Pension plan contributions	
28) Other employee benefits	
29) Payroll taxes	
30) Professional fundraising fees	
31) Accounting fees	
32) Legal fees	
33) Supplies	4.22
34) Telephone	the second secon
35) Postage and shipping	179.14
36) Occupancy	
37) Equipment rental and maintenance	
37) Equipment rental and maintenance. 38) Printing and publications.	240.10
39) 1 ravel	600.00
40) Conferences, conventions, meetings	
41) Interest	
42) Depreciation (attach schedule)	
43) Other expenses (itemized):	
a) Website	1.416.13
b) Banking Fees	26.00
c) NH Sec State Fee	27.00
d) Misc Detry Cash	53.92
e)	
44) Total functional expenses (enter on line 14)	4.495.51

Organization Name: Oyster River Alumni Association

Organization Name: Oyster River Alumnia Association

PART IV OFFICERS AND DIRECTORS

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

Attach sheet if additional space is required.

Jamie Alford 860 Portsmouth Ave, Greenland NH 03840 Advisor 917-497-1714 Kim Golding 406 Pleasant St. #5, Portsmouth NH 03861 Fundraising Coordinator 603-502-3719

Bridgette Beagen
22 Moharimet Dr.
Madbury, NH 03823
Univ. of NH Liaison
603-380-2016

Organization Name: Oyster River Alumni, Association

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

	Program Service	Other
a)	With present of the control of the c	rotificatemore pare proposación e
b)		
c)		
d)		
PART VI BALANCE SHEETS		
Assets	Beginning of Year	End of Year
	1 101 00	770.00
45) Cash - non interest bearing	6,681.83	7,470,29
46) Savings and cash investments 47) Accounts receivable		
48) Pledges receivable		
49) Grants receivable		
50) Receivables due from Officers, Directors, etc.		
51) Other notes and loans receivable		
52) Inventories for sale or use		
53) Prepaid		
54) Investments - securities		
55) Investments - real estate		
56) Investments - other		
58) Other assets		
59) Total assets (add lines 45 through 58)	6,681.83	7,770.29
Liabilities		
60) Accounts payable		
61) Grants payable		
63) Loans from officers, directors, etc.		
64) Mortgages/notes payable		
65) Other liabilities		
66) Total liabilities (add lines 60 through 65)		And distributed the international action and the action of
Fund Balances or Net Worth Line 75 Must Be	Completed	
75) Net worth (assets, line 59, minus liabilities, line	66) 6,681.83	7,770.29

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

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

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

Organization Mame: Oyster River Alumni, Association

Annual Report Supplement

Schedule: Special Fundraising Event - Oyster River Festival and Bolocat Bolt - May 15, 2010 (Road Race)

Revenues	Value
Registrationst	\$ 21,047.81
Total Revenues	\$21,047.81

Expenses	Value
Marketing	\$ 5,266.71
T-Shirts	\$ 3,462.24
Timing and Annoncer	\$ 1,830.00
Prizes	\$ 1,100.00
Facilities	\$ 2,477.50
Photographer	\$ 500.00
Policer Safety	\$ 2,458,25
Supplies	\$ 692.88
Total Expenses	\$ 17,787,58

Net Income

\$ 3,260,23

Organization Name: Öyster River Alumni, Association Annual Report Supplement Schedule: 2010 Grants Given

Recipient	Amount	Notes
Oyster River Teen Initiative	\$1500.00	One-time grant ORAA Scholarship
Prerana Nanda Mast Way Elementary School (teacher Deb Byrne)		DRAA Mini Grant Initiative
Total Grants Given 2010	\$ 1,950.00	

OFFICE OF THE NEW HAMPSHIRE ATTORNEY GENERAL CHARITABLE TRUSTS UNIT

33 Capitol Street, Concord, NH 03301-6397

MUST BE COMPLETED AND ATTACHED TO FILING

APPENDIX TO ANNUAL REPORT

Name of Organization: Oyster River Alu	mri. Association
1. Is there currently a conflict of interest policy in effect? A Conflict of Interest Policy is required by law (see	
2. Did any officer, Director, Trustee or member of the in the organization in the last year other than reasonable cor incurred in connection with their official duties?	
If yes, complete the following:	1 es 1\0
A. Was any real estate transaction involved?	Yes No _X
B. Was a loan made to any director, officer or trustee?	Yes NoX
C. Was a pecuniary benefit paid in excess of \$500? If yes, attach copy of meeting minutes.	Yes NoX
 D. Was a pecuniary benefit paid in excess of \$5,000? If yes, attach a copy of: Public Notice Meeting Minutes Employment Contract 	Yes No _X_

E. Provide a **list** of each pecuniary benefit transaction involving a director, officer, trustee or member of the immediate family. Include names of recipient(s) and amount(s) of benefit as required under RSA 7:28. **NOTE**: The Director of Charitable Trusts may request **copies** of all contracts, payment records, vouchers and financial records or documents involving a director, officer, trustee or member of the immediate family as required under RSA 7:24.