



**Part II Statement of Functional Expenses**

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)

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a				
22b Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b				
23 Specific assistance to individuals (attach schedule) <b>STMT 3</b>	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A <b>SEE STATEMENT 4</b>	25a	43,680	35,539	8,141	
b Compensation of former officers, directors, key employees, etc listed in Part V-B	25b				
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	744		744	
27 Pension plan contributions not included on lines 25a, b, and c	27				
28 Employee benefits not included on lines 25a - 27	28	7,655	6,124	1,531	
29 Payroll taxes	29	3,412	2,730	682	
30 Professional fundraising fees	30				
31 Accounting fees	31	7,018		7,018	
32 Legal fees	32				
33 Supplies	33	679	543	136	
34 Telephone	34	2,212	1,770	442	
35 Postage and shipping	35	1,049	839	210	
36 Occupancy	36	19,896	15,917	3,979	
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39	81	81		
40 Conferences, conventions, and meetings	40	9,165	9,165		
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize)	43a	77,530	77,515	15	
a <b>SEE STATEMENT 5</b>	43b				
b	43c				
c	43d				
d	43e				
e	43f				
f	43g				
g					
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	173,121	150,223	22,898	0

 Joint Costs. Check ►  if you are following SOP 98-2

 ►  Yes  No

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_

(iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

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**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.

What is the organization's primary exempt purpose?

**► YOUTH AND ADULT ATHLETIC SERVICE**

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.)

**Program Service Expenses**

(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)

**a ADMINISTRATE AND ORGANIZE ATHLETIC PROGRAMS (TRACK & FIELD AND LONG DISTANCE RUNNING FOR YOUTH AND ADULTS), ASSIST IN EDUCATIONAL PROGRAMS FOR COACHES AND ATHLETES**

(Grants and allocations \$

)

If this amount includes foreign grants, check here ►

 150,223

b

(Grants and allocations \$

)

If this amount includes foreign grants, check here ►

c

(Grants and allocations \$

)

If this amount includes foreign grants, check here ►

d

(Grants and allocations \$

)

If this amount includes foreign grants, check here ►

e Other program services (attach schedule) **SEE STMT 6**

(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)

**150,223**

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## Part IV Balance Sheets (See the instructions.)

		(A) Beginning of year		(B) End of year
	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			
	45 Cash—non-interest-bearing	60,275	45	117,574
	46 Savings and temporary cash investments	44,731	46	45,640
	47a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b		48c
	49 Grants receivable			49
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att. schedule)			50b
	51a Other notes and loans receivable (attach schedule)	SEE WORKSHEET 51a	7,969	
	b Less allowance for doubtful accounts	51b		17,469
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges			518
	54a Investments—publicly-traded securities	► Cost	FMV	53
	b Investments—other securities (attach schedule)	► Cost	FMV	54a
	55a Investments—land, buildings, and equipment basis	55a		
	b Less accumulated depreciation (attach schedule)	55b		55c
	56 Investments—other (attach schedule)	SEE STMT 7	150,305	56
	57a Land, buildings, and equipment basis	57a	4,321	
	b Less accumulated depreciation (attach schedule)	57b	4,321	57c
	58 Other assets, including program-related investments (describe ► SEE STATEMENT 9			12,596
	59 Total assets (must equal line 74) Add lines 45 through 58	)	285,894	59
	60 Accounts payable and accrued expenses			60
	61 Grants payable			61
	62 Deferred revenue	SEE STATEMENT 10	1,405	62
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			2,080
	64a Tax-exempt bond liabilities (attach schedule)			63
	b Mortgages and other notes payable (attach schedule)			64a
	65 Other liabilities (describe ► SEE STATEMENT 11	)	7,729	65
	66 Total liabilities. Add lines 60 through 65		9,134	66
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted			276,760
	68 Temporarily restricted			67
	69 Permanently restricted			293,278
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74			68
	70 Capital stock, trust principal, or current funds			69
	71 Paid-in or capital surplus, or land, building, and equipment fund			70
	72 Retained earnings, endowment, accumulated income, or other funds			71
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)			72
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		276,760	73
			285,894	74
				321,124
				330,575

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**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)**

a	Total revenue, gains, and other support per audited financial statements	a	217,486
b	Amounts included on line a 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)	b4	
	Add lines b1 through b4		
c	Subtract line b from line a	b	
d	Amounts included on Part I, line 12, but not on line a:	c	217,486
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify)	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12) Add lines c and d	e	217,486
<b>Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>			
a	Total expenses and losses per audited financial statements	a	173,121
b	Amounts included on line a 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)	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	173,121
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	d	
e	Total expenses (Part I, line 17) Add lines c and d	e	173,121

**Part V-A 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 )

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**Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)**

Yes	No
-----	----

- 75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ► **ALL**

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)

c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" If "Yes," attach a statement that includes the information described in the instructions

d Does the organization have a written conflict of interest policy?

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits**

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

**Part VI Other Information (See the instructions.)**

Yes      No

- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change

77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes

78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement

80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?

b If "Yes," enter the name of the organization ►

and check whether it is  exempt or  nonexempt

- 81a Enter direct and indirect political expenditures (See line 81 instructions )

81

- b Did the organization file Form 1120-POL for this year?

1

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## Part 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	<input checked="" type="checkbox"/>
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 applications?	83a	<input checked="" type="checkbox"/>
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85a	<input checked="" type="checkbox"/>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	N/A	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	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	
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?	85g	
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 a 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	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a	<input checked="" type="checkbox"/>
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	<input checked="" type="checkbox"/>
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 ► 0	89a	
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction 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	<input checked="" type="checkbox"/>
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	89d	0
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	<input checked="" type="checkbox"/>
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	<input checked="" type="checkbox"/>
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	<input checked="" type="checkbox"/>
90a	List the states with which a copy of this return is filed ► <b>NONE</b>	90b	1
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions )		
91a	The books are in care of ► <b>STEPHEN VAITONES</b> <b>2001 BEACON STREET</b> Located at ► <b>BRIGHTON, MA</b>	Telephone no	<b>617-566-7600</b>
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 financial account)? If " Yes," enter the name of the foreign country►	ZIP + 4	<b>02135</b>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
		91b	<input checked="" type="checkbox"/>



**Part XI** **Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	<b>X</b>

(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a			
b			
c			
<b>Totals</b>			

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	<b>X</b>

(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a			
b			
c			
<b>Totals</b>			

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please  
Sign  
Here

Signature of officer

*Stephen Peckicanis*

Date

*11/06/08*

Type or print name and title

*Stephen Peckicanis, Treasurer*

Paid  
Preparer's  
Use Only

Preparer's  
signature

*PAUL J. DEVASTO*

Date

*11/06/08*

Check if  
self-  
employed

Preparer's SSN or PTIN

*04-2779892*

Firm's name (or yours  
if self-employed),  
address, and ZIP + 4

*CAMPBELL, DEVASTO & ASSOCIATES, CPA'S  
2001 BEACON STREET, SUITE 200  
BRIGHTON, MA 02135-7786*

EIN

*04-2779892*

Phone

*617-731-2333*

Form 990 (2007)

**SCHEDULE A**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**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)

OMB No. 1545-0047

**2007****Supplementary Information-(See separate instructions.)**► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**USA TRACK & FIELD, NEW ENGLAND ASSOC.**Employer identification number  
**04-3016191****Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl. benefit plans & deferred comp	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	►			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	►	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	►	

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

Schedule A (Form 990 or 990-EZ) 2007

**Part III Statements About Activities (See page 2 of the instructions.)**

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B )	1	<input checked="" type="checkbox"/>
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial 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 owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )		
a	Sale, exchange, or leasing of property?	2a	<input checked="" type="checkbox"/>
b	Lending of money or other extension of credit?	2b	<input checked="" type="checkbox"/>
c	Furnishing of goods, services, or facilities?	2c	<input checked="" type="checkbox"/>
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	2d	<input checked="" type="checkbox"/>
e	Transfer of any part of its income or assets?	2e	
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )	3a	<input checked="" type="checkbox"/>
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	<input checked="" type="checkbox"/>
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	<input checked="" type="checkbox"/>
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	<input checked="" type="checkbox"/>
b	Did the organization make any taxable distributions under section 4966?	4b	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	
d	Enter the total number of donor advised funds owned at the end of the tax year ► _____		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____ 0		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____ 0		0

**Part IV** **Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only ONE 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 ►**

10  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 **Support Schedule in Part IV-A** )

11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule in Part IV-A** )

11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule in Part IV-A** )

12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support 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 **Support Schedule in Part IV-A** )

13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I       Type II       Type III-Functionally Integrated       Type III-Other

**Provide the following information about the supported organizations. (See page 8 of the instructions.)**

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions )

**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

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28) . . .	26,757	2,719	2,566	4,372	36,414
16 Membership fees received	60,546	45,261	46,459	41,859	194,125
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	139,041	97,509	157,975	145,934	540,459
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	6,935	5,656	2,288	2,416	17,295
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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					0
22 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets <b>STMT 14</b>	2,380	11,645	9,032	5,076	28,133
23 Total of lines 15 through 22	235,659	162,790	218,320	199,657	816,426
24 Line 23 minus line 17	96,618	65,281	60,345	53,723	275,967
25 Enter 1% of line 23	2,357	1,628	2,183	1,997	
26 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 2003 through 2006 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 _____ 22 _____ 26b _____	► 26d				
e Public support (line 26c minus line 26d total)	► 26e				
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	► 26f	%			
27 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 (2006) 0 (2005) 0 (2004) 0 (2003) 0					
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 (2006) 0 (2005) 0 (2004) 0 (2003) 0					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	► 27c	770,998			
d Add Line 27a total _____ and line 27b total _____	► 27d				
e Public support (line 27c total minus line 27d total)	► 27e	770,998			
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	► 27f	816,426			
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	► 27g	94.4357%			
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	► 27h	2.1184%			
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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					

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**Part V Private School Questionnaire (See page 9 of the instructions.)****(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

- 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? **N/A**
- 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?
- 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?
- If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )

	<b>N/A</b>	Yes	No
29	29		
30	30		
31	31		

- 32 Does the organization maintain the following

- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?

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

- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )

33a		
33b		
33c		
33d		
33e		
33f		
33g		
33h		

- 34a Does the organization receive any financial aid or assistance from a governmental agency?

- b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement

34a		
34b		

- 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

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**Part VI-A      Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)  
(To be completed ONLY by an eligible organization that filed Form 5768)      **N/A**

Check ► a if the organization belongs to an affiliated group      Check ► b if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred )			
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table-			
If the amount on line 40 is-	The lobbying nontaxable amount is-		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	41		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	42		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	43		
	44		

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

#### **4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50 on page 13 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

## **Part VI-B      Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers
  - b** Paid staff or management (Include compensation in expenses reported on lines c through h)
  - c** Media advertisements
  - d** Mailings to members, legislators, or the public
  - e** Publications, or published or broadcast statements
  - f** Grants to other organizations for lobbying purposes
  - g** Direct contact with legislators, their staffs, government officials, or a legislative body
  - h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
  - i** Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

**Schedule A (Form 990 or 990-EZ) 2007**

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**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)**

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a Transfers from the reporting organization to a noncharitable exempt organization or**

- (i) Cash
  - (ii) Other assets

- ## b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
  - (ii) Purchases of assets from a noncharitable exempt organization
  - (iii) Rental of facilities, equipment, or other assets
  - (iv) Reimbursement arrangements
  - (v) Loans or loan guarantees
  - (vi) Performance of services or membership or fundraising solicitations

- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

- d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

►  Yes  No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Forms  
**990 / 990-PF****Other Notes and Loans Receivable****2007**

For calendar year 2007, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name

**USA TRACK & FIELD, NEW ENGLAND  
ASSOC.**

Employer Identification Number

**04-3016191****FORM 990, PART IV, LINE 51A - ADDITIONAL INFORMATION**

Name of borrower

Relationship to disqualified person

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Original amount  
borrowed

Date of loan

Maturity  
date

Repayment terms

Interest  
rate

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Security provided by borrower

Purpose of loan

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Consideration furnished by lender

Balance due at  
beginning of yearBalance due at  
end of yearFair market value  
(990-PF only)

(1)

**17,469****7,969**

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

**Totals****17,469****7,969**

**Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments**

Description	Amount
NE CLUB INCOME	\$ 4,910
USATF INDIVIDUAL INCOME -OTHE	28,660
NE INDIVIDUAL INCOME	16,422
RIGHTS FEES	11,669
TOTAL	<u>\$ 61,661</u>

**Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances**

Description	Amount
ROUNDING	\$ -1
TOTAL	<u>\$ -1</u>

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### Statement 3 - Form 990, Part II, Line 23 - Specific Assistance to Individuals

Description	Amount
GRANT EXPENSES	\$ _____
TOTAL	\$ _____ 0

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**Statement 4 - Form 990, Part II, Line 25a - Compensation of Current Officers**

Name	Program Services	Management & General	Fundraising
EXPENSES	\$ 35,539	\$ 8,141	\$ 0
STEPHEN G. VAITONES COMPENSATION			
TOTAL	\$ 35,539	\$ 8,141	\$ 0

**Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
EXPENSES	\$ 358	\$ 358	\$	\$
CREDIT CARD CHARGES	358	358		
BANK CHARGES	15		15	
EVENT FEES	44	44		
CONTRACT SERVICES	16,774	16,774		
OFFICIALS	9,550	9,550		
SPECIAL PROGRAMS EXPENSE	825	825		
ADVERTISING	715	715		
EVENT AWARDS	16,820	16,820		
FACILLITIES RENTALS	24,333	24,333		
EVENT EQUIPMENT & MATERIALS	3,446	3,446		
EVENT SUPPLIES	4,575	4,575		
YOUTH FUND EXPENSE	59	59		
MISCELLANEOUS EXPENSE	16	16		
TOTAL	\$ 77,530	\$ 77,515	\$ 15	\$ 0

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### Statement 6 - Form 990, Part III, Line e - Other Program Services

#### Description

N/A

**Statement 7 - Form 990, Part IV, Line 56 - Other Investments**

Description	Beginning of Year	End of Year	Basis of Valuation
BROOKLINE BANK CD 24 MO. 3.3%	\$ 42,691	\$ 44,334	
COUNTRYWIDE CD 3 YEAR	53,705	56,075	
COUNTRYWIDE CD 5 YEAR	53,909	56,419	
TOTAL	<u>\$ 150,305</u>	<u>\$ 156,828</u>	

**Statement 8 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

Description	Beginning of Year	Accum Depr	End of Year	Accum Depr
FURNITURE & EQUIPMENT	\$ 4,321	\$	\$ 4,321	\$
ACCUMULATED DEPRECIATION		4,321		4,321
TOTAL	<u>\$ 4,321</u>	<u>\$ 4,321</u>	<u>\$ 4,321</u>	<u>\$ 4,321</u>

**Statement 9 - Form 990, Part IV, Line 58 - Other Assets**

Description	Beginning of Year	End of Year
2002 USATF SANCTIONS	\$ 2,574	\$
2003 USATF CLUB	35	
2004 USATF SANCTIONS	5,792	
2006 USATF CLUB	495	
AR - SECURITY DEPOSITS	430	430
USATF MEMBERSHIP 08		1,616
*07 USATF MEMBERSHIP	3,270	
TOTAL	<u>\$ 12,596</u>	<u>\$ 2,046</u>

**Statement 10 - Form 990, Part IV, Line 62 - Deferred Revenue**

Description	Beginning of Year	End of Year
06 USATF SANCTIONS*	\$ 690	\$ 690
07 USATF CLUB*	615	1,240
08 USATF CLUB*	100	150
TOTAL	<u>\$ 1,405</u>	<u>\$ 2,080</u>

**Statement 11 - Form 990, Part IV, Line 65 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
98 USATF SANC	\$ 990	\$
USATF MEMBERSHIPS 2004	8	
1997 USATF MEMBER	150	
2002 USATF CLUB	45	
USATF MEMBERSHIPS 2005	3,110	3,118
PAYROLL LIABILITIES	1,373	1,198
07 USATF SANCTIONS	2,225	-1,315
08 USATF SANCTIONS		1,070
*07 USATF MEMBERSHIP		3,892
09 USATF CLUB		50
10 USATF CLUB		25
2005 USATF SANCTIONS	-172	-172
2006 USATF CLUB		-495
<b>TOTAL</b>	<b>\$ 7,729</b>	<b>\$ 7,371</b>

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### Statement 12 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Employees		3 - 4	0	0	0
KEN ROBICHAUD 84 CHAPMAN PLACE LEOMINSTER MA 01450	PRESIDENT				
GARY SNYDER 239 COMMONWEALTH AVE BOSTON MA 02116	PAST PRES	2	0	0	0
H. OLDHAM BROOKS 32 HICKORY LANE AMHERST MA 01003	VICE PRESIDE	2	0	0	0
JOHN OLESKI 21 CRESCENT ROAD BELMONT MA 02474	VICE PRESIDE	1	0	0	0
TOM PETRANOFF 660 LATEN KNIGHT RD CRANSTON RI 02921	YOUTH CHAIR	1	0	0	0
Laurie Boemker 18 RUGBY STREET CRANSTON RI 02910	OFFICIALS CE	2	0	0	0
PATRICK LAVELLE 4 MONTGOMERY AVE HOLYOKE MA 01040	OFFICIALS CE	2	0	0	0
COURTNEY BIRD 43 SIPPEWISSET ROAD FALMOUTH MA 02540	DISTANCE RUN	4	0	0	0
STEPHEN VIEGAS 18 JOHN STREET READING MA 01867	SECRETARY	2	0	0	0

**Statement 12 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key  
Employees (continued)**

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
	MOUNTAIN/TRA	2	0	0	0
RICHARD BOLT 43 SALISBURY ST. MANCHESTER NH 03104	ATHLETIC REP	2	0	0	0
DAVID CALLUM 54 HENRY AVE METHUEN MA 01844	RACEWALKING	6	0	0	0
JUSTIN KUO 39 OAKLAND RD. BROOKLINE MA 02445	VICE PRESIDE	2	0	0	0
JIM GARCIA 5 RAILTREE TERRACE WESTFORD MA 01886	MANAGING DIR	50	43,680	7,655	0
STEVE VAITONES 90 SUMMIT STREET WALTHAM MA 02154	MASTERS CHAI	1	0	0	0
MICHAEL TRAVERS 3 HOWE STREET WATERTOWN MA 02472					

**Statement 13 - Form 990, Part VIII - Relationship of Activities**

Line No.

Description

93A	SPECIAL PROGRAMS REVENUE FROM THE MANAGEMENT OF RACING EVENTS PROVIDEDS OPPORTUNITIES FOR MEMBERS TO ENGAGE IN TRACK AND FIELD COMPETITION
93B	EVENT SANCTIONS PROVIDE THE NECESSARY INSURANCE FOR RACES AND GUIDELINES FOR SAFETY AND COMPETITION BY THE RULES
94	MEMBERSHIP DUES IN THE FORM OF INDIVIDUAL CLUB FEES PROVIDE INSURANCE, INFORMATION, NEWSLETTERS AND YEAR ROUND TEAM COMPETITION FOR ALL MEMBERS

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### Statement 14 - Schedule A, Part IV-A, Line 22 - Other Income

Description	2006	2005	2004	2003
MISC INCOME	\$ 399	\$ 305	\$ 1,149	\$ 235
MERCHANDISE SALES	1,244	10,665	4,847	4,841
EQUIPMENT RENTAL	390	675	3,036	
OUT SERVICE & OTHER REVENUE	347			
<b>TOTAL</b>	<b>\$ 2,380</b>	<b>\$ 11,645</b>	<b>\$ 9,032</b>	<b>\$ 5,076</b>