Form **990-EZ** 

Department of the Treasury Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) OMB No 1545-1150 2009

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
 The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

07/01/09 06/30/10 For the 2009 calendar year, or tax year beginning , and ending Please Check if applicable C Name of organization Employer identification number use IRS AMHERST CENTRAL ALUMNI Address change label or FOUNDATION INC 22-2544684 Name change print or Initial return type. Number and street (or P O box, if mail is not delivered to street address) Telephone number Room/suite See 4301 MAIN ST 716-362-8259 Termination Specific Amended return City or town, state or country, and ZIP + 4 Group Exemption Instruc-AMHERST NY 14226 Application pending tions Number • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method Cash a completed Schedule A (Form 990 or 990-EZ). Other (specify) WWW.AMHERSTALUMNI.ORG Check ▶ if the organization is not ăttach Schedule B (Form 990 Tax-exempt status (check only one) — X 501(c) ( 3 ) **◄** (insert no ) 4947(a)(1) or 527 Check If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ 55,434 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 22,189 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 11,569 3 Membership dues and assessments 3 6,090 Investment income 5a Gross amount from sale of assets other than inventory Less cost or other basis and sales expenses 5b C Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c 1,373 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here Gross revenue (not including \$ of contributions reported on line 1) Less direct expenses other than fundraising expenses 6b Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c Gross sales of inventory, less returns and allowances 7a Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) C SEE STATEMENT 2 586 8 Other revenue (describe 8 41,807 9. Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 10 Grants and similar amounts paid (attach schedule) 10 RECEIVED 11 Benefits paid to or for members 11 SSO 8,422 12 Salaries, other compensation, and employee benefits 12 2010 1,375 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 14 15 Printing, publications, postage, and shipping 15 OGDEN, UT 17,295 16 Other expenses (describe ► SEE STATEMENT 3 16 28,991 17 Total expenses. Add lines 10 through 16 17 12,816 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 174,766 19 SEE STATEMENT 4 20 Other changes in net assets or fund balances (attach explanation) 20 14,239 Net assets or fund balances at end of year Combine lines 18 through 20 201,821 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II) (A) Beginning of year (B) End of year 22 Cash, savings, and investments 185,044 212,880 22 23 Land and buildings 23 10,249 SEE STATEMENT 5 24 Other assets (describe 1,140 24 186,184 223,129 25 Total assets SEE STATEMENT 6 21,308 26 Total liabilities (describe 11,418 26 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 174,766 201,821

SCANNED DEC

Form **990-EZ** (2009) 7

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009) AMHERST CE	NTRAL ALUMNI	22	-2544684			Page 2
Part III Statement of Program	Service Accomplishment	s (See the instruc	tions for Part I	II.)	Ex	penses
What is the organization's primary exempt pu	irpose?				(Required	for section
SEE STATEMENT 7					501(c)(3)	and 501(c)(4)
Describe what was achieved in carrying out t	-					ons and section
manner, describe the services provided, the	number of persons benefited, or oth	ner relevant information	ı for			trusts, optional
each program title			<del> </del>		for others	)
28 SEE STATEMENT 8						
			_	႕ .		250
· · · · · · · · · · · · · · · · · · ·	this amount includes foreign grants	·		2	28a	350
29 ADMINISTER FUNDS FOR ACTIVITY						
EDUCATIONAL EFFORTS IN THE SO		S				
WHICH ARE NOT ABLE TO BE FUND		ahaali haaa	_	۔ ا	, <sub>o</sub> _	1,899
	this amount includes foreign grants				29a	1,699
	DUS ALUMNI ACTIVITIES, ALU	ATUT				
NEWSLETTERS, ETC.						
(Grants \$ ) If	this amount includes foreign grants	check here		<u>-</u> ا ء	30a	12,850
31 Other program services (attach schedule		, check here		<del>-     *</del>	,oa	12,030
· · ·	this amount includes foreign grants	check here		$\Box     _{a}$	sta l	
32 Total program service expenses (add l		, check here			32	15,099
	Frustees, and Key Employees. Lis	t each one even if not o	compensated (See			<del></del>
		(b) Title and average	(c) Compensation	(d) C	ontributions to	(e) Expense
(a) Name an	d address	hours per week devoted to position	(If not paid, enter -0)		e benefit plans & I compensation	account and other allowances
SUSAN HENS SMITH	WILLIAMSVILLE	CO-PRESIDENT	5,1101 0 17	40.01.00	Componedacii	Other unovarious
233 BRAMBLE CT	NY 14221	1.00	0		0	0
ELLEN MARSHALL	AMHERST	CO-PRESIDENT				
110 SARATOGA RD	NY 14226	1.00	٥		0	o
VIRGINIA COON	AMHERST	VICE PRES		-		
26 CHASSIN AVE	NY 14226	1.00	o		0	0
SUSAN FRETZ	BUFFALO	TREASURER				
388 VOORHEES AVE	NY 14216	1.00	o		0	0
NANCY GRAVES MANALIO	AMHERST	REC SECR	,			
77 BRANTWOOD RD	NY 14226	1.00	o		0	0
CAROL YORK WEIL	AMHERST	CORR SECR				
74 AMHERSTDALE RD	NY 14226	1.00	o		0	0
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DAA			<u> </u>			m <b>990-EZ</b> (2009)
					LÓ!	UUU-LE (2009)

Pa	ort V Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			
	description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of			
	the changes	_34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported			
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			
	6033(e) notice, reporting, and proxy tax requirements?	35a		_ X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr			
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified			
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		_X_
C	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 ▶			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization			
0	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		<u> </u>
41	List the states with which a copy of this return is filed NONE			
42a		-83	7 – 8	688
	488 VOOHEES AVE			
	Located at ▶ BUFFALO, NY ZIP+4 ▶ 142	216		
þ	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		<u>X</u>
	If "Yes," enter the name of the foreign country		l	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.		l	
С	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		<u> </u>
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ 📙
	and enter the amount of tax-exempt interest received or accrued during the tax year			
		1	т	
		$\vdash$	Yes	No_
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			7.
4 -	Form 990-EZ	44		<u>X</u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	_		v
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	0 = 7	<u>X</u>
	F.	orm <b>99</b>	v- <b>E</b> Z	(2009)

TREASURER

11/05/10

Check if

employed >

EIN

Phone

Date

CPAS,

Form **990-EZ** (2009)

No

26-4485174

716-204-8366

X Yes

Preparer's Identifying Number (See instr.)

P00365689

Paid

Preparer's

**Use Only** 

SUSAN FRETZ

JOANNE

May the IRS discuss this return with the preparer shown above? See instructions

L WASINGER

5350 MAIN

WILLIAMSVILLE

BECHTEL & WASINGER,

ST

NY

Type or print name and title

name (or yours

Preparer

signature

address, and ZIP

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

**Public Charity Status and Public Support** 

Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMHERST CENTRAL ALUMNI

FOUNDATION INC 22-2544684 Reason for Public Charity Status (All organizations must complete this part.) See instructions

	11 1	Nea5	on for Public Charity	Status (All Organizations	S must c	omple	ie iiiis	part.)	See II	1511 U.C	tions.		
The	orga	nization is not	a private foundation because	e it is (For lines 1 through 11, e	check only	y one box	()						
1	Ц	A church, co	nvention of churches, or ass	ociation of churches described	ın sectior	170(b)(	1)(A)(i).						
2	Ц	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	Ц	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical re	search organization operated	d in conjunction with a hospital	described	ın sectio	on 170(b	)(1)(A)(i	ii). Ente	er the h	ospital's nam	е,	
		city, and state											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(	b)(1)(A)(iv). (Complete Part	ll )									
6		A federal, sta	ate, or local government or g	overnmental unit described in s	ection 17	'0(b)(1)(A	(v).						
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
		described in section 170(b)(1)(A)(vi). (Complete Part II )											
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part	: II )								
9	X	An organizat	ion that normally receives (	I) more than 33 1/3 % of its sup	port from	contribut	ions, me	embersh	ip fees	, and gr	oss		
		receipts from	activities related to its exen	npt functions—subject to certain	n exceptio	ns, and (	2) no mo	re than	33 1/3	% of its	<b>;</b>		
		support from	gross investment income ar	nd unrelated business taxable ir	ncome (le:	ss sectioi	า 511 ta:	k) from t	ousines	ses			
		acquired by t	he organization after June 3	0, 1975 See section 509(a)(2).	. (Comple	te Part III	· )						
10		An organizati	on organized and operated	exclusively to test for public safe	ety See s	ection 5	09(a)(4).						
11		An organizati	on organized and operated	exclusively for the benefit of, to	perform t	he functio	ns of, o	r to carr	y out the	е			
		purposes of o	one or more publicly support	ed organizations described in s	ection 509	9(a)(1) or	section	509(a)(2	2) See	section	1		
		509(a)(3). Ch	eck the box that describes t	he type of supporting organizati	on and co	omplete li	nes 11e	through	11h				
		a   Type	I b Type II	c Type III-Function	ally integr	ated	d	Тур	e III-O	ther			
0		By checking t	this box, I certify that the org	anization is not controlled direc	tly or indi	ectly by	one or m	ore disc	qualified	l			
		persons othe	r than foundation managers	and other than one or more pul	blicly supp	orted org	ganızatıo	ns desc	ribed in	section	n		
		509(a)(1) or s	section 509(a)(2)										
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II,	or Type	III supp	orting				_
		_	check this box										
g		Since Augus	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	n any of ti	ne						
		following per	rsons?										
		(i) A persor	n who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed in (	н)				Yes	No
				f the supported organization?							11g(i)		<u> </u>
		•	member of a person describ	• •							11g(ii)	<del> </del>	
_			· · · · · · · · · · · · · · · · · · ·	described in (i) or (ii) above?							11g(iii	)	<u> </u>
<u>h</u>				he supported organization(s)	T.		1		Γ.				
(1)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9	1	organization sted in your		ou notify	(vi) l organizat	is the	(vii) Am sup		
	v. g	a.ii.zatioti		above or IRC section	1 ''	document?	col (i)	of your	(i) organı	zed in the	Sup	port	
				(see instructions))	<del></del>	T		ort?		§γ Γ			
			_		Yes	No	Yes	No	Yes	No			
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										<del></del>	<del></del>		
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					[				] ;				
Tota													

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

Section A. Public Support

Page 3

Schedule A (Form 990 or 990-EZ) 2009 AMHERST CENTRAL ALUMNI

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,354	8,520	17,006	19,865	22,189	80,934
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	51,747	19,114	21,241	12,259	29,058	133,419
3	Gross receipts from activities that are not an unrelated trade or business under section 513		:				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	65,101	27,634	38,247	32,124	51,247	214,353
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
þ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		ı				
	amount on line 13 for the year	1					
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						214,353
Sec	tion B. Total Support	tt.	······································			<u></u>	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	65,101	27,634	38,247	32,124	51,247	214,353
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,110	15,243	16,363	6,868	6,090	56,674
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	12,110	15,243	16,363	6,868	6,090	56,674
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	77 011	40.000	54 610	20.000		
14	First five years. If the Form 990 is for the	77,211	42,877	54,610	38,992	57,337	271,027
14	organization, check this box and stop here	-	secona, uma, iou	tii, oi iiitii tax yeai	as a section so it	C)(C)	▶ □
Sec	tion C. Computation of Public Su		age		· · · · · ·	<del></del> -	<u> </u>
15	Public support percentage for 2009 (line 8			n (f))		15	79.09%
16	Public support percentage from 2008 Scho	edule A, Part III, line	e 15			16	80.69%
Sec	tion D. Computation of Investme	nt Income Per	entage				
17	Investment income percentage for 2009 (in	ine 10c, column (f)	divided by line 13,	column (f))		17	21%
18	Investment income percentage from 2008		•			18	19%
19a	33 1/3 % support tests—2009. If the orga 17 is not more than 33 1/3 %, check this b						► X
b	33 1/3 % support tests—2008. If the orga		-		-		
	line 18 is not more than 33 1/3 %, check to	his box and <b>stop h</b> e	re. The organizati	on qualifies as a p	ublicly supported o	rganization	▶ □
		-				•	<u> </u>

Schedule A (Form 990 or 990-EZ) 2009 AMHERST CENTRAL ALUMNI

22-2544684

Page 4

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

, ,	•	•	
10 2:12 PM		Loss 1,373 1,373	
0102/2/10	<u></u>	Depreciation \$	
	Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -  Securities  ption	Expense 13,627 \$ 13,627 \$	
atements	- Sale of Assets O	Price 15,000 \$ 15,000 \$	
Federal Statements	Part I, Line 5c	Sold VARIOUS \$	
	- Form 990-EZ,	<b>∀</b>   ∯	
	Statement 1 Description	Sold D WELLINGTON F	
AMHERSTALOM AMHERST CENTRAL ALUMNI 22-2544684 FYE: 6/30/2010		Received Sold 312.983 SHS VANGUARD WELLINGTON FUND FURCHASE TOTAL	

## AMHERSTALUM AMHERST CENTRAL ALUMNI 22-2544684 Federal Statements

FYE: 6/30/2010

#### Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

	Description	 Amount
OTHER: 1	MISCELLANEOUS	\$ 586
TO	<b>TAL</b>	\$ 586

#### Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
MEETINGS	971
ADVERTISING	800
GOLF TOURNAMENT	9,961
INSURANCE	1,063
MEMORIALS AND GIFTS	100
MISCELLANEOUS EXPENSE	871
OFFICE SUPPLIES	269
PAYROLL SERVICES	510
POSTAGE	116
PRINTING	2,384
STUDENT AWARDS	250
TOTAL	\$ 17,295

#### Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description					 Amo	ount
UNREALIZED	GAIN/(LOSS)	IN	INVESTMENT	ASSETS	\$	14,239
TOTAL					\$	14,239

## Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Descri <i>p</i> tion	Beginning of Year	End of Year		
PREPAID EXPENSES AND DEFERRED CHARGES	\$1,140	\$	10,249	
	1,140		10,249	

#### Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description				Beginning of Year		End of Year		
ACCOUNTS DEFERRED		AND	ACCRUED	EXPENSES	\$	7,013 4,405	\$	21,308
					=	11,418	-	21,308

11/5/2010 2:12 PM

22-2544684

**Federal Statements** 

FYE: 6/30/2010

### Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

#### Description

TO RECEIVE AND ADMINISTER GIFTS, MEMORIALS, AND BEQUESTS IN RECOGNITION OF PAST OR PRESENT STUDENTS, STAFF, FACULTY, ADMINISTRATION, BOARD MEMBERS, OR FRIENDS OF THE AMHERST CENTRAL SCHOOLS; TO RECEIVE AND ADMINISTER FUNDS FOR ACTIVITIES AND PROGRAMS TO ENHANCE EDUCATIONAL EFFORTS IN THE SCHOOL COMMUNITY IN WAYS WHICH ARE NOT ABLE TO BE FUNDED BY THE SCHOOL BUDGET; AND TO ORGANIZE AND CARRY OUT FUND RAISING ACTIVITIES PURSUANT TO THESE PURPOSES.

## Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

#### Description

ADMINISTER GIFTS, MEMORIALS AND BEQUESTS IN RECOGNITION OF PAST OR PRESENT STUDENTS, STAFF, FACULTY, ADMINISTRATION, BOARD MEMBERS, OR FRIENDS OF AMHERST CENTRAL SCHOOLS PAID OUT AS AWARDS TO STUDENTS AND FACULTY.