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Frank Edelblut
Commissioner

Christine Brennan
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
101 Pleasant Street
Concord, N.H. 03301
TEL. (603) 271-3495
FAX (603) 271-1953

April 2, 2020

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Education to exercise a renewal option on a contract with Seacoast Youth Services, Seabrook, NH (Vendor Code #203944), by increasing the price limitation by \$68,294.38 from \$280,006.96 to \$348,301.34, for the purpose of offering extended day programming for youth and their families, and by extending the completion date from June 30, 2020 to June 30, 2021 upon Governor and Council approval. Item originally approved by Governor and Council on 06/29/16 (Item #112), 06/21/17 (Item #135), 06/05/18 (Item #131), 06/19/19 (Item #210). 100% Federal Funds.

Funding is available in the account titled 21st Century Community Title IVB, as follows:

		<u>FY 21</u>
06-56-56-562010-25190000-072-500577	Grants – Federal	\$68,294.38

EXPLANATION

The Department is requesting approval of this renewal contract. The Department went out for RFP in 2016. This is the fifth and final year of a five year grant. The United States Department of Education legislation allows for five-year Nita M. Lowey 21st Century Community Learning Centers grants to serve youth and their families during the out-of-school-time hours. Grants are awarded annually pending the receipt of an Annual Performance Report that indicates sufficient progress and the availability of Federal Funds.

This program provides grants to inner city and rural schools, community based organizations, youth development agencies and other educational agencies to provide expanded learning opportunities for children outside of regular school hours in a safe environment. The programs

His Excellency, Governor Christopher T. Sununu

and the Honorable Executive Council

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offer students a broad array of additional services, programs, and activities such as tutorial services, youth development activities, drug and violence prevention, counseling programs, art, music, recreation programs, and technology education.

These programs and services are designed to reinforce and complement the regular academic program of the participating students.

The program services provided by the grant cited above will be coordinated by Seacoast Youth Services in Seabrook, NH in collaboration with the Seabrook School District. This collaborative approach will serve elementary and middle school youth and their families.

Continued funding under this program will be conditional upon showing growth in one or more of the following common state indicators: academic growth, behavioral data, and family engagement. As in prior years, the grantee shall also report three times per year to the 21APR Federal Reporting System on attendance, activities, and program outcomes.

In the event Federal Funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

**AMENDMENT TO
PROFESSIONAL SERVICES CONTRACT**

Now come the New Hampshire Department of Education, Bureau of Instructional Support, hereinafter "the Agency," and Seacoast Youth Services, Seabrook, NH, hereinafter "the Contractor", and, pursuant to an agreement between the parties that was approved by Governor and Council on 06/29/16 (Item #112), 06/21/17 (Item #135), 06/05/18 (Item #131), 06/19/19 (Item #210) hereby agree to modify same as follows:

1. Amend Section 1.7 Completion Date by removing June 30, 2020 and replacing with June 30, 2021.
2. Amend Section 1.8 Price Limitation by removing \$280,006.96 and replacing with \$348,301.34.
3. Remove Exhibit A "SCOPE OF SERVICES" and replace with Exhibit B-5 "SCOPE OF SERVICES"
4. Remove Exhibit B-4 "BUDGET" and replace with Exhibit C-5 "METHOD OF PAYMENT"
5. Remove Exhibit C "SPECIAL PROVISIONS" and replace with Exhibit A-5 "SPECIAL PROVISIONS"
6. Add exhibit D (Contractor Obligations)
7. Add exhibit E (Federal Debarment and Suspension)
8. Add exhibit F (Anti-Lobbying)
9. Add exhibit G (Rights to Inventions Made Under a Contract, Copy Rights and Confidentiality)
10. All other provisions of this agreement shall remain in full force and effect as originally set forth, and
11. This amendment shall commence upon Governor and Council approval and shall terminate on (June 30, 2021).

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

THE STATE OF NEW HAMPSHIRE
Department of Education
(Agency)

FORREST E CARTER JR
Notary Public, State of New Hampshire
My Commission Expires July 11, 2023

Division of Commissioner's Office

By: [Signature] 5-7-20
Frank Edelblut, Commissioner of Education Date

By: [Signature] 04/08/20
Seacoast Youth Services Date

STATE OF New Hampshire

County of Rockingham

On this the 8th day of April, 2020 before me, [Signature] the


undersigned officer, personally appeared Yic Maloney known to me (or satisfactory proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereto set my hand and official seal.


Notary Public/Justice of the Peace

July 11, 2023
Commission Expires

Approved as to form, substance and execution by the Attorney General this 12th day of May, 2020.


Christopher, Band Office of Attorney General Office

Approved by the Governor and Council this _____ day of _____, 2020

By: _____

EXHIBIT A-5

Special Provisions

Additional Exhibits D-G

Contract between Seacoast Youth Services and the New Hampshire Department of Education

Contractor Initials YM
Date 12/1/06

EXHIBIT B-5

Scope of Services

The Nita M. Lowey 21st Community Learning Center (21 CCLC) grant supports the creation of community learning centers that provide academic enrichment opportunities during non-school hours for children, particularly students who attend high-poverty and low-performing schools. The program helps students meet state and local student standards in core academic subjects, such as reading and math; offers students a broad array of enrichment activities that can complement their regular academic programs; and offers literacy and other educational services to the families of participating children.

These activities include:

- Remedial education activities and academic enrichment learning programs, including those which provide additional assistance to students to allow the students to improve their academic achievement;
- Mathematics and science education activities;
- Arts and music education activities;
- Entrepreneurial education programs;
- Tutoring services, including those provided by senior citizen volunteers, and mentoring programs;
- Programs that provide after-school activities for limited English proficient (LEP) students and that emphasize language skills and academic achievement;
- Recreational activities;
- Telecommunications and technology education programs;
- Expanded library service hours;
- Programs that promote parental involvement and family literacy;
- Programs that provide assistance to students who have been truant, suspended, or expelled to allow them to improve their academic achievement;
- Drug and violence prevention programs;
- Counseling programs; and
- Character education programs.

Seacoast Youth Services will serve approximately 50 children per day, grades 5 through 8 from Seabrook Middle School.

The programming is as follows:

Seacoast Youth Services offers an after school program. The program begins at 2:30 p.m. and runs until 5:30 p.m. Students sign in and have snack in the cafeteria. Homework help club from 3:00 – 3:45 then academic enrichment clubs from 3:45 to 5:30.

EXHIBIT C-5**Method of Payment****BUDGET**

Expenditure Line Items	FY21
	July 1, 2020 – June 30, 2021
Salaries and wages (directly related to service)	\$ 54,309.70
Employee Benefits	\$ 8,816.66
Contract Services (Directly related to programming)	\$ 1,000.00
Professional Development	\$ 1,238.65
Supplies	\$ 2,929.37
Project Total	\$ 68,294.38

Source of Funding: Funding for this contract is 100% Federal Funds from the account titled 21st Century Community, Title IVB, as follows,

	FY 21
06-56-56-562010-25190000-072-500577	\$68,294.38
Grants Federal	

Limitation on price: Upon mutual agreement between the 21st CCLC State Director and the grantee, line items in this budget may be adjusted but in no case shall the total budget exceed the price limitation of \$68,294.38.

Method of Payment: Payment is to be made monthly on the basis of invoices which are supported by a summary of activities that have taken place in accordance with the terms of the approved grant proposal, along with a detailed listing of expenses incurred. If otherwise correct and acceptable, payments will be made for 100% of the expenditures listed. Invoices and reports shall be submitted to the 21st CCLC State Director.

Contract between Seacoast Youth Services and the New Hampshire Department of Education

Contractor Initials VM
Date 04/01/20

EXHIBIT D

Contractor Obligations

Contracts in excess of the simplified acquisition threshold (currently set at \$250,000) must address administrative, contractual, or legal remedies in instances where the contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate. Reference: 2 C.F.R. § 200.326 and 2 C.F.R. 200, Appendix II, required contract clauses.

The contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the contractor's actions pertaining to this contract.

The Contractor certifies and affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.

Breach

A breach of the contract clauses above may be grounds for termination of the contract, and for debarment as a contractor and subcontractor as provided in 29 C.F.R. § 5.12.

Fraud and False Statements

The Contractor understands that, if the project which is the subject of this Contract is financed in whole or in part by federal funds, that if the undersigned, the company that the Contractor represents, or any employee or agent thereof, knowingly makes any false statement, representation, report or claim as to the character, quality, quantity, or cost of material used or to be used, or quantity or quality work performed or to be performed, or makes any false statement or representation of a material fact in any statement, certificate, or report, the Contractor and any company that the Contractor represents may be subject to prosecution under the provision of 18 USC § 1001 and § 1020.

Environmental Protection

(This clause is applicable if this Contract exceeds \$150,000. It applies to Federal-aid contracts only.)

The Contractor is required to comply with all applicable standards, orders or requirements issued under Section 306 of the Clean Air Act (42 U.S.C. 1857 (h)), Section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and Environmental Protection Agency (EPA) regulations (40 CFR Part 15) which prohibit the use under non-exempt Federal contracts, grants or loans of facilities included on the EPA List of Violating Facilities. Violations shall be reported to the FHWA and to the U.S. EPA Assistant Administrator for Enforcement.

Procurement of Recovered Materials

In accordance with Section 6002 of the Solid Waste Disposal Act (42 U.S.C. § 6962), State agencies and agencies of a political subdivision of a state that are using appropriated Federal funds for procurement must procure items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired in the preceding fiscal year exceeded \$10,000; must procure solid waste management services in a manner that maximizes energy and resource recovery; and must have established an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

Contractor Initials LM
Date 04/08/20

Exhibit E

Federal Debarment and Suspension

- a. By signature on this Contract, the Contractor certifies its compliance, and the compliance of its Sub-Contractors, present or future, by stating that any person associated therewith in the capacity of owner, partner, director, officer, principal investor, project director, manager, auditor, or any position of authority involving federal funds:
1. Is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any Federal Agency;
 2. Does not have a proposed debarment pending;
 3. Has not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the past three (3) years; and
 4. Has not been indicted, convicted, or had a civil judgment rendered against the firm by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.
- b. Where the Contractor or its Sub-Contractor is unable to certify to the statement in Section a.1. above, the Contractor or its Sub-Contractor shall be declared ineligible to enter into Contract or participate in the project.
- c. Where the Contractor or Sub-Contractor is unable to certify to any of the statements as listed in Sections a.2., a.3., or a.4., above, the Contractor or its Sub-Contractor shall submit a written explanation to the DOE. The certification or explanation shall be considered in connection with the DOE's determination whether to enter into Contract.
- d. The Contractor shall provide immediate written notice to the DOE if, at any time, the Contractor or its Sub-Contractor, learn that its Debarment and Suspension certification has become erroneous by reason of changed circumstances.

Contractor Initials VM
Date 2/28/20

Exhibit F

Anti-Lobbying

The Contractor agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative execute the following Certification:

The Contractor certifies, by signing and submitting this contract, to the best of his/her knowledge and belief, that:

- a. No federal appropriated funds have been paid or shall be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence any officer or employee of any State or Federal Agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, the making of any federal grant, the making of any federal loan, the entering into any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- b. If any funds other than federally appropriated funds have been paid or shall be paid to any person for influencing or attempting to influence an officer or employee of any Federal Agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit the "Disclosure of Lobbying Activities" form in accordance with its instructions (<http://www.whitehouse.gov/omb/grants/sllfin.pdf>).
- c. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making and entering into this transaction imposed by Section 1352, Title 31 and U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
- d. The Contractor also agrees, by signing this contract that it shall require that the language of this certification be included in subcontracts with all Sub-Contractor(s) and lower-tier Sub-Contractors which exceed \$100,000 and that all such Sub-Contractors and lower-tier Sub-Contractors shall certify and disclose accordingly.
- e. The DOE shall keep the firm's certification on file as part of its original contract. The Contractor shall keep individual certifications from all Sub-Contractors and lower-tier Sub-Contractors on file. Certification shall be retained for three (3) years following completion and acceptance of any given project.

Contractor Initials *VM*
Date *04/05/00*

Exhibit G

Rights to Inventions Made Under a Contract, Copy Rights and Confidentiality

Rights to Inventions Made Under a Contract or Agreement

Contracts or agreements for the performance of experimental, developmental, or research work shall provide for the rights of the Federal Government and the recipient in any resulting invention in accordance with 37 CFR part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the DOE.

Any discovery or invention that arises during the course of the contract shall be reported to the DOE. The Contractor is required to disclose inventions promptly to the contracting officer (within 2 months) after the inventor discloses it in writing to contractor personnel responsible for patent matters. The awarding agency shall determine how rights in the invention/discovery shall be allocated consistent with "Government Patent Policy" and Title 37 C.F.R. § 401.

Confidentiality

All Written and oral information and materials disclosed or provided by the DOE under this agreement constitutes Confidential Information, regardless of whether such information was provided before or after the date on this agreement or how it was provided.

The Contractor and representatives thereof, acknowledge that by making use of, acquiring or adding to information about matters and data related to this agreement, which are confidential to the DOE and its partners, must remain the exclusive property of the DOE.

Confidential information means all data and information related to the business and operation of the DOE, including but not limited to all school and student data contained in NH Title XV, Education, Chapters 186-200.

Confidential information includes but is not limited to, student and school district data, revenue and cost information, the source code for computer software and hardware products owned in part or in whole by the DOE, financial information, partner information (including the identity of DOE partners), Contractor and supplier information, (including the identity of DOE Contractors and suppliers), and any information that has been marked "confidential" or "proprietary", or with the like designation. During the term of this contract the Contractor agrees to abide by such rules as may be adopted from time to time by the DOE to maintain the security of all confidential information. The Contractor further agrees that it will always regard and preserve as confidential information/data received during the performance of this contract. The Contractor will not use, copy, make notes, or use excerpts of any confidential information, nor will it give, disclose, provide access to, or otherwise make available any confidential information to any person not employed or contracted by the DOE or subcontracted with the Contractor.

Ownership of Intellectual Property

The DOE shall retain ownership of all source data and other intellectual property of the DOE provided to the Contractor in order to complete the services of this agreement. As well the DOE will retain copyright ownership for any and all materials, patents and intellectual property produced, including, but not limited to, brochures, resource directories, protocols, guidelines, posters, or reports. The Contractor shall not reproduce any materials for purposes other than use for the terms under the contract without prior written approval from the DOE.

Contractor Initials *VM*
Date *4/2/20*

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SEACOAST YOUTH SERVICES is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on December 19, 2001. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 393797

Certificate Number: 0004885808



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 7th day of April A.D. 2020.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State

CERTIFICATE OF VOTE

(Corporation without a Seal)

I, Tim Carey do hereby certify that:
(Name of the Clerk of the Corporation, cannot be signature)

- (1) I am the duly elected clerk of Seacoast Youth Services.
(Corporation Name)
- (2) The following are true copies of the resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on April 8th, 2020.
(date)

RESOLVED: That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Education.

RESOLVED: That Executive Director
(Name of Contract Signatory) (Title of Contract Signatory)
is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

- (3) The foregoing resolution(s) have not been amended or revoked, and remain in full force and effect as of the 8th day of April, 2020.
(day, month, yr) (must be same date as the contract date)

- (4) Vicki Maloney is the duly elected Executive Director of the corporation.
(name of contract signatory) (title of contract signatory)

IN WITNESS WHEREOF, I have hereunto set my hand as the Business Representative of the Corporation this 8th day of April, 2020.

Tim Carey
(Signature of Clerk of Corporation)

STATE OF NEW HAMPSHIRE

COUNTY OF Rockingham

FORREST E. CARTER, JR.
Notary Public, State of New Hampshire
My Commission Expires July 11, 2023

On 8th of April, 2020, the foregoing instrument was acknowledged before me.

In witness whereof I hereunto set my hand and official seal:

Forrest E. Carter, Jr.

My commission expires on: July 11th, 2023

Notary Public/Judge of the Peace



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/07/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Tobey & Merrill Insurance 20 High Street Hampton NH 03842-2214		CONTACT NAME: Edward Jackson AAI PHONE (A/C, No, Ext): (603) 928-7855 FAX (A/C, No): (603) 928-2135 E-MAIL ADDRESS: edward@tobeymerrill.com	
INSURED Seacoast Youth Services Inc PO Box 1381 Seabrook NH 03874		INSURER(S) AFFORDING COVERAGE INSURER A: Hiscox USA INSURER B: Technology Insurance INSURER C: ARCH Insurance INSURER D: INSURER E: INSURER F:	
		NAIC # 42378	

COVERAGES

CERTIFICATE NUMBER: CL204707100

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD	Y/YD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Professional Liability				10/17/2019	10/17/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COM/PROP AGG \$ Defense of Licensing \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						
	UMBRELLA LIAB EXCESS LIAB DED <input type="checkbox"/> RETENTION \$	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A		02/27/2020	02/27/2021	PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C					10/17/2019	10/17/2020	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

NH Department of Education 101 Pleasant Street Concord NH 03301		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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**--Seacoast Youth Services Mission Statement
April 2017**

Seacoast Youth Services supports young people and their families in coastal New Hampshire communities. By teaching and mentoring healthy communication and life skills, Seacoast Youth Services empowers those we serve to make positive choices for happier, healthier, and brighter futures.

We believe that effective support begins with direct engagement. That's why we connect with the youth where they learn and socialize in addition to offering individual and group counseling, outreach, and educational programs at our facility. Our goal is to reach all those who can benefit from our programs, including youth and family members who typically do not receive services.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2018

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

, 2018, and ending

, 20

B Check if applicable:

☐ Address change☐ Name change☐ Initial return☐ Final return/terminated☐ Amended return☐ Application pendingC Name of organization **Seacoast Youth Services**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

867 Lafayette Rd PO Box 1381

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Seabrook, NH 03874

D Employer identification no.

02-0529135

E Telephone number

(603) 474-3332

G Gross receipts

\$ **957,644**F Name and address of principal officer: **Tina Carey****Same as C above**H(a) Is this a group return for subsidiaries? ☐ Yes ☒ NoH(b) Are all subsidiaries included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527J Website: **seacoastyouthservices.org**K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ OtherL Year of formation: **2001**M State of legal domicile: **NH**

Summary

1 Briefly describe the organization's mission or most significant activities: Provides educational prevention programs to youths																																																									
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 50% of its net assets.																																																									
3 Number of voting members of the governing body (Part VI, line 1a)	3 8																																																								
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 8																																																								
5 Total number of individuals employed in calendar year 2018 (Part V, line 2b)	5 52																																																								
6 Total number of volunteers (estimate if necessary)	6																																																								
7a Total unrelated business revenue from Part VIII, column (C), line 1	7a 0																																																								
b Net unrelated business taxable income from Form 990-T, line 38	7b 0																																																								
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Signature Block

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.

Sign
Here

Victor Maloney

Signature of officer

Date

Victor Maloney, Executive Director

Type or print name and title

Paid

Preparer
Use Only

Print/Type preparer's name

Kevin Donovan

Preparer's signature

Date

03-16-2019Check ☐ if PTIN

self-employed

XXXXXXXXXX

Firm's name

Donovan and Company LLC

Firm's EIN

Firm's address

PO Box 2115

Phone no.

Andover MA 01810**800-319-4288**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:

Provides educational prevention programs to youths2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 804,466 including grants of \$) (Revenue \$ 749,030)The organization offers education, prevention and timely intervention programs to youths

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses including grants of \$) (Revenue \$)

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 804,466

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audits of financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 501(c)(3)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 513(c)(2)(B)(i) Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b Is the organization 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		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or employee thereof, a grant selection committee member, or to a controlled entity during the year? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions.		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity described in the Explanation of Form 990, line 28, or a related party? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, or dispose of a capital asset? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(4) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V. ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part VII Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	52
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable entity notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to either line 5a or 5b, enter the year in which the prohibited transaction occurred	5c	
6a	Does the organization have a fundraising solicitation program that is normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for a net loss? If "Yes," enter the date of the sale, exchange, or disposition: During your intake appointment, you gave a cc # and signed the Seacoast Youth Services Financial Policy. Please review the document which I have included with this letter.	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of art, books, or other collectibles, did the organization file a Form 990-B?	7h	X
8	Sponsoring organization explanation of business: Did a sponsoring organization provide services to you; it will break down what your insurance company wants towards your deductible; and what you will owe Seacoast Youth Services if your deductible is met.	8	
9	Sponsoring organization explanation of business: Did a sponsoring organization provide services to you; it will break down what your insurance company wants towards your deductible; and what you will owe Seacoast Youth Services if your deductible is met.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Gross income from members or shareholders	10a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of the exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4988 excise tax on net investment income? If "Yes," complete Form 720, Schedule O.	16	X

Part VI**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI ☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a	8
b Enter the number of voting members included in line 1a, above, who are independent	1b	8
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X
4 Did the organization have any significant changes in governing documents since the prior Form 990 was filed?	4	X
5 Did the organization have a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions taken during the year by the following:		
a The governing body?	8a	X
b Each officer, director, trustee, or key employee, if applicable, on Mondays. If you would prefer, you pay by check on Mondays, I can collect the amount at the time of the meeting appointment, you gave a cc # and signed the	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who has been traded at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did each of the local chapters, branches, or affiliates have a copy of the organization's governing documents to you; it will break down what your insurance company pays towards your deductible, and what you will owe	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization have a written policy or procedure requiring officers, directors, or trustees, and key employees to disclose annually describe in Schedule O how the written policy or procedure was implemented with and for you. Please do not hesitate to reach out to	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest or contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's assets with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **New Hampshire**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)
(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☐ Upon request ☒ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and
financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:

Victor Maloney (603) 474-3332, 867 Lafayette Rd PO Box 1381, Seabrook, NH 03874

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director or trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Tina Carey Director and Chairperson	1.00	X		X				0	0	0
(2) Catherine Golas Director	1.00	X						0	0	0
(3) Jerome Fuller Director	1.00	X						0	0	0
(4) Stephen O'Neil Director and Treasurer	1.00	X		X				0	0	0
(5) Deborah Vasconcellos Director	1.00	X						0	0	0
(6) Janet Stevens Director		X						0	0	0
(7) William Rothman Director		X						0	0	0
(8) Victor Maloney Executive Director					X			61,360	0	0
(9) _____										
(10) _____										
(11) _____										
(12) _____										
(13) _____										
(14) _____										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) _____										
(16) _____										
(17) _____										
(18) _____										
(19) _____										
(20) _____										
(21) _____										
(22) _____										
(23) _____										
(24) _____										
(25) _____										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							61,360	0		0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 2a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VII: ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns				
	b	Membership dues				
	c	Fundraising events	42,382			
	d	Related organizations				
	e	Government grants (contributions)				
	f	All other contributions, gifts, grants, and similar amounts not included above	166,232			
	g	Noncash contributions included in lines 1a-1f: \$				
	h	Total. Add lines 1a-1f	208,614			
Program Service Revenue	2a	Youth Services	749,030	749,030		
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	749,030			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			
4		Income from investment of tax-exempt bond proceeds				
5		Royalties				
6a		Gross rents				
b		Less: rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory				
b		Less: cost or other basis and sales expenses				
c		Gain or (loss)				
d		Net gain or (loss)				
8a		Gross income from fundraising events (not including \$ 42,382 of contributions reported on line 1c). See Part IV, line 18				
b		Less: direct expenses				
c		Net income or (loss) from fundraising events				
9a		Gross income from gaming activities. See Part IV, line 19				
b		Less: direct expenses				
c		Net income or (loss) from gaming activities				
10a		Gross sales of inventory, less returns and allowances				
b	Less: cost of goods sold					
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See instructions	957,644	749,030	0	0	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	61,360	6,136	52,156	3,068
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	524,490	524,490		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	32,904	3,613	3,291	
10 Payroll taxes	53,890	49,166	4,224	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	2,424		2,424	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	6,038	6,038		
13 Office expenses	3,461	3,461		
14 Information technology				
15 Royalties				
16 Occupancy	48,228	42,828	5,400	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	27	27		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,715	6,715		
23 Insurance	15,376	10,064	5,312	
24 Other expenses (categorize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Program Services	122,355	122,355		
b Transportation	1,375	1,375		
c Fundraising	18,390			18,390
d Payroll Processing	1,884	1,698	186	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	898,917	804,466	72,993	21,458
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	67,948	1	98,930
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	500	4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 43,547		
	b Less: accumulated depreciation	10b 19,059	8,047	10c 24,488
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	76,495	16	123,418	
Liabilities	17 Accounts payable and accrued expenses	12,116	17	1,085
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part III of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	773	23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	12,889	26	1,085
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	63,606	27	122,333
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	63,606	33	122,333
34 Total liabilities and net assets/fund balances	76,495	34	123,418	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	957,644
2	Total expenses (must equal Part IX, column (A), line 25)	2	898,917
3	Revenue less expenses. Subtract line 2 from line 1	3	58,727
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	63,606
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	122,333

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

1. Accounting method used to prepare the Form 990:
- ☐
- Cash
- ☒
- Accrual
- ☐
- Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

- 2a. Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- b. Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- c. If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

- 3a. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

- b. If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

02-0529135

Seacoast Youth Services

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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 II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(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 170(b)(1)(A)(vii). (Complete Part II.)
- 9 ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions - and (2) not more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511(b)(2) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- c ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- d ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations: _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part III **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	337,035	308,460	294,731	250,562	208,614	1,399,402
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	337,035	308,460	294,731	250,562	208,614	1,399,402
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						787,619
6 Public support. Subtract line 5 from line 4						611,783

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	337,035	308,460	294,731	250,562	208,614	1,399,402
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	15,255	16,800		6,500		38,555
11 Total support. Add lines 7 through 10						1,437,957
12 Gross receipts from related activities, etc. (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	42.55 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	55.75 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain/loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV**Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described in (2), do the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part VI Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See Instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount

		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

- 7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see Instructions).

Part VI Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D - Distributions**

Current Year

1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)(i)
Excess Distributions(ii)
Underdistributions
Pre-2018(iii)
Distributable
Amount for 2018

1	Distributable amount for 2018 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2018		
a	From 2013		
b	From 2014		
c	From 2015		
d	From 2016		
e	From 2017		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2018 distributable amount		
i	Carryover from 2013 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2018 from Section D, line 7:		
a	Applied to underdistributions of prior years		
b	Applied to 2018 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4j.		
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carry over to 2019. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2014		
b	Excess from 2015		
c	Excess from 2016		
d	Excess from 2017		
e	Excess from 2018		



Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Client Copy

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

2018

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Seacoast Youth Services

Employer identification number

02-0529135

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 1402(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies. If this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Seacoast Youth Services

Employer identification number

02-0529135

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NH Bureau Drug Alcohol Services 105 Pleasant Street Concord, NH 03301	\$ 80,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Seabrook Gaming LLC 319 New Zealand Rd Seabrook, NH 03874	\$ 20,838	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Town of Seabrook 99 Lafayette Rd Seabrook, NH 03874	\$ 22,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Seabrook Middle School 236 Walton Rd Seabrook, NH 03874	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	NH DOE 2nd Century Grants 101 Pleasant Street Concord, NH 03301	\$ 68,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Losik Family Trust 7 Stonewall Rd Rye, NH 03870	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Seacoast Youth Services

Employer identification number

02-0529135

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Health Care Gives PO Box 2 Durham, NH 03824	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 8, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

Seacoast Youth Services

02-0529135

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (c)	2c
d Number of conservation easements included in (c) acquired after 7/25/08 and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial liability?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part V, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (I) unrelated organizations
(II) related organizations

	Yes	No
3a(I)		
3a(II)		
3b		

b If "Yes" on line 3a(II), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		8,284	5,092	3,192
d Equipment		35,263	13,967	21,296
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

24,488

Part VII**Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII**Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX**Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X**Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. ☐

Part VIII**Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

Part IX**Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 16.)	5	

Part XII**Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018



Name of the organization

Seacoast Youth Services

Employer identification number

02-0529135

Part II Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> a Mail solicitations | <input type="checkbox"/> e Solicitation of non-government grants |
| <input type="checkbox"/> b Internet and email solicitations | <input type="checkbox"/> f Solicitation of government grants |
| <input type="checkbox"/> c Phone solicitations | <input type="checkbox"/> g Special fundraising events |
| <input type="checkbox"/> d In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part III

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>Gala</u> (event type)	(b) Event #2 (event type)	(c) Other events <u>None</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	42,382			42,382
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	42,382			42,382
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)				42,382	

Part III

Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tab/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018



Employer identification number

Seacoast Youth Services

02-0529135

01. Form 990 governing body review (Part VI, line 11)

A draft copy is provided to Directors for review and approval before being signed by an
officer of the organization.

02. Conflict of interest policy compliance (Part VI, line 12c)

The organization has a conflict of interest policy on file.

03. Form 990 availability to public (Part VI, line 18)

Form 990 is available to the public upon request.

04. Governing documents, etc, available to public (Part VI, line 19)

The governing documents, conflict of interest policy and financial statements are
available upon request.

Client Copy

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

2018

Attachment
Sequence No. 179Department of the Treasury
Internal Revenue Service (50)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

Seacoast Youth Services

FORM 990 - 1

02-0529135

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 9. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	552

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		SL	
h Residential rental property			27.5 yrs.	MM	SL	
i Nonresidential real property			39 yrs.	MM	SL	

Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a Class life					SL	
b 12-year			12 yrs.		SL	
c 30-year			30 yrs.	MM	SL	
d 40-year			40 yrs.	MM	SL	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	6,163
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	6,715
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2018)

Part IV Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions								25
26 Property used more than 50% in a qualified business use:								
Statement #567		%					6,163	
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%			SL-			
		%			SL-			
		%			SL-			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28 6,163
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than one vehicle to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part V Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2018 tax year (see instructions):					
43 Amortization of costs that began before your 2018 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

IRS e-file Signature Authorization
for an Exempt Organization

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning _____, and ending _____

▶ Do not send to the IRS. Keep for your records.

▶ Go to www.irs.gov/Form8879EO for the latest information.

2018

Department of the Treasury
Internal Revenue Service

Name of exempt organization

Seacoast Youth Services

Employer identification number

02-0529135

Name and title of officer

Victor Maloney, Executive Director

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VII, column (A), line 12)	1b	957,644
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmission or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment settlement date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize Donovan and Company LLC to enter my PIN 03874 as my signature
ERO firm name Enter five numbers, but do not enter all zeros.

on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date ▶ 01-21-2019

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

XXXXXX 01845
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date ▶ 03-16-2019

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see Instructions.

Form 8879-EO (2018)

Federal Supporting Statements

2018 PG01

Name(s) as shown on return

Your Social Security Number

Seacoast Youth Services

02-0529135

Form 4562 - Line 26

Statement #367

Description	Date	%Bus	Cost	Depr Basis	RP	Method	Deduction	179 Ded
2006 Chrysler	02-23-2012	100	5,130	5,130	5	200DBHY		
2005 Buick Terassa	11-15-2016	100	4,150	4,150	5	200DBMQ	355	
2008 Honda	01-01-2016	100	4,967	4,967	5	200DBMQ	775	
2011 Nissan Pathfinder	01-11-2018	100	13,144	13,144		200DBHY	2,629	
2013 Chrysler Town and Country	07-27-2018	100	12,022	12,022		200DBHY	2,404	
Total							<u>6,163</u>	

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Form 990
Worksheet

Schedule A, Line 5 - Excess 2% Limitation Contributors

(Keep for your records)

2018

Name(s) as shown on return

Seacoast Youth Services

Tax ID Number

02-0529135

2% of the amount on Schedule A, Part II, line 11, column (f)

28,759

Name	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	(g) Excess contributions (col. (f) minus the 2% limitation)
NH Bureau Drug Alcohol Services	89,006	95,933	70,629	80,000	80,000	415,568	386,809
Seabrook Gaming LLC	12,912	9,671	17,399	16,232	20,838	77,052	48,293
Town of Seabrook	20,000	22,500	22,500	22,500	22,500	110,000	81,241
Seabrook Middle School		31,250	390	35,000	35,000	127,640	98,881
NH DOE 21st Century Grants			65,344	68,000	68,000	201,154	172,395
Losik Family Trust					5,000	5,000	
Health Care Gives					20,000	20,000	

Total

787,619

* Item is Included in UBIA
for Section 199A calculations.
See "UBIA" in lower right corner.

Depreciation Detail Listing

Program Services
For your records only

2018

PAGE 1

Name(s) as shown on return

Seacoast Youth Services

Social security number/EIN

02-0529135

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
1	2006 Chrysler	02232012	5,130		100.00			5,130	5	200 DB HY	0	5,130		5,130	
2	Leasehold Improvement	10012006	8,284		100.00			8,284	15	SL MQ	6.667	4,540	552	5,092	552
4	2008 Honda	01012016	4,967		100.00			4,967	5	200 DB MQ	15.6	3,029	775	3,804	821
5	2011 Nissan Pathfinder	01112018	13,144		100.00			13,144	5	200 DB HY	20		2,629	2,629	2,629
6	2013 Chrysler Town and Country	07272018	12,022		100.00			12,022	5	200 DB HY	20		2,404	2,404	2,404
	Assets Sold/Abandoned														
3	2005 Buick Terazza	11152016	4,150		100.00			4,150	5	200 DB MQ	22.8	1,785	355	2,140	315
Client Copy															
Totals			47,697					47,697				14,484	6,715	21,199	6,721

Land Amount
Net Depreciable Cost

47,697

CY 179 and CY Bonus
TOTAL CY Depr including 179/bonus

6,715

ST ADJ:

Depreciation Reconciliation for Seacoast Youth Services

	Cost	Basis	Current Depreciation	Accumulated Depreciation	Bonus Depreciation
Beginning of Year	22,531	22,531	1,682	16,166	
Placed in Service in Current Year	25,166	25,166	5,033	5,033	
Removed from Service in Current Year	4,150	4,150	355	2,140	
End of Year	43,547	43,547	6,360	19,059	

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Next Year's Depreciation Worksheet

(Keep for your records)

2018

Name(s) as shown on return

Tax ID Number

Seacoast Youth Services

02-0529135

Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	2006 Chrysler	02232012	5,130	M	5	
PRG	1	Leasehold Improvements	10012006	8,284	SL	15	552
PRG	1	2008 Honda	01012016	4,967	M	5	547
PRG	1	2011 Nissan Pathfinder	01112018	13,144	M	5	
PRG	1	2013 Chrysler Town and C	07272018	12,022	M	5	
		TOTAL					1,099

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Seacoast Youth Services
Statement of Financial Position
December 31, 2018

Assets	
Cash	\$98,930
Accounts Receivable	\$0
Property and Equipment, Net	\$24,488
Total Assets	<u><u>\$123,418</u></u>
Liabilities	
Accounts Payable	\$1,085
Note payable	\$0
Total Liabilities	<u>\$1,085</u>
Net Assets	
Unrestricted	\$122,333
Total Net Assets	<u><u>\$122,333</u></u>
Total Liabilities and Net Assets	<u><u>\$123,418</u></u>

Seacoast Youth Services
Statement of Activities and Changes in Net Assets
Year Ended December 31, 2018

Revenues, Gains and Other Support	
Contributions	\$208,614
Program Service Fees	\$749,030
Other Revenue	\$0
Total Revenues, Gains and Other Support	<u>\$957,644</u>
Expenses	
Program Services	\$804,466
Supporting Services	
Management and General	\$72,993
Fund Raising	\$21,458
Total Expenses	<u>\$898,917</u>
Change in Net Assets	\$58,727
Net Assets at the Beginning of the Year	\$63,606
Net Assets at the End of the Year	<u>\$122,333</u>

Seacoast Youth Services
Statement of Functional Expenses
Year Ended December 31, 2018

	Program Services	Management and General	Fundraising	Total
Compensation and Related Expenses				
Compensation	\$530,626	\$52,156	\$3,068	\$585,850
Employee Benefits	\$29,613	\$3,291	\$0	\$32,904
Payroll Taxes	\$49,666	\$4,224	\$0	\$53,890
Total Compensation and Related Benefits	\$609,905	\$59,671	\$3,068	\$672,644
Office Expense	\$3,461	\$0	\$0	\$3,461
Occupancy	\$42,828	\$5,400	\$0	\$48,228
Advertising	\$6,038	\$0	\$0	\$6,038
Depreciation	\$6,715	\$0	\$0	\$6,715
Insurance	\$10,064	\$5,312	\$0	\$15,376
Program Services	\$122,355	\$0	\$0	\$122,355
Transportation	\$1,375	\$0	\$0	\$1,375
Professional Fees	\$0	\$2,424	\$0	\$2,424
Other	\$1,725	\$186	\$0	\$1,911
Fundraising	\$0	\$0	\$18,390	\$18,390
Totals	\$804,466	\$72,993	\$21,458	\$898,917

Seacoast Youth Services
Statement of Cash Flows
December 31, 2017

Cash Flows From Operating Activities	
Increase (Decrease) in Net Assets	\$58,727
Adjustments to Reconcile Increase (Decrease) to net cash provided by operating activities	
Depreciation	\$6,715
Loss on Disposal of Fixed Assets	\$2,010
(Increase) decrease in operating assets	
Accounts Receivable	\$500
Increase (Decrease) in operating liabilities	
Accounts Payable	-\$11,031
Net Cash Provided (Used By) Operating Activities	<u>\$56,921</u>
Cash flows from (Used By) Investing Activities	
Purchase of Fixed Assets	-\$25,166
Net Cash Provided (Used By) Investing Activities	<u>-\$25,166</u>
Cash Flows from (Used By) Financing Activities	
Cash used to pay Notes Payable	-\$773
Net Cash Provided (Used By) Financing Activities	<u>-\$773</u>
Net Increase (Decrease) in Cash and Cash Equivalents	<u>\$30,982</u>
Beginning Cash and Equivalents	<u>\$67,948</u>
Ending Cash and Equivalents	<u>\$98,930</u>

SYS Board of Directors 2019-2020

Tina Carey-

Chairperson, Two International Group, North Hampton, NH 03862

Catherine Golas-

Secretary, Phillips Academy Andover, Hampton Falls, NH 03844

Bill Rothney-

Treasurer, Bangor Savings Bank, Berwick, Maine 03901

Jeanne Stern, Phillips Exeter Academy, Newcastle, NH 03854

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Cindy Janik, Brain Injury Association of Massachusetts, Hampton Falls, NH 03844

Stephen Cogliano, ENRM- Veterans Hospital, Hampton Falls, NH 03844

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Rick Alleva, Ed.D., University of New Hampshire Cooperative Extension, Brentwood, NH 03833

Corey MacDonald, Esq., MacDonald & Black, North Hampton, NH 03862

Sarah Neilson, Care Resource Centers, North Hampton, NH 03862

Brittney Gentile

CAREER OBJECTIVE Obtain a position working in the field of youth development, afterschool programming, and education.

EDUCATION

Northern Essex Community College
Associates in Early Childhood Education
*Current
Haverhill, MA

CERTIFICATIONS

American Red Cross 1st Aid/CPR/AED Certified
2013 – Current

ACROSS NH Professional Activity Hours: 9.5

EXPERIENCE

2014 – Current

Site-Coordinator, Seabrook Adventure Zone (21st Century CCLC)
Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874
Responsible for program design, management, implementation, and evaluation of an academic and positive social development after school program with foundations based on both the 4-H values and Project Adventure paradigm of leadership.

- **Data Entry** of crucial and confidential information for youth and staff in the Seabrook Adventure Zone, including attendance, survey results, evaluation materials, and demographics.
- **Curriculum Design & Activity Development** for after school and weekend programming for 120 middle school youth throughout the academic year.
- **Evaluation** of program goals by using the on-line and data base programs of Youth Services, I4See, and Performance Pathways.
- **Financial Reporting** of budgeted items including snack, supplies, and personnel salary.
- **Human Resource Management** responsible for evaluating and managing all SAZ personnel, volunteers, and community partners.

2005 – Current

Group Leader, Seabrook Community Center
311 Lafayette Rd., Seabrook, NH 03874
Responsible for implementation of summer programming for youth Preschool - 8th Grade in Seabrook, New Hampshire.

- **Summer Program Director**
- **4-H Certified Leader**
- **American Red Cross 1st Aid & CPR w/AED Certified**

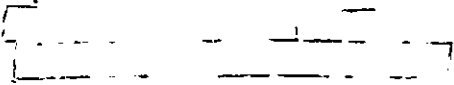
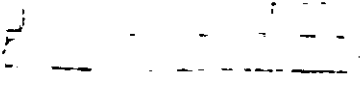
VOLUNTEER/COMMUNITY SERVICE

2014	6 Flags Read 2 Succeed Event w/SAZ & SMS
2013-2014	"Teens For Jeans" with Aeropostale
2013	SAZ & SMS Challenge Course Community Clean-Up
2010	Scotty Lago Olympic Event
2013-2014	SPCA Fundraiser and Food Drive
2013-2014	Toys For Tots

TECHNOLOGY

Power point, Print Shop, Digital Photos, IPhoto, Microsoft Word, Apple Works, Microsoft Excel, Microsoft Office Publisher, Quick Books, Adobe Workshop

REFERENCES

1. Forrest E Carter Jr., Program Director, Seabrook Adventure Zone

2. Cassandra Carter, Program Director, Seabrook Recreation Department


Forrest E. Carter Jr.

CAREER OBJECTIVE Obtain an administrative, leadership, or teaching position in the field of education and community development while working with youth and adolescents and integrating technology, relationship building, community, and academic supports with the purpose of creating a more positive and rewarding life and academic experience for students and educators.

EDUCATION

Plymouth State College Plymouth, NH
Masters in Education: Physical Education, Adventure Education Concentration
May 16, 2014

University Of Massachusetts Lowell Lowell, MA
Bachelors in Liberal Arts: Psychology
(Spanish Concentration Requirement)
February 15, 2009

CERTIFICATIONS/AWARDS

NH Praxis Completed
November 28th, 2012

Teaching Credential Certifiable Alternative 5: Elementary Education (K-6)
Teaching Credential Certifiable Alternative 5: Physical Education
Teaching Credential Certifiable Alternative 4: Middle Level Science (5-8)
Teaching Credential Certifiable Alternative 4: Earth/Space Science (7-12)

Certified Park & Recreation Professional 
January 2015 - Current

Certified Project Alert Educator
January 2011 - Current

American Red Cross 1st Aid/CPR/AED Certified Instructor
2010 - Current

NH Champion for Children
2018

NH Afterschool Ambassador, *Afterschool Alliance*
2014-Current

4-H Certified Leader
2011 - Current

Afterschool Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, *ACROSS NH DHHS*
2013 - Current

EXPERIENCE

2011 - Current

Program Director, Seabrook Adventure Zone (21st Century CCLC)
Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874
Responsible for the program design, management, implementation, and evaluation of an academic, recreational, and positive social development after school program with foundations based on both the 4-H values and Project Adventure paradigm of leadership.

- **Curriculum Development and Academic Integration** for afterschool programming that reflects and supports the curriculum during the school day, along with integrating into curriculum innovative and project/inquiry based activities and training staff to do this as well.
- **Technology Leadership** with the CAYEN 21st CCLC database, the I4SEE education system, as well as Performance Pathways and being individually contracted through the Department of Education to lead trainings with colleagues and professionals about the CAYEN database system and the many functions it provides. Also by providing programming to youth and staff that integrate technology tools, including Map Your World, Mind (Mine) Craft, and a variety of other innovative programs.
- **Positive Relationship Building** by educating staff and youth on the 7 elements that makes up a strong, positive, healthy relationship. Positive Relationship Building is essential and a large emphasis in staff professional development, as well is integrated into programming throughout each session.
- **Sustainability & Revenue Development** with the successful writing of the 21st CCLC, Best Buy, Hannaford, CLIF, and Exeter Rental Grants and creating strong community partnerships that have sustained and expanded the consistently growing program.
- **Community Advisory Board Leadership** during monthly/bi-monthly meetings and maintaining effective collaboration with partners, community organizations, and board members.
- **Summer Planning Team** responsible for organizing and creating the Summer Conference for all 21st Century programs in New Hampshire.
- **Internship Supervisor** for High School Extended Learning Opportunities students (ELO's) and College interns from the University of New Hampshire, Northern Essex Community College, and Southern New Hampshire University.
- **Project Adventure Certified (136 Hours)** incorporating team building, leadership skill cultivation, self-esteem boosting, and conflict resolution.
- **Evaluation** of staff, interns, and program goals by using the on-line and data base programs of Youth Services, Cayen, I4See, and Performance Pathways, as well as satisfaction surveys for youth, parents, and community leaders and a three tiered evaluation process for staff.
- **Budget** management of a \$200,000 + budget for all program needs, including staff salary, professional development, and all program expenses associated with the Seabrook Adventure Zone.
- **Human Resource Management** responsible for hiring, evaluating, and managing all SAZ personnel, volunteers, and community partners.

2009 – Current

Youth Program Director, Seacoast Youth Services (non profit)

867 Lafayette Rd., Seabrook, NH 03874

Responsible for implementation of after school, weekend, evening, and summer programming for at-risk middle and high school aged youth and adolescents in the New Hampshire seacoast area.

- **Outreach** in seacoast area middle schools and high schools including classroom presentations of programs, faculty integration and involvement, and parent and family involvement and awareness.
- **Project Alert Certified** to educate youth and adolescents in alcohol and substance abuse with interactive and integrative lessons.
- **Overnight Adventure Trips** consisting of four two day overnights with 24 adolescents and 3 staff, project adventure team building and leadership activities, high adventure, and structured itinerary.
- **Grant Writing** skills successful in obtaining several major grants, including the \$500,000 21st CCLC grant that supports the Seabrook Adventure Zone in both the 2011 and 2016 competitions.

2013 – Current

Afterschool Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, ACROSS NH DHHS

Develops, coordinates, and facilitates workshops for all audiences with a focus on Project Adventure, Curriculum Development, Staff Communication, Diversity, and Positive Youth Development content and design throughout the state of New Hampshire.

2014 – Current

Adjunct Faculty, Manchester Community College

1066 Front St., Manchester, NH

Adjunct faculty professor responsible for teaching Introduction to School Age Programming and School Age Environment & Curriculum to undergraduate students.

2008-2010

Coordinator, Teen Leadership Adventures Program (non profit)

Seabrook Community Center, Seabrook, NH 03874

Designed, proposed, and implemented the program successfully.

Responsibilities include offering adventure based activities, free tutoring, and leadership trainings to adolescents in the town of Seabrook, NH at low, subsidized costs. Other duties include volunteer management, allocating program funding, leadership public training, and organizing adventure trips.

- **Volunteer Management** and scheduling for 35 volunteers that assist various program activities, including volunteer tutors, chaperones, and leadership training instructors.
- **Leadership Trainings** held monthly focusing on sculpting adolescents into strong, independent future leaders by offering lecture and service learning opportunities of selected topics. Training topics have included organization skills, games and modifications workshop, 1, 2, 3 Magic, and several diversity awareness trainings.
- **Donations/Contributions of Funding** were allocated through direct contacts and networking within and outside of the community. Official letters, interviews, and sponsorships were attained by numerous methods, including e-mail, letters, telephone, and Internet.

2003 – 2009

Site-Director, Seabrook YMCA School's Out Program (non profit)

Southern District YMCA – Camp Lincoln, Kingston, NH 03848

Responsibilities include offering a quality after school program for children grades K-6, organizing and implementing activities, tutoring children with homework, supervising and managing staff members and pay roll sheets, as well as parent correspondence.

VOLUNTEER/COMMUNITY SERVICE

2013-Current

6 Flags Read 2 Succeed Event w/SAZ & SMS

2016 - Current

SMS Nature/Fitness Trail

2016-Current

Veteran's Memorial Park Playground

2009-2016

Servapalooza Volunteer Day

MEMBERSHIPS/AFFILIATIONS

Seabrook NH School District School Board Member

Winnacunnet High School Budget Committee Board Member

Friends of the Seabrook Community (FOSC) Board Chairman

Association of Experiential Education Member

National Afterschool Association Member

National Recreation & Parks Association Member

NH Notary

TECHNOLOGY

Microsoft Office Power point,, Word, Excel, Publisher, Adobe Workshop & Illustrator, Print Shop, IPhoto, IMovie, Movie Maker, SPSS, Black Board, I4SEE, Performance Pathways, CAYEN database system, Google Chrome

Frank Edelblut
Commissioner



Christine Brennan
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
101 Pleasant Street
Concord, N.H. 03301
TEL. (603) 271-3495
FAX (603) 271-1953

May 1, 2019

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Education to exercise a renewal option on a contract with Seacoast Youth Services, Seabrook, NH (Vendor Code #203944), by increasing the price limitation by \$68,294.38 from \$211,712.58 to \$280,006.96, for the purpose of offering extended day programming for youth and their families, effective July 1, 2019 through June 30, 2020 upon Governor and Council approval. Item was originally approved by Governor and Council on 06/29/16 (Item# 112), and renewed on 06/21/17 (Item# 135), and on 06/05/18 (Item # 131). 100% Federal Funds.

Funding is anticipated to be available in the account titled 21st Century Community Title IVB, as follows, upon the availability and continued appropriation of funds in the future operating budget;

FY 20

06-56-56-562010-25190000-072-500577

Grants – Federal

\$68,294.38

EXPLANATION

The Department is requesting approval of this renewal contract. The Department went out for RFP in 2016. This is the fourth year of a five year grant. The United States Department of Education legislation allows for five-year 21st Century Community Learning Center grants to serve youth and their families during the out-of-school-time hours. Grants are awarded annually pending the receipt of an Annual Performance Report that indicates sufficient progress and the availability of federal funds.

This program provides grants to inner city and rural schools, community based organizations, youth development agencies and other educational agencies to provide expanded learning opportunities for children outside of regular school hours in a safe environment. The programs

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
May 1, 2019
Page 2 of 2

will offer students a broad array of additional services, programs, and activities such as tutorial services, youth development activities, drug and violence prevention, counseling programs, art, music, recreation programs, and technology education.

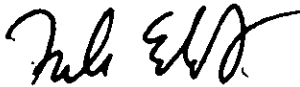
These programs and services are designed to reinforce and complement the regular academic program of the participating students.

The program services provided by the grant cited above will be coordinated by Seacoast Youth Services in Seabrook, NH in collaboration with the Seabrook School District. This collaborative approach will serve elementary and middle school youth and their families.

The conditional nature of this approval is a result of new state indicators that all programs will be measured against, including baseline academic growth, behavioral data, program attendance, and family engagement. Continued funding under this program will be conditional upon showing growth in one or more of these common state indicators. The indicators will be discussed at a meeting to be held at the Department of Education on June 17, 2019 with the Commissioner. As in prior years, the grantee shall also report three times per year to the 21 APR Federal Reporting System on attendance, activities, and program outcomes.

In the event Federal Funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

**AMENDMENT TO
GRANT AGREEMENT**

Now come the New Hampshire Department of Education, Bureau of Integrated Programs, hereinafter "the Agency," and the Seacoast Youth Services, Seabrook, NH, hereinafter "the Grantee", and, pursuant to an agreement between the parties that was approved by Governor and Council on 6/29/16 (Item #112), renewed on 6/21/17 (Item #135), and on 6/05/18 (Item #131), hereby agree to modify same as follows:

1. Agreement, General Provisions, Block 1.6, remove June 30, 2019 and replace with June 30, 2020.
2. Agreement, General Provisions, Block 1.8, remove \$211,712.58 and replace with \$280,006.96.
3. Replace Exhibit B-3 with B-4 - Budget.
4. Add Exhibit D (Contactor Obligations)
5. Add Exhibit E (Federal Debarment and Suspension)
6. Add Exhibit F (Anti-Lobbying)
7. Add Exhibit G (Rights to Inventions Made Under a Contract, Copy Rights and Confidentiality)
8. Add Exhibit H (Termination)
9. All other provisions of this agreement shall remain in full force and effect.
10. This amendment shall commence upon Governor and Council approval and shall terminate on June 30, 2020.

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

**THE STATE OF NEW HAMPSHIRE
Department of Education (Agency)**

Division of Commissioner's Office
By: [Signature] 6-4-19
Commissioner of Education Date

Seacoast Youth Services
Name of Entity (Grantee)
By: [Signature] 5/21/19
Signature, Title Date

STATE OF New Hampshire
County of Rockingham

On this the 21 day of May, 2019 before me, Forrest E. Carter Jr., the undersigned officer, personally appeared Vic Maloney known to me (or satisfactory proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereto set my hand and official seal.

[Signature]
Notary Public/Justice of the Peace

FORREST E CARTER JR
Notary Public, State of New Hampshire
My Commission Expires July 11, 2023

July 11, 2023
Commission Expires

Approved as to form, substance and execution by the Attorney General this 5 day of JUNE, 2019.

[Signature]
Division of Attorney General Office

Approved by the Governor and Council this _____ day of _____, 2019

By: _____

EXHIBIT B-4**BUDGET**

Expenditure Line Items	FY20
	July 1, 2019-June 30, 2020
Salaries and wages (directly related to service)	\$ 54,309.70
Employee Benefits	\$ 8,816.66
Contract Services (Directly related to programming)	\$ 1,000.00
Professional Development	\$ 1,238.65
Supplies	\$ 2,929.37
Project Total	\$ 68,294.38

Source of Funding: Funding is anticipated to be available in the account titled 21st Century Community Title IVB, as follows, upon the availability and continued appropriation of funds in the future operating budget, with the ability to adjust encumbrances between Fiscal Years through the Budget Office without further Governor and Council approval, if needed and justified;

06-56-56-562010-25190000-072-500577
Grants Federal

FY 20
\$68,294.38

Limitation on price: Upon mutual agreement between the 21st CCLC State Director and the grantee, line items in this budget may be adjusted but in no case shall the total budget exceed the price limitation of \$68,294.38.

Method of Payment: Payment is to be made monthly on the basis of invoices which are supported by a summary of activities that have taken place in accordance with the terms of the approved grant proposal, along with a detailed listing of expenses incurred. If otherwise correct and acceptable, payments will be made for 100% of the expenditures listed. Invoices and reports shall be submitted to the Grant Management System and approved by the 21st CCLC State Director.

Contractor Initials _____
Date _____

lum
8/21/19

EXHIBIT D**Contractor Obligations**

Contracts in excess of the simplified acquisition threshold (currently set at \$250,000) must address **administrative, contractual, or legal remedies** in instances where the contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate. Reference: 2 C.F.R. § 200.326 and 2 C.F.R. 200, Appendix II, required contract clauses.

The contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the contractor's actions pertaining to this contract.

The Contractor, certifies and affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.

Breach

A breach of the contract clauses above may be grounds for termination of the contract, and for debarment as a contractor and subcontractor as provided in 29 C.F.R. § 5.12.

Fraud and False Statements

The Contractor understands that, if the project which is the subject of this Contract is financed in whole or in part by federal funds, that if the undersigned, the company that the Contractor represents, or any employee or agent thereof, knowingly makes any false statement, representation, report or claim as to the character, quality, quantity, or cost of material used or to be used, or quantity or quality work performed or to be performed, or makes any false statement or representation of a material fact in any statement, certificate, or report, the Contractor and any company that the Contractor represents may be subject to prosecution under the provision of 18 USC § 1001 and § 1020.

Environmental Protection

(This clause is applicable if this Contract exceeds \$150,000. It applies to Federal-aid contracts only.)

The Contractor is required to comply with all applicable standards, orders or requirements issued under Section 306 of the Clean Air Act (42 U.S.C. 1857 (h)), Section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and Environmental Protection Agency (EPA) regulations (40 CFR Part 15) which prohibit the use under non-exempt Federal contracts, grants or loans of facilities included on the EPA List of Violating Facilities. Violations shall be reported to the FHWA and to the U.S. EPA Assistant Administrator for Enforcement.

Procurement of Recovered Materials

In accordance with Section 6002 of the Solid Waste Disposal Act (42 U.S.C. § 6962), State agencies and agencies of a political subdivision of a state that are using appropriated Federal funds for procurement must procure items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired in the preceding fiscal year exceeded \$10,000; must procure solid waste management services in a manner that maximizes energy and resource recovery; and must have established an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

Contractor Initials UMDate 5/21/19

Exhibit E

Federal Debarment and Suspension

- a. By signature on this Contract, the Contractor certifies its compliance, and the compliance of its Sub-Contractors, present or future, by stating that any person associated therewith in the capacity of owner, partner, director, officer, principal investor, project director, manager, auditor, or any position of authority involving federal funds:
1. Is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any Federal Agency;
 2. Does not have a proposed debarment pending;
 3. Has not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the past three (3) years; and
 4. Has not been indicted, convicted, or had a civil judgment rendered against the firm by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.
- b. Where the Contractor or its Sub-Contractor is unable to certify to the statement in Section a.1. above, the Contractor or its Sub-Contractor shall be declared ineligible to enter into Contract or participate in the project.
- c. Where the Contractor or Sub-Contractor is unable to certify to any of the statements as listed in Sections a.2., a.3., or a.4., above, the Contractor or its Sub-Contractor shall submit a written explanation to the DOE. The certification or explanation shall be considered in connection with the DOE's determination whether to enter into Contract.
- d. The Contractor shall provide immediate written notice to the DOE if, at any time, the Contractor or its Sub-Contractor, learn that its Debarment and Suspension certification has become erroneous by reason of changed circumstances.

Contractor Initials
Date

mm
4/2/19

Exhibit F

Anti-Lobbying

The Contractor agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, execute the following Certification:

The Contractor certifies, by signing and submitting this contract, to the best of his/her knowledge and belief, that:

- a. No federal appropriated funds have been paid or shall be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence any officer or employee of any State or Federal Agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, the making of any federal grant, the making of any federal loan, the entering into any cooperative agreement, and the extension, continuation, renewal amendment, or modification of any Federal contract grant, loan, or cooperative agreement.
- b. If any funds other than federally appropriated funds have been paid or shall be paid to any person for influencing or attempting to influence an officer or employee of any Federal Agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit the "Disclosure of Lobbying Activities" form in accordance with its instructions (<http://www.whitehouse.gov/omb/grants/sflllin.pdf>).
- c. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making and entering into this transaction imposed by Section 1352, Title 31 and U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
- d. The Contractor also agrees, by signing this contract that it shall require that the language of this certification be included in subcontracts with all Sub-Contractor(s) and lower-tier Sub-Contractors which exceed \$100,000 and that all such Sub-Contractors and lower-tier Sub-Contractors shall certify and disclose accordingly.
- e. The DOE shall keep the firm's certification on file as part of its original contract. The Contractor shall keep individual certifications from all Sub-Contractors and lower-tier Sub-Contractors on file. Certification shall be retained for three (3) years following completion and acceptance of any given project.

Contractor Initials

Date

UM
4/2/19

Exhibit G

Rights to Inventions Made Under a Contract, Copy Rights and Confidentiality

Rights to Inventions Made Under a Contract or Agreement

Contracts or agreements for the performance of experimental, developmental, or research work shall provide for the rights of the Federal Government and the recipient in any resulting invention in accordance with 37 CFR part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the DOE.

Any discovery or invention that arises during the course of the contract shall be reported to the DOE. The Contractor is required to disclose inventions promptly to the contracting officer (within 2 months) after the inventor discloses it in writing to contractor personnel responsible for patent matters. The awarding agency shall determine how rights in the invention/discovery shall be allocated consistent with "Government Patent Policy" and Title 37 C.F.R. § 401.

Confidentiality

All Written and oral information and materials disclosed or provided by the DOE under this agreement constitutes Confidential Information, regardless of whether such information was provided before or after the date on this agreement or how it was provided.

The Contractor and representatives thereof, acknowledge that by making use of, acquiring or adding to information about matters and data related to this agreement, which are confidential to the DOE and its partners, must remain the exclusive property of the DOE.

Confidential information means all data and information related to the business and operation of the DOE, including but not limited to all school and student data contained in NH Title XV, Education, Chapters 186-200.

Confidential information includes but is not limited to, student and school district data, revenue and cost information, the source code for computer software and hardware products owned in part or in whole by the DOE, financial information, partner information (including the identity of DOE partners), Contractor and supplier information, (including the identity of DOE Contractors and suppliers), and any information that has been marked "confidential" or "proprietary", or with the like designation. During the term of this contract the Contractor agrees to abide by such rules as may be adopted from time to time by the DOE to maintain the security of all confidential information. The Contractor further agrees that it will always regard and preserve as confidential information/data received during the performance of this contract. The Contractor will not use, copy, make notes, or use excerpts of any confidential information, nor will it give, disclose, provide access to, or otherwise make available any confidential information to any person not employed or contracted by the DOE or subcontracted with the Contractor.

Ownership of Intellectual Property

The DOE shall retain ownership of all source data and other intellectual property of the DOE provided to the Contractor in order to complete the services of this agreement. As well the DOE will retain copyright ownership for any and all materials, patents and intellectual property produced, including, but not limited to, brochures, resource directories, protocols, guidelines, posters, or reports. The Contractor shall not reproduce any materials for purposes other than use for the terms under the contract without prior written approval from the DOE.

Contractor Initials _____
Date _____

LM
3/21/19

Exhibit H

Termination

a. Termination for Cause

The DOE may terminate the Contract for cause for reasons including but not limited to the following circumstances:

1. Contractor's failure to perform the services as detailed herein and in any modifications to the Contract.
2. Contractor's failure to complete the Contract within the timeframe specified herein and in any modifications to the Contract.
3. Contractor's failure to comply with any of the material terms of the Contract.

If the DOE contemplates termination under the provisions of Subsections a.1., a.2., or a.3 above, the DOE shall issue a written notice of default describing the deficiency. The Contractor shall have five (5) business days to cure such deficiency. In the event the Contractor does not cure such deficiency, the DOE may terminate the Contract without further consideration by issuing a Notice of Termination for Default and may recover compensation for damages.

If, after the Notice of Termination for Default has been issued, it is determined that the Contractor was not in default or the termination for default was otherwise improper, the termination shall be deemed to have been a Termination for Convenience.

b. Termination for Convenience

The DOE may terminate the Contract for convenience, in whole or in part, when, for any reason, the DOE determines that such termination is in its best interest. The contract can be terminated due to reasons known to the non-Federal entity, i.e., including but not limited to program changes, changes in state-of-the-art equipment or technology, insufficient funding, etc. The Contract termination is effected by notifying the Contractor, in writing, specifying that all or a portion of the Contract is terminated for convenience and the termination effective date. The Contractor shall be compensated only for work satisfactorily completed prior to the termination of the Contract. The Contractor is not entitled to loss or profit. The amount due to the Contractor is determined by the DOE.

In the event of termination for convenience, the DOE shall be liable to the Contractor only for Contractor's work performed prior to termination.

c. The DOE's Right to Proceed with Work

In the event this Contract is terminated for any reason, the DOE shall have the option of completing the Contract or entering into an agreement with another party to complete services outlined in the Contract.

Contractor Initials _____
Date _____

LM
5/2/19

CERTIFICATE OF VOTE

(Corporation without a Seal)

I, TINA CAREY, do hereby certify that:
(Name of the Clerk of the Corporation, cannot be signatory)

- (1) I am the duly elected clerk of SEACREST Youth Services
(Corporation Name)
- (2) The following are true copies of the resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on MAY 21, 2019.
(date)

RESOLVED: That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Education.

RESOLVED: That Executive Director
(Name of Contract Signatory) (Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

- (3) The foregoing resolution(s) have not been amended or revoked, and remain in full force and effect as of the 21st day of MAY, 2019.
(day, month, yr) (must be same date as the contract date)
- (4) Victor Maloney is the duly elected Executive Director of the corporation.
(name of contract signatory) (title of contract signatory)

IN WITNESS WHEREOF, I have hereunto set my hand as the Business Representative of the Corporation this 21st day of May, 2019.

Tina Carey
(Signature of Clerk of Corporation)

STATE OF NEW HAMPSHIRE

COUNTY OF Rockingham

On 21st of May, 2019, the foregoing instrument was acknowledged before me.

In witness whereof I hereunto set my hand and official seal.

My commission expires on: July 11th, 2023

Forrest E. Carter Jr.
Notary Public/Justice of the Peace

FORREST E CARTER JR
Notary Public, State of New Hampshire
My Commission Expires July 11, 2023

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SEACOAST YOUTH SERVICES is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on December 19, 2001. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 393797



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 18th day of April A.D. 2017.

A handwritten signature in dark ink, appearing to read "Wm. Gardner".

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/21/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Tobey & Merrill Insurance 20 High Street Hampton NH 03842-2214		CONTACT NAME: Edward Jackson AAI PHONE (A/C, No, Ext): (603) 926-7855 FAX (A/C, No): (603) 926-2135 E-MAIL ADDRESS: edward@tobeymerill.com	
INSURED Seacoast Youth Services Inc PO Box 1381 Seabrook NH 03874		INSURER(S) AFFORDING COVERAGE INSURER A: Hiscox USA INSURER B: Technology Insurance INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: CL195606414

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Professional Liability			10/17/2018	10/17/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMPROP AGG \$ Defense of Licensing \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: \$2,500 ded per claim					COVERED SINGLE LIMIT - (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRE <input type="checkbox"/> AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY					
	UMBRELLA LIAB EXCESS LIAB DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N		02/27/2019	02/27/2020	<input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH. BR E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	General Liability - \$2,500 ded per claim			10/17/2018	10/17/2019	Each Occurrence 1,000,000 Aggregate 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

State of New Hampshire Department of Education 101 Pleasant Street Concord NH 03301	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	---

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13/ B
JUN05'18 AM 8:07 DAS.

Frank Edelblut
Commissioner

Christine Brennan
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
101 Pleasant Street
Concord, N.H. 03301
TEL. (603) 271-3495
FAX (603) 271-1953

May 15, 2018

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Education to exercise a renewal option on a contract with Seacoast Youth Services, Seabrook, NH (Vendor Code #203944), by increasing the price limitation by \$68,294.38 from \$143,418.20 to \$211,712.58, for the purpose of offering extended day programming for youth and their families, effective July 1, 2018 through June 30, 2019 upon Governor and Council approval. Item was originally approved by Governor and Council on 06/21/17 (Item# 135), and on 06/29/16 (Item# 112). 100% Federal Funds.

Funding is available in the account titled 21st Century Community Title IV, ^Bas follows:

		<u>FY 19</u>
06-56-56-562010-25190000-072-500577	Grants - Federal	\$68,294.38

EXPLANATION

The Department is requesting approval of this renewal option. The Dept. went out for RFP in 2014. This is the third year of a five year grant. The United States Department of Education legislation allows for five-year 21st Century Community Learning Center grants to serve youth and their families during the out-of-school-time hours. Grants are awarded annually pending the receipt of an Annual Performance Report that indicates sufficient progress and the availability of federal funds.

This program provides grants to inner city and rural schools, community based organizations, youth development agencies and other educational agencies to provide expanded learning opportunities for children outside of regular school hours in a safe environment. The programs will offer students a broad array of additional services, programs, and activities such as tutorial

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council

May 15, 2018

Page 2 of 2

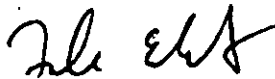
services, youth development activities, drug and violence prevention, counseling programs, art, music, recreation programs, and technology education.

These programs and services are designed to reinforce and complement the regular academic program of the participating students.

The program services provided by the grant cited above will be coordinated by Seacoast Youth Services in Seabrook, NH in collaboration with the Seabrook School District. This collaborative approach will serve elementary and middle school Seabrook School District youth and their families.

In the event Federal Funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

**AMENDMENT TO
GRANT AGREEMENT**

Now come the New Hampshire Department of Education, Bureau of Integrated Programs, hereinafter "the Agency," and the Seacoast Youth Services, Seabrook, NH, hereinafter "the Grantee", and, pursuant to an agreement between the parties that was approved by Governor and Council on 6/21/17 (Item #135), and 6/29/16 (Item #112) hereby agree to modify same as follows:

1. Agreement, General Provisions, Block 1.6, remove June 30, 2018 and replace with June 30, 2019.
2. Agreement, General Provisions, Block 1.8, remove \$143,418.20 and replace with \$211,712.58.
3. Replace Exhibit B-2 with B-3 - Budget.
4. All other provisions of this agreement shall remain in full force and effect.
5. This amendment shall commence upon Governor and Council approval and shall terminate on June 30, 2019.

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

THE STATE OF NEW HAMPSHIRE
Department of Education (Agency)

Division of Commissioner's Office

By: [Signature] 4/1/18
Commissioner of Education Date

Seacoast Youth Services

Name of Entity (Grantee)

By: [Signature] 5/2/18
Signature, Title Date

STATE OF New Hampshire

County of Buckingham

On this the 2nd day of May, 2018 before me, Forrest E Carter Jr., the undersigned officer, personally appeared Vic Maloney known to me (or satisfactory proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereto set my hand and official seal.

[Signature]
Notary Public/Justice of the Peace

8/14/2018

Commission Expires

Forrest E Carter Jr
Notary Public, State of New Hampshire
My Commission Expires August 14, 2018

Approved as to form, substance and execution by the Attorney General this 1st day of June, 2018.

[Signature]
Division of Attorney General Office

Approved by the Governor and Council this _____ day of _____, 2018

By: _____

EXHIBIT B-3**BUDGET**

Expenditure Line Items	FY19
	July 1, 2018-June 30, 2019
Salaries and wages (directly related to service)	\$ 54,309.70
Employee Benefits	\$ 8,816.66
Contract Services (Directly related to programming)	\$ 1,000.00
Professional Development	\$ 1,238.65
Supplies	\$ 2,929.37
Project Total	\$ 68,294.38

Source of Funding: Funding for this contract is 100% Federal Funds from the account titled 21st Century Community, Title IVB, as follows,

06-56-56-562010-25190000-072-500577	FY 19
Grants Federal	\$68,294.38

Limitation on price: Upon mutual agreement between the 21st CCLC State Coordinator and the grantee, line items in this budget may be adjusted but in no case shall the total budget exceed the price limitation of \$68,294.38

Method of Payment: Payment is to be made monthly on the basis of invoices which are supported by a summary of activities that have taken place in accordance with the terms of the approved grant proposal, along with a detailed listing of expenses incurred. If otherwise correct and acceptable, payments will be made for 100% of the expenditures listed. Invoices and reports shall be submitted to the 21st CCLC State Coordinator.

Contract between VENDOR and the New Hampshire Department of Education

Contractor Initials mm
Date 5/2/18

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SEACOAST YOUTH SERVICES is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on December 19, 2001. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 393797

Certificate Number : 0004095569



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 9th day of May A.D. 2018.

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State

CERTIFICATE OF VOTE

I, Janine Richards, do hereby certify that:
(Name of the elected Officer of the Agency; cannot be contract signatory)

1. I am a duly elected Officer of Seacoast Youth Services.
(Agency Name)

2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of the Agency duly held on May 2nd, 2018.
(Date)

RESOLVED: That the Executive Director
(Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

3. The forgoing resolutions have not been amended or revoked, and remain in full force and effect as of the 2nd day of May, 2018.
(Date Contract Signed)

4. Victor Maloney is the duly elected Executive Director.
(Name of Contract Signatory) (Title of Contract Signatory)

of the Agency.

Janine L. Richards
(Signature of the Elected Officer)

STATE OF NEW HAMPSHIRE

County of Rockingham

The forgoing instrument was acknowledged before me this 2nd day of May, 2018.

By Janine L. Richards
(Name of Elected Officer of the Agency)

Forrest E. Carter Jr.
(Notary Public/Justice of the Peace)

(NOTARY SEAL)

Commission Expires: 8/14/2018

Forrest E Carter Jr
Notary Public, State of New Hampshire
My Commission Expires August 14, 2018



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/14/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT, BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Tobey & Merrill Insurance 20 High Street Hampton NH 03842-2214		CONTACT NAME: Edward Jackson PHONE (A/C No. Ext.): (603) 926-7655 FAX (A/C No.): (603) 926-2135 E-MAIL ADDRESS: edward@tobeymerrill.com	
INSURED Seacoast Youth Services Inc PO Box 1381 Seabrook NH 03874		INSURER(S) AFFORDING COVERAGE INSURER A: Hiscox USA INSURER B: Ohio Security INSURER C: Technology Insurance INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL1710305232 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADOL	SUBR	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR			10/17/2017	10/17/2018	DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input checked="" type="checkbox"/> Professional Liability					MED EXP (Any one person) \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 3,000,000
	OTHER:					PRODUCTS - COMP/PROP AGG \$
B	AUTOMOBILE LIABILITY					Defense of Licensing \$ 10,000
	<input type="checkbox"/> ANY AUTO			8/11/2017	8/11/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY (Per accident) \$
	UMBRELLA LIAB					PROPERTY DAMAGE (Per accident) \$
	EXCESS LIAB					Business Auto Enhancement \$
	DED RETENTION \$					EACH OCCURRENCE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					AGGREGATE \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A	2/27/2017	2/27/2018	PER STATUTE <input checked="" type="checkbox"/> OTHER
	If yes, describe below					E.L. EACH ACCIDENT \$ 500,000
	DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER State of New Hampshire Department of Education 101 Pleasant Street Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Dean Merrill CIC/LSA
--	---

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Technology Insurance Company, Inc.

A Stock Insurance Company

**WORKERS COMPENSATION
AND EMPLOYERS LIABILITY
INSURANCE POLICY**

WC 99 00 01 B

INFORMATION PAGE

Ncci Code: 39071

1. Insured:Seacoast Youth Services, Inc.
867 Lafayette Road
Seabrook, NH 03874Other workplaces not shown above:
None**Producer:**AmTrust North America, Inc.
c/o Tobey & Merrill, Inc.
20 High Street
Hampton, NH 03842**Policy Number**

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Other
Federal Tax ID:	020529135
Risk Id:	
Renewal of:	

2. The policy period is from 2/27/2018 to 2/27/2019 12:01 a.m. at the insured's mailing address.
3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: New Hampshire
- B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in item 3.A. The limits of our liability under Part Two are:
- | State | Bodily Injury by Accident | Bodily Injury by Disease | Bodily Injury by Disease |
|-------|---------------------------|--------------------------|--------------------------|
| | \$500,000 each accident | \$500,000 policy limit | \$500,000 each employee |
- C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:
All states except ND, OH, WA, WY and State(s) Designated in Item 3A.
- D. This policy includes these endorsements and schedules: See Extension of Information Page
4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.

See Extension of Information Page

TOTAL ESTIMATED ANNUAL PREMIUM

3,054

STATE ASSESSMENT

0

TOTAL ESTIMATED COST

3,054

Minimum Premium

500

Issue Date: 1/10/2018

Countersigned by: _____



41
Frank Edelblut
Commissioner



B
135
Paul Leather
Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
101 Pleasant Street
Concord, N.H. 03301
FAX 603-271-1953
Citizens Services Line 1-800-339-9900

May 1, 2017

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Education, to exercise a renewal option with Seacoast Youth Services, Seabrook, NH (Vendor Code #203944), by increasing the price limitation by \$75,123.82 from \$68,294.38 to \$143,418.20, effective from June 30, 2017 to June 30, 2018, to continue to offer extended day programming for youth and their families, upon Governor and Council approval. Item originally approved by Governor and Council on 06/29/16 (Item #112). 100% Federal Funds.

Funds to support this request are anticipated to be available in the account titled 21st Century Community Title IV as follows, contingent upon legislative approval of the next biennium budget:

06-56-56-563010-75380000-072-500577

Grants-Federal

FY18
\$75,123.82

EXPLANATION

The United States Department of Education legislation allows for five-year 21st Century Community Learning Center grants to serve youth and their families during the out-of-school-time hours. Grants are awarded annually pending the receipt of an Annual Performance Report that indicates sufficient progress and the availability of federal funds.

New Hampshire anticipates a FY 2018 grant award in the amount of \$4,900,000.00 from the United States Department of Education under Title IVB, the 21st Century Community Learning Center Program. This program provides grants to inner city and rural schools, community based organizations, youth development agencies and other educational agencies to provide expanded learning opportunities for children outside of regular school hours in a safe environment. The programs will offer students a broad array of additional services, programs, and activities such as tutorial services, youth development activities, drug and violence prevention, counseling programs, art, music, recreation programs, and technology education.

His Excellency, Governor Christopher T. Sununu
and the Honorable Executive Council

Page 2 of 2

May 1, 2017

The program services provided by the grant cited above will be coordinated by Seacoast Youth Services in Seabrook, NH in collaboration with the Seabrook School District. This collaborative approach will serve middle school Seabrook School District youth and their families.

Funding for this grant is provided by the 21st Century Community Learning Center program under Part B of Title IV of the Elementary and Secondary Education Act (ESEA) of 1965, as amended. In January 2016 the New Hampshire Department of Education issued a Request for Proposals (RFP) soliciting proposals for these funds. School Districts, Community Based Organizations, and Extended Day Programs were notified through e-mail about the Bidders' Conference and publication of the online RFP. The projects funded demonstrated that partnerships between school districts and community based organizations have promise to help youth improve academic achievement. Sixteen proposals were received and six were funded based on a peer review process. Peer Reviewers worked in teams of three to rate proposals based on the RFP's matrix criteria. Each team had an experienced 21st Century Community Learning Center member to help steer the review and two other experienced professionals to create well-balanced teams. The twelve peer reviewers were represented by experienced 21st Century Community Learning Center and school day professionals, higher education, Title I, Title II and community based organizations. A list of reviewers and the results are included in this packet.

This is the second year of a 5 year renewal option. In the event Federal Funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut
Commissioner of Education

**AMENDMENT TO
GRANT AGREEMENT**

Now come the New Hampshire Department of Education, Bureau of Integrated Programs, hereinafter "the Agency," and the Seacoast Youth Services, Seabrook, NH; hereinafter "the Grantee", and, pursuant to an agreement between the parties that was approved by Governor and Council on 6/29/16 (Item #112) hereby agree to modify same as follows:

1. Agreement, General Provisions, Block 1.6, remove June 30, 2017 and replace with June 30, 2018.
2. Agreement, General Provisions, Block 1.8, remove \$68,294.38 and replace with \$143,418.20.
3. Replace Exhibit B with B-1 - Budget.
4. Replace Exhibit C with C-1.
5. All other provisions of this agreement shall remain in full force and effect.
6. This amendment shall commence upon Governor and Council approval and shall terminate on June 30, 2018.

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

**THE STATE OF NEW HAMPSHIRE
Department of Education (Agency)**

Division of Commissioner's Office
By: [Signature] 5-15-17
Commissioner of Education Date

Seacoast Youth Services
Name of Entity (Grantee)
By: Vic Maloney, Executive Director 4/17/17
Signature, Title Date

STATE OF New Hampshire
County of: Brockingham

On this the 17th day of April, 2017 before me, Forrest E. Carter Jr., the undersigned officer, personally appeared Vic Maloney known to me (or satisfactory proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereto set my hand and official seal.

[Signature]
Forrest E. Carter Jr.
Notary Public - State of New Hampshire
My Commission Expires August 14, 2018

Aug 14, 2018
Commission Expires

Approved as to form, substance and execution by the Attorney General this 25th day of May, 2017.

[Signature]
Division of Attorney General Office

Approved by the Governor and Council this _____ day of _____, 2017

By: _____

EXHIBIT B-1

BUDGET

Expenditure Line Items	FY18 July 1, 2017-June 30, 2018
Salaries and wages (directly related to service)	57,636.35
Employee Benefits	8,823.65
Contract Services (Directly related to programming)	2200.00
Supplies	6463.82
Subtotal	
Indirect Costs (not to exceed 8%)	0
Project Total	\$75,123.82

Source of Funding: Funding for this contract is 100% Federal Funds from the account titled 21st Century Community, Title IVB, as follows, contingent upon legislative approval of the next biennium budget:

06-56-563010-75380000-072-500577 Grants Federal

FY 18
\$75,123.82

Limitation on price: Upon mutual agreement between the 21st CCLC State Coordinator and the grantee, line items in this budget may be adjusted but in no case shall the total budget exceed the price limitation of \$75,123.82.

Method of Payment: Payment is to be made monthly on the basis of invoices which are supported by a summary of activities that have taken place in accordance with the terms of the approved grant proposal, along with a detailed listing of expenses incurred. If otherwise correct and acceptable, payments will be made for 100% of the expenditures listed. Invoices and reports shall be submitted to the 21st CCLC State Coordinator.

EXHIBIT C

SPECIAL PROVISIONS

21st Century Community Learning Center grants are eligible for five years of funding based on previous successful progress and the availability of federal funds. Based on this we are requesting a renewal option for three additional fiscal years.

CERTIFICATE OF VOTE

1. Janine Richards, do hereby certify that:
(Name of the elected Officer of the Agency; cannot be contract signatory)

1. I am a duly elected Officer of Seacoast Youth Services
(Agency Name)

2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of
the Agency duly held on April 17th 2017
(Date)

RESOLVED: That the Executive Director
(Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to
execute any and all documents, agreements and other instruments, and any amendments, revisions,
or modifications thereto, as he/she may deem necessary, desirable or appropriate.

3. The forgoing resolutions have not been amended or revoked, and remain in full force and effect as of
the 17th day of April, 2017.
(Date Contract Signed)

4. Victor Maloney is the duly elected Executive Director
(Name of Contract Signatory) (Title of Contract Signatory)

of the Agency.

Janine L Richards
(Signature of the Elected Officer)

STATE OF NEW HAMPSHIRE

County of Rockingham

The forgoing Instrument was acknowledged before me this 17th day of April, 2017.

By Janine Richards
(Name of Elected Officer of the Agency)

Forrest E. Carter Jr.
(Notary Public/Justice of the Peace)

(NOTARY SEAL)

Commission Expires: Aug. 14th 2018

Forrest E Carter Jr
Notary Public, State of New Hampshire
My Commission Expires August 14, 2018



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/27/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Tobey & Merrill Insurance 20 High Street Hampton NH 03842-2214		CONTACT NAME: Edward Jackson PHONE: (603) 926-7655 FAX: (603) 926-2135 EMAIL: edward@tobeymerrill.com ADDRESS:	
INSURED Seacoast Youth Services Inc PO Box 1381 Seabrook NH 03874		INSURER(S) AFFORDING COVERAGE INSURER A: Hiscox USA INSURER B: Ohio Security INSURER C: Technology Insurance INSURER D: Hartford INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: CL1742704897

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADOC CODE (INSO) (WVO)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY					
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> Professional Liability			10/17/2016	10/17/2017	DAMAGE TO RENTED PREMISES (Per occurrence) \$
						MED EXP (Any one person) \$
	GENL AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 3,000,000
	OTHER:					PRODUCTS - COMP/OP AGG \$
B	AUTOMOBILE LIABILITY					Defense of Licensing \$ 10,000
	ANY AUTO					COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000
	ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS			8/11/2016	8/11/2017	BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
	UMBRELLA LIAB					PROPERTY DAMAGE (Per accident) \$
	EXCESS LIAB					Business Auto Enhancement \$
	DED RETENTION					EACH OCCURRENCE \$
C	WORKERS COMPENSATION AND EMPLOYERS LIABILITY					AGGREGATE \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in NH)	Y/N				
	If yes, describe under DESCRIPTION OF OPERATIONS below			2/27/2017	2/27/2018	E.L. EACH ACCIDENT \$ 500,000
						E.L. DISEASE - EA EMPLOYEE \$ 500,000
D	Directors & Officers Liab.			10/17/2016	10/17/2017	E.L. DISEASE - POLICY LIMIT \$ 500,000
						D&O Liability 1,000,000
						EPLI 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

State of New Hampshire
Department of Education
101 Pleasant Street
Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Edward Jackson/EJJ

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SEACOAST YOUTH SERVICES is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on December 19, 2001. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 393797



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 18th day of April A.D. 2017.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State

**Seacoast Youth Services Board of Directors
April 2017**

**Janine L. Richards/Chairperson
Outreach Coordinator-SAU 90**

**Erica Ethier/Development-Fundraising
Branch Manager
Provident Bank**

**Dawn Emerick/Secretary
Taurus Marketing**

**Marcia Gloddy/Program Committee
Office Manager-The Masiello Group**

**Derek Scialdone/Treasurer
Branch Manager
The Provident Bank**

**Carol Bostic/ Fundraising
Health Coach and Certified Hypnotist**

**Elaine Ahearn/ Fundraising-Development
State Representative**

**John McCarthy/ Marketing
Realtor-The Masiello Group**

**Jerome Fuller Jr./ Marketing
General Manager
Staples**

**Attorney Alan Ganz/ Marketing
Ganz Law Office**

Board positions are non-compensatory

Seacoast Youth Services Mission Statement

April 2017

Seacoast Youth Services supports young people and their families in coastal New Hampshire communities. By teaching and mentoring healthy communication and life skills, Seacoast Youth Services empowers those we serve to make positive choices for happier, healthier, and brighter futures.

We believe that effective support begins with direct engagement. That's why we connect with the youth where they learn and socialize in addition to offering individual and group counseling, outreach, and educational programs at our facility. Our goal is to reach all those who can benefit from our programs, including youth and family members who typically do not receive services.

Brittney Gentile

CAREER OBJECTIVE Obtain a position working in the field of youth development, afterschool programming, and education.

EDUCATION

Northern Essex Community College
Associates in Early Childhood Education
*Current

Haverhill, MA

CERTIFICATIONS

American Red Cross 1st Aid/CPR/AED Certified
2013 – Current

ACROSS NH Professional Activity Hours: 9.5

EXPERIENCE

2014 – Current

Site-Coordinator, Seabrook Adventure Zone (21st Century CCLC)

Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874

Responsible for program design, management, implementation, and evaluation of an academic and positive social development after school program with foundations based on both the 4-11 values and Project Adventure paradigm of leadership.

- *Data Entry* of crucial and confidential information for youth and staff in the Seabrook Adventure Zone, including attendance, survey results, evaluation materials, and demographics.
- *Curriculum Design & Activity Development* for after school and weekend programming for 120 middle school youth throughout the academic year.
- *Evaluation* of program goals by using the on-line and data base programs of Youth Services, 14See, and Performance Pathways.
- *Financial Reporting* of budgeted items including snack, supplies, and personnel salary.
- *Human Resource Management* responsible for evaluating and managing all SAZ personnel, volunteers, and community partners.

2005 – Current

Group Leader, Seabrook Community Center
311 Lafayette Rd., Seabrook, NH 03874

Responsible for implementation of summer programming for youth Preschool - 8th Grade in Seabrook, New Hampshire.

- *Summer Program Director*
- *4-H Certified Leader*
- *American Red Cross 1st Aid & CPR w/AED Certified*

VOLUNTEER/COMMUNITY SERVICE

2014

6 Flags Read 2 Succeed Event w/SAZ & SMS

2013-2014

"Teens For Jeans" with Aeropostale

2013

SAZ & SMS Challenge Course Community Clean-Up

2010

Scotty Lago Olympic Event

2013-2014

SPCA Fundraiser and Food Drive

2013-2014

Toys For Tots

Owen Hunor Duffy

CAREER OBJECTIVE Obtain a position working in the field of youth development, afterschool/summer programming, and education.

EDUCATION

Northern Essex Community College
Associates: Elementary Education and Movement Science
*Current
Haverhill, MA

Empire Beauty School
Licensure in Hair Design & Esthetics
December 2014
Hooksett, NH

CERTIFICATIONS

American Red Cross 1st Aid/CPR/AED Certified
2013 – Current

Safety Certified Gymnastics Instructor Certification
2012 – Current

ACROSS NH Professional Activity Hours: 21.5

EXPERIENCE

2012 – Current

Assistant Site-Coordinator/Gymnastics Instructor, Seabrook Adventure Zone
(21st Century CCLC)

Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874

Responsible for curriculum development, program leadership, sports programming, activity implementation, and evaluation support of all youth positive social development programs with foundations based on both the 4-H values and Project Adventure.

- *Site Coordinator Support* before and during the SAZ program that includes program leadership, CAYEN input, fundraiser/event leadership and facilitation, as well as other Site-Coordinator needs.
- *Curriculum Development* for one program each day, throughout 6 6-week sessions during the academic school year. Programs focus on a variety of topics, including Science, Technology, Engineering, the Arts, Sports, and other interests of the youth.
- *Program Development and Implementation* throughout the academic calendar, including the popular title of Gymnastics, Neon Me Up, Cosmo: Skin & Nails, and many others.
- *Event Leadership* with all families and community members during monthly family events, sporting events, and student led presentations.
- *Leadership Trainings* held monthly focusing on sculpting adolescents into strong, independent future leaders by offering lecture and service learning opportunities of selected topics. Training topics have included organization skills, games, sports, and modifications workshop, 1, 2, 3 Magic, and several diversity awareness trainings.

2011 - 2014

Gymnastics Coach, New England Gymnastics Training Center (NEGTC)

NEGTC – 5 Tracy Lane, Hudson, NH 03051

Responsible for the safety, technique, and program management of youth gymnastics programs throughout the school year and summer.

- *Relationship Building* with parents and youth involved with the programs.
- *Appointment Management* for private instruction of individual youth.

- *American Red Cross Certified 1st Aid & CPR w/AED*

VOLUNTEER/COMMUNITY SERVICE

2011-2014	"Teens For Jeans" with Aeropostale
2013 & 2014	United Way Day of Caring
2012-2014	Literacy and Reading Fundraiser Challenge
2010-2014	SPCA Fundraiser and Food Drive

TECHNOLOGY

Power point, Print Shop, IPhoto, Microsoft Word, Apple Works, Microsoft Excel, Microsoft Office Publisher, Adobe Workshop, etc.

REFERENCES

1. Forrest E Carter Jr., Program Director, Seabrook Adventure Zone
PO Box 873, Seabrook, NH 03874
(603) 997-1909
forrest@seacoastyouthservices.org
2. Cassandra Carter, Program Director, Seabrook Recreation Department
26 Washington St., Seabrook, NH 03874
(603) 997-1749
ccarter@seabrooknh.org
3. Britney Gentile, Site-Coordinator, Seabrook Adventure Zone
Personal Reference
Seabrook, NH 03874
(603) 312-5034

Forrest E. Carter Jr.

9

CAREER OBJECTIVE Obtain an administrative or teaching position in the field of education working with youth and adolescents and integrating technology, relationship building, community, and academic supports with the purpose of creating a more positive and rewarding life and academic experience for students and educators.

EDUCATION

Plymouth State College
Masters in Education: Physical Education, Adventure Education Concentration
May 16, 2014

Plymouth, NH

University Of Massachusetts Lowell
Bachelors in Liberal Arts: Psychology
(Spanish Concentration Requirement)
February 15, 2009

Lowell, MA

CERTIFICATIONS

NH Praxis Completed
November 28th, 2012

Teaching Credential Certifiable Alternative 5: Elementary Education (K-6)
Teaching Credential Certifiable Alternative 5: Physical Education
Teaching Credential Certifiable Alternative 4: Middle Level Science (5-8)
Teaching Credential Certifiable Alternative 4: Earth/Space Science (7-12)

Certified Park & Recreation Professional
January 2015 - Current



American Red Cross 1st Aid/CPRAED Certified Instructor
2010 - Current

NH Afterschool Ambassador, *Afterschool Alliance*
2014-Current

4-H Certified Leader
2011 - Current

Afterschool Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, *ACROSS NH DHHS*
2013 - Current

EXPERIENCE

2011 - Current

Program Director, Seabrook Adventure Zone (21st Century CCLC)
Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874
Responsible for the program design, management, implementation, and evaluation of an academic, recreational, and positive social development after school program with foundations based on both the 4-H values and Project Adventure paradigm of leadership.

- *Curriculum Development and Academic Integration* for afterschool programming that reflects and supports the curriculum during the school day, along with integrating into curriculum innovative and project/inquiry based activities and training staff to do this as well.
- *Technology Leadership* with the CAYEN 21st CCLC database, the I4SEE education system, as well as Performance Pathways and being individually contracted through the

Department of Education to lead trainings with colleagues and professionals about the CAYEN database system and the many functions it provides. Also by providing programming to youth and staff that integrate technology tools, including Map Your World, Mind (Mine) Craft, and a variety of other innovative programs.

- *Positive Relationship Building* by educating staff and youth on the 7 elements that makes up a strong, positive, healthy relationship. Positive Relationship Building is essential and a large emphasis in staff professional development, as well is integrated into programming throughout each session.
- *Sustainability & Revenue Development* with the successful writing of the 21st CCLC, Best Buy, Hannaford, CLIF, and Exeter Rental Grants and creating strong community partnerships that have sustained and expanded the consistently growing program.
- *Community Advisory Board Leadership* during monthly/bi-monthly meetings and maintaining effective collaboration with partners, community organizations, and board members.
- *Summer Planning Team* responsible for organizing and creating the Summer Conference for all 21st Century programs in New Hampshire.
- *Internship Supervisor* for High School Extended Learning Opportunities students (ELO's) and College interns from the University of New Hampshire, Northern Essex Community College, and Southern New Hampshire University.
- *Project Adventure Certified (136 Hours)* incorporating team building, leadership skill cultivation, self-esteem boosting, and conflict resolution.
- *Evaluation* of staff, interns, and program goals by using the on-line and data base programs of Youth Services, Cayen, I4See, and Performance Pathways, as well as satisfaction surveys for youth, parents, and community leaders and a three tiered evaluation process for staff.
- *Budget* management of a \$200,000 + budget for all program needs, including staff salary, professional development, and all program expenses associated with the Seabrook Adventure Zone.
- *Human Resource Management* responsible for hiring, evaluating, and managing all SAZ personnel, volunteers, and community partners.

2009 – Current

Youth Program Director, Seacoast Youth Services (non profit)
867 Lafayette Rd., Seabrook, NH 03874

Responsible for implementation of after school, weekend, evening, and summer programming for at-risk middle and high school aged youth and adolescents in the New Hampshire seacoast area.

- *Outreach* in seacoast area middle schools and high schools including classroom presentations of programs, faculty integration and involvement, and parent and family involvement and awareness.
- *Project Alert Certified* to educate youth and adolescents in alcohol and substance abuse with interactive and integrative lessons.
- *Overnight Adventure Trips* consisting of four two day overnights with 24 adolescents and 3 staff, project adventure team building and leadership activities, high adventure, and structured itinerary.
- *Grant Writing* skills successful in obtaining several major grants, including the \$500,000 21st CCLC grant that supports the Seabrook Adventure Zone.

2013 – Current

After-school Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, ACROSS NH DHHS

Develops, coordinates, and facilitates workshops for all audiences with a focus on Project Adventure, Curriculum Development, Staff Communication, and Positive Youth Development content and design throughout the state of New Hampshire.

2014 – Current

Adjunct Faculty, Manchester Community College
1066 Front St, Manchester, NH

Adjunct faculty professor responsible for teaching Introduction to School Age Programming and School Age Environment & Curriculum to undergraduate students.

2008-2010

Coordinator, Teen Leadership Adventures Program (non profit)
Seabrook Community Center, Seabrook, NH 03874

Designed, proposed, and implemented the program successfully.

Responsibilities include offering adventure based activities, free tutoring, and leadership trainings to adolescents in the town of Seabrook, NH at low,

subsidized costs. Other duties include volunteer management, allocating program funding, leadership public training, and organizing adventure trips.

- *Volunteer Management* and scheduling for 35 volunteers that assist various program activities, including volunteer tutors, chaperones, and leadership training instructors.
- *Leadership Trainings* held monthly focusing on sculpting adolescents into strong, independent future leaders by offering lecture and service learning opportunities of selected topics. Training topics have included organization skills, games and modifications workshop, 1, 2, 3 Magic, and several diversity awareness trainings.
- *Donations/Contributions of Funding* were allocated through direct contacts and networking within and outside of the community. Official letters, interviews, and sponsorships were attained by numerous methods, including e-mail, letters, telephone, and Internet.

2003-2009

Site-Director, Seabrook YMCA School's Out Program (non profit)
Southern District YMCA - Camp Lincoln, Kingston, NH 03848

Responsibilities include offering a quality after school program for children grades K-6, organizing and implementing activities, tutoring children with homework, supervising and managing staff members and pay roll sheets, as well as parent correspondence.

VOLUNTEER/COMMUNITY SERVICE

2011-Current

6 Flags Read 2 Succeed Event w/SAZ & SMS

2016

SMS Fitness Trail

2009-2015

Servapalooza Volunteer Day

2010-2015

United Way Day of Caring

2011-2014

"Teens For Jeans" with Aeropostale

2014

Arts & Literacy Festival, w/CLIF/SAZ/SMS

2013

SAZ & SMS Outdoor Classroom w/Seabrook PTO

MEMBERSHIPS/AFFILIATIONS

Friends of the Seabrook Community (FOSC) Board Chairman
Seabrook Recreation Commission Member At Large
Association of Experiential Education Member

TECHNOLOGY

Microsoft Office Power point, Word, Excel, Publisher, Adobe Workshop & Illustrator, Print Shop, IPhoto, iMovie, Movie Maker, SPSS, Black Board, i4SEE, Performance Pathways, CAYEN database system, Google Chrome

112-03



Virginia M. Barry, Ph.D.
Commissioner of Education
Tel. 603-271-3144

Paul Leather
Deputy Commissioner of Education
Tel. 603-271-3601

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
101 Pleasant Street
Concord, N.H. 03301
FAX 603-271-1953
Citizens Services Line 1-800-333-9900

May 23, 2016

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

1. Authorize the Department of Education to grant funds to Seacoast Youth Services, Seabrook, NH [Vendor Code #203944], in an amount not to exceed \$68,294.38, for the purpose of offering extended day programming for youth and their families; effective upon Governor and Council approval for the period of July 1, 2016 through June 30, 2017. 100% Federal Funds.

Funding is available in the account titled 21st Century Community Title IV, as follows:

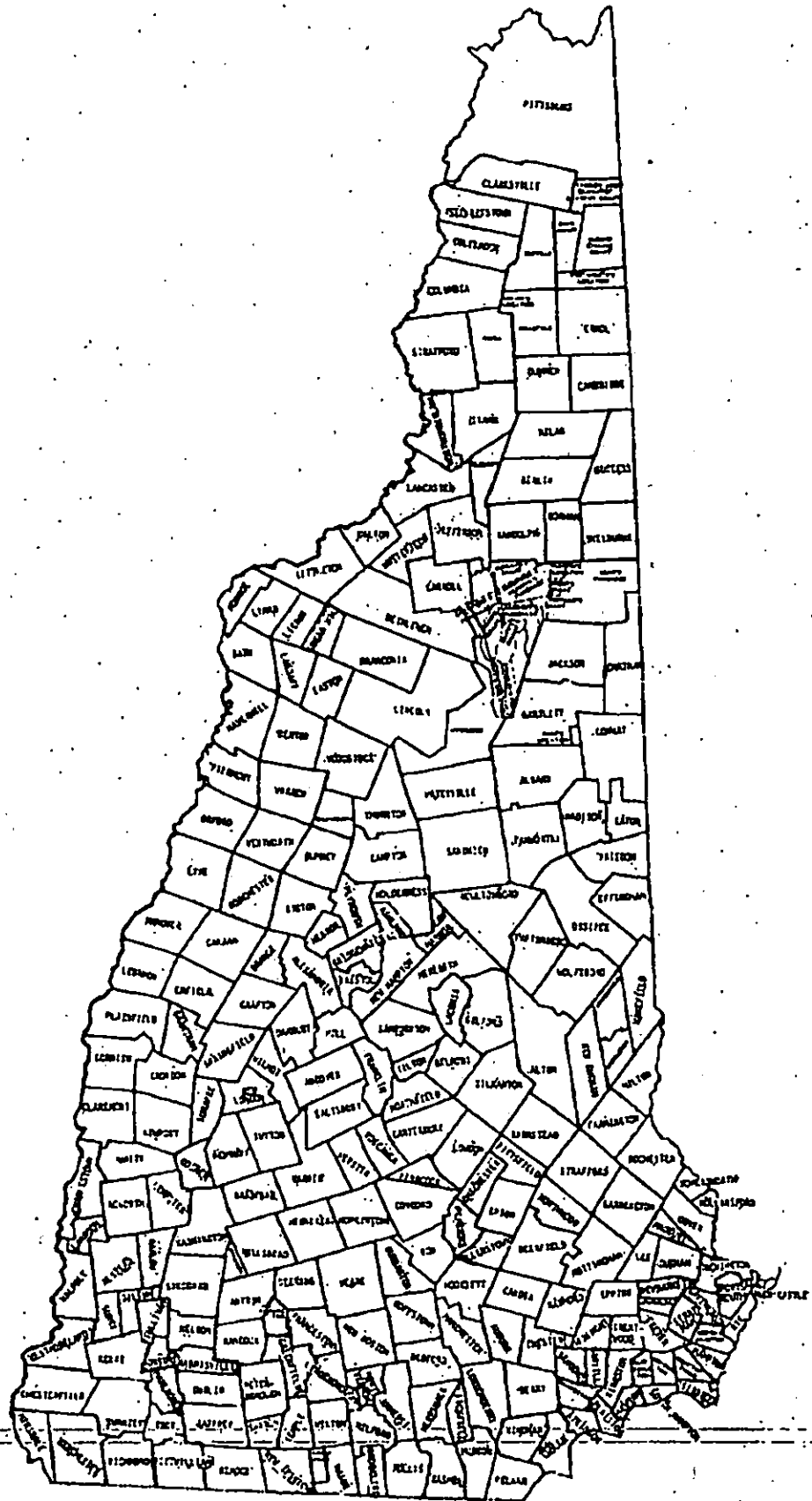
06-56-563010-75380000-072-500577	Grants - Federal	<u>FY 17</u> \$68,294.38
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2. Subject to Governor and Council approval, authorize the Department of Education to include a renewal option on this grant for up to four additional fiscal years.

Explanation

The United States Department of Education legislation allows for five-year 21st Century Community Learning Center grants to serve youth and their families during the out-of-school-time hours. Grants are awarded annually pending the receipt of an Annual Performance Report that indicates sufficient progress and the availability of federal funds.

New Hampshire anticipates a FY 2017 grant award in the amount of \$5,716,698.00 from the United States Department of Education under Title IVB, the 21st Century Community Learning Center program. This program provides grants to inner city and rural schools, community based organizations, youth development agencies and other educational agencies to provide expanded learning opportunities for children, outside of regular school hours in a safe environment. The programs will offer students a broad array of additional services, programs, and activities such as tutorial services, youth development activities, drug and violence prevention, counseling programs, art, music, recreation programs, and technology education. These programs and services are designed to reinforce and complement the regular academic program of the participating students.



Her Excellency, Governor Margaret Wood Hassan
and The Honorable Council

Page Two
May 23, 2016


The program services provided by the grant cited above will be coordinated by Seacoast Youth Services in Seabrook, NH in collaboration with the Seabrook School District. This collaborative approach will serve middle school Seabrook School District youth and their families.

Funding for this grant is provided by the 21st Century Community Learning Center program under Part B of Title IV of the Elementary and Secondary Education Act (ESEA) of 1965, as amended. In January 2016 the New Hampshire Department of Education issued a Request for Proposals (RFP) soliciting proposals for these funds. School Districts, Community Based Organizations, and Extended Day Programs were notified through e-mail about the Bidders' Conference and publication of the online RFP. The projects funded demonstrated that partnerships between school districts and community based organizations have promise to help youth improve academic achievement. Sixteen proposals were received and six were funded based on a peer review process. Peer Reviewers worked in teams of three to rate proposals based on the RFP's matrix criteria. Each team had an experienced 21st Century Community Learning Center member to help steer the review and two other experienced professionals to create well-balanced teams. The twelve peer reviewers were represented by experienced 21st Century Community Learning Center and school day professionals, higher education, Title I, Title II and community based organizations. A list of reviewers and the results are included in this packet.

We request a renewal option for four additional fiscal years since those selected for funding are eligible for five years of funding based on previous successful progress.

This is the first year of a five year grant. In the event Federal Funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,


Virginia M. Barry, Ph.D.
Commissioner

VMB:SBS
Enclosures

GRANT AGREEMENT

The State of New Hampshire and the Grantee hereby
Mutually agree as follows:

GENERAL PROVISIONS

1. Identification and Definitions.

1.1. State Agency Name NH Department of Education		1.2. State Agency Address 101 Pleasant Street Concord, NH 03301	
1.3. Grantee Name Seacoast Youth Services, Seabrook VC# 203944		1.4. Grantee Address 867 Lafayette Road Seabrook, NH 03874	
1.5. Effective Date G&C Approval	1.6. Completion Date 6.30.17	1.7. Audit Date N/A	1.8. Grant Limitation \$ 68,294.38
1.9. Grant Officer for State Agency Suzanne Birdsall-Stone		1.10. State Agency Telephone Number 603-520-6263	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
1.11. Grantee Signature 1 <i>Victor Maloney</i>		1.12. Name & Title of Grantee Signor 1 Victor Maloney, Executive Director	
Grantee Signature 2		Name & Title of Grantee Signor 2	
Grantee Signature 3		Name & Title of Grantee Signor 3	
1.13. Acknowledgment: State of New Hampshire, County of _____, on _____, before the undersigned officer, personally appeared the person identified in block 1.12, known to me (or satisfactorily proven) to be the person whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
1.13.1. Signature of Notary Public or Justice of the Peace (Seal) <i>Forrest E. Carter Jr.</i>			
1.13.2. Name & Title of Notary Public or Justice of the Peace Mr. Forrest E. Carter Jr., Notary Public <i>Forrest E. Carter Jr.</i> Notary Public, State of New Hampshire My Commission Expires August 14, 2018			
1.14. State Agency Signature(s) <i>Virginia M. Barry</i>		1.15. Name & Title of State Agency Signor(s) Virginia M. Barry, Commissioner	
1.16. Approval by Attorney General (Form, Substance and Execution) By: <i>E. McIntyre</i> Assistant Attorney General, On: 6/17/16			
1.17. Approval by Governor and Council By: _____ On: 1/1/16			

2. **SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:36, the Grantee identified in block 1.3 (hereinafter referred to as "the Grantee"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

Grantee Initials *VM*

Page 1 of 3

Date 6/10/16

3. **AREA COVERED.** Except as otherwise specifically provided for herein, the Grantee shall perform the Project in, and with respect to, the State of New Hampshire.
4. **EFFECTIVE DATE/COMPLETION OF PROJECT.**
- 4.1. This Agreement, and all obligations of the parties hereunder, shall become effective on the date in block 1.5 or on the date of approval of this Agreement by the Governor and Council of the State of New Hampshire whichever is later (hereinafter referred to as "the effective date").
- 4.2. Except as otherwise specifically provided herein, the Project, including all reports required by this Agreement, shall be completed in ITS entirety prior to the date in block 1.6 (hereinafter referred to as "the Completion Date").
5. **GRANT AMOUNT; LIMITATION ON AMOUNT; VOUCHERS; PAYMENT.**
- 5.1. The Grant Amount is identified and more particularly described in EXHIBIT B, attached hereto.
- 5.2. The manner of, and schedule of payment shall be as set forth in EXHIBIT B.
- 5.3. In accordance with the provisions set forth in EXHIBIT B, and in consideration of the satisfactory performance of the Project, as determined by the State, and as limited by subparagraph 5.5 of these general provisions, the State shall pay the Grantee the Grant Amount. The State shall withhold from the amount otherwise payable to the Grantee under this subparagraph 5.3 those sums required, or permitted, to be withheld pursuant to N.H. RSA 80:7 through 7-c.
- 5.4. The payment by the State of the Grant amount shall be the only, and the complete payment to the Grantee for all expenses, of whatever nature, incurred by the Grantee in the performance hereof, and shall be the only, and the complete, compensation to the Grantee for the Project. The State shall have no liabilities to the Grantee other than the Grant Amount.
- 5.5. Notwithstanding anything in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made, hereunder exceed the Grant limitation set forth in block 1.8 of these general provisions.
6. **COMPLIANCE BY GRANTEE WITH LAWS AND REGULATIONS.** In connection with the performance of the Project, the Grantee shall comply with all statutes, laws, regulations, and orders of federal, state, county, or municipal authorities which shall impose any obligations or duty upon the Grantee, including the acquisition of any and all necessary permits.
7. **RECORDS AND ACCOUNTS.**
- 7.1. Between the Effective Date and the date three (3) years after the Completion Date the Grantee shall keep detailed accounts of all expenses incurred in connection with the Project, including, but not limited to, costs of administration, transportation, insurance, telephone calls, and clerical materials and services. Such accounts shall be supported by receipts, invoices, bills and other similar documents.
- 7.2. Between the Effective Date and the date three (3) years after the Completion Date, at any time during the Grantee's normal business hours, and as often as the State shall demand, the Grantee shall make available to the State all records pertaining to matters covered by this Agreement. The Grantee shall permit the State to audit, examine, and reproduce such records, and to make audits of all contracts, invoices, materials, payrolls, records of personnel, data (as that term is hereinafter defined), and other information relating to all matters covered by this Agreement. As used in this paragraph, "Grantee" includes all persons, natural or fictional, affiliated with, controlled by, or under common ownership with, the entity identified as the Grantee in block 1.3 of these general provisions.
8. **PERSONNEL.**
- 8.1. The Grantee shall, at its own expense, provide all personnel necessary to perform the Project. The Grantee warrants that all personnel engaged in the Project shall be qualified to perform such Project, and shall be properly licensed and authorized to perform such Project under all applicable laws.
- 8.2. The Grantee shall not hire, and it shall not permit any subcontractor, subcontract, or other person, firm or corporation with whom it is engaged in a combined effort to perform the Project, to hire any person who has a contractual relationship with the State, or who is a State officer or employee, elected or appointed.
- 8.3. The Grant Officer shall be the representative of the State hereunder. In the event of any dispute hereunder, the interpretation of this Agreement by the Grant Officer, and his/her decision on any dispute, shall be final.
9. **DATA RETENTION OF DATA ACCESS.**
- 9.1. As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations,

computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.

9.2. Between the Effective Date and the Completion Date the Grantee shall grant to the State, or any person designated by it, unrestricted access to all data for examination, duplication, publication, translation, sale, disposal, or for any other purpose whatsoever.

9.3. No data shall be subject to copyright in the United States or any other country by anyone other than the State.

9.4. On and after the Effective Date all data, and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason, whichever shall first occur.

9.5. The State, and anyone it shall designate, shall have unrestricted authority to publish, disclose, distribute and otherwise use, in whole or in part, all data.

10. **CONDITIONAL NATURE OF AGREEMENT.** Notwithstanding anything in this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability or continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available or appropriated funds. In the event of a reduction or termination of those funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Grantee notice of such termination.

11. **EVENT OF DEFAULT; REMEDIES.**

11.1. Any one or more of the following acts or omissions of the Grantee shall constitute an event of default hereunder (hereinafter referred to as "Events of Default"):

11.1.1 Failure to perform the Project satisfactorily or on schedule; or

11.1.2 Failure to submit any report required hereunder; or

11.1.3 Failure to maintain, or permit access to, the records required hereunder; or

11.1.4 Failure to perform any of the other covenants and conditions of this Agreement.

11.2. Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

11.2.1 Give the Grantee a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Grantee notice of termination; and

11.2.2 Give the Grantee a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the Grant Amount which would otherwise accrue to the Grantee during the period from the date of such notice until such time as the State determines that the Grantee has cured the Event of Default shall never be paid to the Grantee; and

11.2.3 Set off against any other obligation the State may owe to the Grantee any damages the State suffers by reason of any Event of Default; and

11.2.4 Treat the agreement as breached and pursue any of its remedies at law or in equity, or both.

12. **TERMINATION.**

12.1. In the event of any early termination of this Agreement for any reason other than the completion of the Project, the Grantee shall deliver to the Grant Officer, not later than fifteen (15) days after the date of termination, a report (hereinafter referred to as the "Termination Report") describing in detail all Project Work performed, and the Grant Amount earned, to and including the date of termination.

12.2. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall entitle the Grantee to receive that portion of the Grant amount earned to and including the date of termination.

12.3. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall in no event relieve the Grantee from any and all liability for damages sustained or incurred by the State as a result of the Grantee's breach of its obligations hereunder.

13. Notwithstanding anything in this Agreement to the contrary, either the State or, except where notice of default has been given to the Grantee hereunder, the Grantee, may terminate this Agreement without cause upon thirty (30) days written notice.

CONFLICT OF INTEREST. No officer, member or employee of the Grantee, and no representative, officer or employee of the State of New Hampshire or of the governing body of the locality or localities in which the Project is to be performed, who exercises any functions or responsibilities in the review or

approval of the undertaking or carrying out of such Project, shall participate in any decision relating to this Agreement which affects his or her personal interest or the interest of any corporation, partnership, or association in which he or she is directly or indirectly interested, nor shall he or she have any personal or pecuniary interest, direct or indirect, in this Agreement or the proceeds thereof.

14. **GRANTEE'S RELATION TO THE STATE.** In the performance of this Agreement the Grantee, its employees, and any subcontractor or subgrantee of the Grantee are in all respects independent contractors, and are neither agents nor employees of the State. Neither the Grantee nor any of its officers, employees, agents, members, subcontractors or subgrantees, shall have authority to bind the State nor are they entitled to any of the benefits, workmen's compensation or emoluments provided by the State to its employees.

15. **ASSIGNMENT AND SUBCONTRACTS.** The Grantee shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the State. None of the Project Work shall be subcontracted or subgranted by the Grantee other than as set forth in Exhibit A without the prior written consent of the State.

16. **INDEMNIFICATION.** The Grantee shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based on, resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Grantee or Subcontractor, or subgrantee or other agent of the Grantee. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant shall survive the termination of this agreement.

17. **INSURANCE AND BOND.**

17.1 The Grantee shall, at its own expense, obtain and maintain in force, or shall require any subcontractor, subgrantee or assignee performing Project work to obtain and maintain in force, both for the benefit of the State, the following insurance:

17.1.2 Statutory workmen's compensation and employees liability insurance for all employees engaged in the performance of the Project, and Comprehensive public liability insurance against all claims of bodily injuries, death or property damage, in amounts not less than \$2,000,000 for bodily injury or death any one incident, and \$500,000 for property damage in any one incident; and

The policies described in subparagraph 17.1 of this paragraph shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire. Each policy shall contain a clause prohibiting cancellation or modification of the policy earlier than ten (10) days after written notice thereof has been received by the State.

18. **WAIVER OF BREACH.** No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event, or any subsequent Event. No express waiver of any Event of Default shall be deemed a waiver of any provisions hereof. No such failure of waiver shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other default on the part of the Grantee.

19. **NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses first above given.

20. **AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Council of the State of New Hampshire.

21. **CONSTRUCTION OF AGREEMENT AND TERMS.** This Agreement shall be construed in accordance with the law of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assignees. The captions and contents of the "subject" blank are used only as a matter of convenience, and are not to be considered a part of this Agreement or to be used in determining the intent of the parties hereto.

22. **THIRD PARTIES.** The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

23. **ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings relating hereto.

24. **SPECIAL PROVISIONS.** The additional provisions set forth in Exhibit C hereto are incorporated as part of this agreement.

EXHIBIT A
SCOPE OF WORK

Seacoast Youth Services (SYS) and Seabrook Middle School (SMS), together with other community partners, will implement the Seabrook Adventure Zone (SAZ), a NH 21st CCLC afterschool program. SAZ will provide comprehensive after-school (17.5 hours a week) and summer programming (six full weeks) that focus on improving and supporting academic achievement, guiding and nurturing positive youth development, strengthening family engagement, literacy, and healthy living initiatives by offering a variety of programming, events, and resources built on the principles of Experiential Learning and The Circle of Courage. SAZ encourages all students to participate and facilitates outreach to engage students who are identified at-risk and historically in greatest need of after-school programming, but least likely to participate.

The program goals are to improve academic performance, guide and support positive youth development, and encourage family engagement with literacy and healthy living initiatives. The Community Advisory Board works closely with the program director and will guide SAZ in sustainability planning and actively nurtures collaborative relationships between SAZ, SMS, community partners, families, and the Seabrook community.

Contractor Initials um
Date 12/10/16

Exhibit B

Budget

Expenditure Line Items	FY 17 July 1, 2016-June 30, 2017
Salaries and wages (directly related to service)	54,309.70
Employee Benefits	8,816.66
Contract Services (directly related to programming)	600.00
Supplies	2,067.84
Subtotal	65,794.20
Indirect Cost (not to exceed 8%)	2,500.18
Project Total	68,294.38

Limitation on Price: Upon mutual agreement between the 21st CCLC State Coordinator and the grantee, line items in this budget may be adjusted but in no case shall the total budget exceed the price limitation of \$68,294.38.

Method of Payment: Payment is to be made monthly on the basis of invoices which are supported by a summary of activities that have taken place in accordance with the terms of the approved grant proposal, along with a detailed listing of expenses incurred. If otherwise correct and acceptable, payment will be made for 100% of the expenditures listed. Invoices and reports shall be submitted to the 21st CCLC State Coordinator.

Contractor Initials um

Date 6/10/16

EXHIBIT C

SPECIAL PROVISIONS

21st Century Community Learning Center grants are eligible for five years of funding based on previous successful progress and the availability of federal funds. Based on this we are requesting a renewal option for four additional fiscal years.

Contractor Initials flm
Date 6/10/16

**21st Century Community Learning Center Program
2016 Competition Results**

21st Century Community Learning Center Applicant	Complete Application (5)	Priority Points (5)	Need (10)	Program Design (25)	Resources (15)	Management (15)	Evaluation (15)	Budget (15)	TOTAL (105)	Award Amount
Concord School District	5.00	5.00	9.67	22.67	12.67	14.33	14.00	11.67	95.01	\$ 230,000.00
Manchester School District	5.00	5.00	7.67	22.00	10.67	13.00	11.33	11.67	86.34	\$ 243,750.00
Seacoast Youth Services	5.00	0.00	8.00	17.67	15.00	13.67	13.67	13.00	86.01	\$ 68,294.38
Hillsboro-Deering School District	5.00	0.00	6.00	21.33	12.67	13.33	11.67	12.00	82.00	\$ 88,750.00
Newfound Area School District	5.00	0.00	7.33	16.67	12.67	11.67	11.00	10.00	74.34	\$ 52,650.00
Rumney School District	5.00	0.00	8.67	19.00	11.67	10.67	10.33	9.00	74.34	\$ 135,000.00
Rochester School District	4.00	0.00	9.67	17.33	11.00	10.33	9.67	9.67	71.67	
Monadnock Regional School District	4.00	0.00	7.33	17.00	13.33	9.67	10.00	10.00	71.33	
Raymond School District	5.00	0.00	6.00	19.67	11.67	10.67	7.67	10.33	71.01	
Groveton	5.00	0.00	8.00	15.00	11.67	9.33	9.67	11.33	70.00	
Jaffrey Rindge Cooperative School	4.00	0.00	6.33	16.33	12.67	11.67	9.00	9.33	69.33	
Franklin/Hill	4.00	5.00	9.00	23.00	14.67	11.67	0.00	0.00	67.34	
Salem, Boys & Girls Club of Greater	5.00	0.00	4.67	19.00	11.00	7.00	11.33	3.67	61.67	
Nashua Title I	4.00	0.00	8.67	20.67	14.67	8.33	0.00	0.00	56.34	
Conway School District's Project	5.00	0.00	6.00	13.00	7.33	9.33	7.33	7.00	54.99	

**New Hampshire Department of Education
21st Century Community Learning Center Program (CCLC)
2016 Competition Reviewers**

Elisa Almonte	21st CCLC Director, RI
Nancy Boyer	Director of Research & Evaluation, FIRST [®] , US FIRST
Richard Felstman	Title I Consultant, NH Department of Education
Ashley Frame	Title II Consultant, NH Department of Education
Ashlee Fye	NH Family Ties Statewide Coordinator, Community Bridges
Maureen Jackman	21st CCLC Director, Somersworth School District
Pam Lane	Family Services Specialist, Southern NH Services
Jeannie Lapierre	21st CCLC Director, RI
Katy Miller	21st CCLC Director, Vermont
Laurie Melanson	Principal, Warren School District
Ellie Papazoglou	Literacy Consultant & Teaching Lecturer UNH & PSU
Mary Schuh	Director of Development and Consumer Affairs IOD/UNH

EXHIBIT B

PROJECT APPLICATION BUDGET AND DESIGNATION OF APPLICATION MANAGER/ PROJECT MANAGER

OHA FORM 1

5/2005

Federal/State Program Title: 21st Century Community Learning Centers

PROJECT #

CHANGE #

PAGE 1 of

FROM: Seacoast Youth Services
PO Box 1381
Seabrook, NH 03874TO: Suzanne Birdsall-Stone
NH Department of Education
State Office Park South
101 Pleasant Street
Concord, New Hampshire 03301-3860

TYPE OF CHANGE	
	BUDGET
	FUND AUTH
	FISCAL AGENT
	OTHER

SAU/RA:

Proposed Project Title: Seabrook Adventure ZoneProject Period: 7/1/2016 to: 6/30/2017

The following information is required for all projects

PROJECT MANAGER:

NAME: Vic MaloneyADDRESS: 867 Lafayette Rd., Seabrook, NH 03874E-MAIL ADDRESS: vic@seacoastyouthservices.orgTITLE: Executive DirectorTELEPHONE: (603) 474-3332FAX: (603) 372-0822

FINANCIAL CONTACT:

NAME: Vic MaloneyE-MAIL ADDRESS: vic@seacoastyouthservices.orgTELEPHONE: (603) 474-3332FAX: (603) 372-0822

The above named person is designated as Project Manager. I hold the Project Manager responsible for implementing the project in accordance with the approved project, for remaining within the budget limitations, for ensuring that only authorized items required to implement the project are charged to the project, and for initiating request to amend the approved project. No services or supplies will be ordered or charged to the project without written approval of the Project Manager.

THE APPLICANT AGENCY AGREES AND CERTIFIES THAT:

- This grant will be administered in accordance with the applicable provisions of the following federal laws and regulations:
 - Education Department General Administrative Regulations (EDGAR) in Title 34 Code of Federal Regulations (CFR), Parts 74, 75, 76, 77, 79, 80, 82, 85, 86; Civil Rights Regulations in 34 CFR, Parts 100 through 106, and specific program laws and regulations.
 - Any amendments in effect on the date of this grant award or to become effective during the project period are incorporated.
- Grant accounting and financial reporting will be in accordance with New Hampshire Department of Education "Federal Funds Financial Management Manual".
- Authorized funds will be obligated and expended only for the purpose described in the approved project proposal and budget.
- Audits will be in compliance with the Single Audit Act Amendments of 1996 (P.L. 104-156) and U.S. Office of Management and Budget (OMB) Circulars.
- Project approval, if given, will be on the condition that full funding of the Approved Budget and payment by the grantor are contingent upon the availability of a Federal Grant and Appropriation Authority approved by the General Court of New Hampshire or the Governor and Council of this State for this purpose. Neither the State nor the Department of Education shall be liable for payments under this grant except from such funds.

FISCAL AGENT - MAKE CHECKS PAYABLE TO:

Seacoast Youth Services
The Provident Bank
003176 211374020 27 728318

APPROVED INDIRECT COST RATE: Not to exceed 8% %

Vic Maloney

PRINT NAME AND TITLE of SAU SUPERINTENDENT OF SCHOOLS
or RACHIEF FINANCIAL OFFICERSIGNATURE SAU SUPERINTENDENT OF SCHOOLS
or RACHIEF FINANCIAL OFFICER

DATE

5/26/16

BUDGET SUMMARY BY OBJECT AND FUNCTION CODES

(See NH Financial Accounting Handbook 1999 Edition pages A-38 through A-75)

OBJECT CODE	1000 INSTRUCTION	2000 SUPPORT	2 ADMIN			5000 INDIRECT	TOTAL
100		54,309.70				COST BELOW CANNOT INCLUDE AUDIT FEES WHEN A PROJECT LINE ITEM INCLUDES AUDIT FEES	54,309.70
200		8,816.66					8,816.66
300	600.00						600.00
400							-
500							-
600	2,067.84						2,067.84
700							-
800						2,500.18	-
900							-
TOTALS	2,667.84	63,126.36				2,500.18	68,294.38

DETAIL OF PROPOSED BUDGET

FUNCTION CODE	OBJECT CODE	BUDGET AMOUNT	DETAILED INFORMATION	FUNCTION CODE	OBJECT CODE	BUDGET AMOUNT	DETAILED INFORMATION
2100	100	54,309.70	Salary				
2100	200	2,640.12	FICA				
2100	200	1,338.92	Workmen's Comp				
2100	200	3,592.99	Medical				
2100	200	1,244.63	Unemployment 1.98				
1100	320	600.00	Contracted Serv.				
1000	610	2,067.84	General Supplies				
5220	930	2,500.18	Indirect Cost				
SUB TOTAL/TOTAL		68,294.38	//////////	SUB TOTAL/TOTAL		-	//////////

WMA 5/24/14

CERTIFICATE OF VOTE

I, Janine Richards, do hereby certify that:
(Name of the elected Officer of the Agency; cannot be contract signatory)

1. I am a duly elected Officer of Seacoast Youth Services
(Agency Name)

2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of
the Agency duly held on Feb. 2nd, 2016
(Date)

RESOLVED: That the Executive Director
(Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to
execute any and all documents, agreements and other instruments, and any amendments, revisions,
or modifications thereto, as he/she may deem necessary, desirable or appropriate.

3. The forgoing resolutions have not been amended or revoked, and remain in full force and effect as of
the 10th day of June, 2016.
(Date Contract Signed)

4. Victor Maloney is the duly elected Executive Director
(Name of Contract Signatory) (Title of Contract Signatory)

of the Agency.

Janine Richards
(Signature of the Elected Officer)

STATE OF NEW HAMPSHIRE

County of Rockingham

The forgoing instrument was acknowledged before me this 10th day of June, 2016.

By Janine Richards
(Name of Elected Officer of the Agency)

Forrest E. Carter Jr.
(Notary Public/Justice of the Peace)

(NOTARY SEAL)

Commission Expires: Aug. 14th, 2018

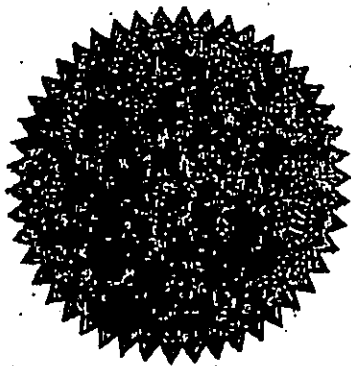
Forrest E. Carter Jr.
Notary Public, State of New Hampshire
My Commission Expires August 14, 2018

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Seacoast Youth Services is a New Hampshire nonprofit corporation formed December 19, 2001. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.

In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 21st day of April A.D. 2016.



A handwritten signature in dark ink, appearing to read "Wm Gardner", written over a horizontal line.

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/25/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Tobey & Merrill Insurance 20 High Street Hampton NH 03842-2214	CONTACT Edward Jackson PHONE (603) 926-7655 FAX (603) 926-2133 E-MAIL edward@tobeymerrill.com INSURERS AFFORDING COVERAGE INSURER 1: Allstate USA INSURER 2: Ohio Security INSURER 3: Technology Insurance INSURER 4: Hartford INSURER 5: INSURER 6:
INSURED Seacoast Youth Services, Inc PO Box 1381 Seabrook NH 03874	NAIC # 24082

COVERAGES CERTIFICATE NUMBER: CL1652504326 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

USER LTR	TYPE OF INSURANCE	ADDRESS (INTL. Y/N)	POLICY NO.	POLICY EFFECT DATE	POLICY EXPIRATION DATE	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. ACT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	X		10/17/2015	10/17/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (if applicable) \$ MED EXP (any and person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ Defense of Libel/Sland \$ 10,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			8/11/2015	8/11/2016	COMBINED SINGLE LIMIT (if endorsed) \$ 1,000,000 BODILY INJURY (per person) \$ BODILY INJURY (per accident) \$ PROPERTY DAMAGE (per accident) \$ Business Auto Endorsements \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED. RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE: <input checked="" type="checkbox"/> OTHER
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		2/27/2016	2/27/2017	E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Professional Liability DEDUCTIBLE \$ 1,000			9/10/2015	10/17/2016	DIRECTORS & OFFICERS \$ 1,000,000 EMPLOY PRACTICES LIAB \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER New Hampshire Department of Education 10 Pleasant Street Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Dean Merrill CIC/LSA
--	---

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11:47 AM
03/13/16
Cash Basis

Seacoast Youth Services
Profit & Loss
January through December 2016

	Jan - Dec 16
Ordinary Income/Expense	
Income	
Gala 2016	30,843.40
School Funding afterschool	8,250.00
Poker Room	17,388.84
Contribution Individual Business	3,408.85
mental health Income	91,734.45
Foundation Income	3,772.41
Program Income	
Grants	
NH BDAS	33,215.20
21st century	25,689.30
Total Grants	58,904.50
Transportation Income	11,390.00
SNHS food	85.02
Program Income - Other	900.00
Total Program Income	71,279.52
Town Funding	13,843.83
Uncategorized Income	
dependent Ins	375.00
Ins Adj	4,477.02
Total Uncategorized Income	4,852.02
Total Income	243,363.13
Gross Profit	243,363.13
Expense	
printing marketing equipment	2,106.49
Admin & Overhead Expenses	
Supplies	
Office	1,060.00
Postage and Delivery	84.00
Total Supplies	1,134.00
Admin & Overhead Expenses - Other	665.10
Total Admin & Overhead Expenses	1,719.10
void	0.00
Automobile Expense	
Purchase vehicle	1,238.71
Gas	1,739.86
Repairs	497.00
Total Automobile Expense	3,475.57
Fundraising	8,598.73
Insurance	
Professional Liability	1,697.20
Health Benefits	18,738.75
Auto	2,252.27
Worker's Comp	804.00
Total Insurance	23,290.22
Occupancy Expenses	
maintenance	250.19
Rent	4,212.00
Utilities	
Gas	2,079.16
Phone/Internet/TV	900.40
Electric	1,367.62
Total Utilities	4,347.37

11:47 AM

05/13/16

Cash Basis

Seacoast Youth Services

Profit & Loss

January through December 2016

	Jan - Dec 16
Occupancy Expenses - Other	610.00
Total Occupancy Expenses	9,318.58
Payroll Expenses	
Provident 941 EFT Payment	34,945.77
Wages & Salaries	114,391.25
Payroll Service	654.40
Total Payroll Expenses	149,691.42
Professional Fees	
Consulting	825.00
Professional Fees - Other	335.70
Total Professional Fees	1,160.70
Program Expense	
cap contracted	158.58
Training/staff Development	
Training/ Staff Development	2,300.00
Total Training/staff Development	2,300.00
SAZ Contracted	210.00
Program Evaluation	130.08
Transportation	1,113.53
Program Supplies	8,485.46
Program Expense - Other	182.28
Total Program Expense	12,557.91
Total Expense	212,119.70
Net Ordinary Income	31,283.43
Net Income	31,283.43

Seacoast Youth Services Mission Statement

January 2016

Seacoast Youth Services supports young people and their families in coastal New Hampshire communities. By teaching and mentoring healthy communication and life skills, Seacoast Youth Services empowers those we serve to make positive choices for happier, healthier, and brighter futures.

We believe that effective support begins with direct engagement. That's why we connect with the youth where they learn and socialize in addition to offering individual and group counseling, outreach, and educational programs at our facility. Our goal is to reach all those who can benefit from our programs, including youth and family members who typically do not receive services.

Seacoast Youth Services Board of Directors
May 2016

Janine L. Richards/Chairperson
Outreach Coordinator-SAU 90

Erica Ethier/Development-Fundraising
Branch Manager
Provident Bank

Dawn Emerick/Secretary
Taurus Marketing

Marcia Gloddy/Program Committee
Office Manager-The Masiello Group

Derek Scialdone/Treasurer
Branch Manager
The Provident Bank

Carol Bostic/ Fundraising
Health Coach and Certified Hypnotist

Elaine Ahearn/ Fundraising-Development
State Representative

John McCarthy/ Marketing
Realtor-The Masiello Group

Jerome Fuller Jr./ Marketing
General Manager
Staples

Attorney Alan Ganz/ Marketing
Ganz Law Office

Board positions are non-compensatory

2016-2017

SAZ Position Salaries and Benefits

Program Director: Forrest E Carter Jr.

Salary: 38,630.71

Benefits: 7,395.65

Site-Coordinator: Brittney Gentile

Salary: 15,678.99

Benefits: 1,421.01

Salary Total: \$54,309.70

Benefits Total: \$8,816.66

Forrest E. Carter Jr.

CAREER OBJECTIVE Obtain a position working with youth, adolescents, adults, and seniors focusing on leadership and intertwining recreation, community, the arts, and socially beneficial activities for the purpose of creating a more positive and rewarding life experience for those involved with the program.

EDUCATION

Plymouth State College
Masters in Education: Physical Education, Adventure Education Concentration
May 16, 2014

Plymouth, NH

University Of Massachusetts Lowell
Bachelors in Liberal Arts: Psychology
(Spanish Concentration Requirement)
February 15, 2009

Lowell, MA

CERTIFICATIONS

Certified Park & Recreation Executive
January 2015 - Current

Certified Park & Recreation Professional
January 2015 - Current

American Red Cross 1st Aid/CPR/AED Certified Instructor
2010 - Current

NH Afterschool Ambassador, *Afterschool Alliance*
2014 - Current

4-H Certified Leader
2011 - Current

Afterschool Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, *ACROSS NH DHHS*
2013 - Current

EXPERIENCE

2011 - Current

Program Director, Seabrook Adventure Zone (21st Century CCLC)
Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874
Responsible for the program design, management, implementation, and evaluation of an academic, recreational, and positive social development after school program with foundations based on both the 4-H values and Project Adventure paradigm of leadership.

- *Sustainability & Revenue Development* with the successful writing of the 21st CCLC, Best Buy, Hannaford, CLIF, and Exeter Rental Orbits and creating strong community partnerships that have sustained and expanded the consistently growing program.
- *Community Advisory Board Leadership* during monthly/bi-monthly meetings and maintaining effective collaboration with partners, community organizations, and board members.
- *Summer Planning Team* responsible for organizing and creating the Summer Conference for all 21st Century programs in New Hampshire.
- *Internship Supervisor* for High School Extended Learning Opportunities students (ELO's) and College Interns from the University of New Hampshire, Northern Essex Community College, and Southern New Hampshire University.

- *Project Adventure Certified (136 Hours)* (incorporating team building, leadership skill cultivation, self-esteem boosting, and conflict resolution).
 - *Evaluation* of program goals by using the on-line and data base programs of Youth Services, Caysa, J4See, and Performance Pathways, as well as satisfaction surveys for youth, parents, and community leaders.
 - *Budget* management of a \$200,000 + budget for all program needs, including staff salary, professional development, and all program expenses associated with the Seabrook Adventure Zone.
 - *Human Resource Management* responsible for hiring, evaluating, and managing all SAZ personnel, volunteers, and community partners.
- 2009 – Current Youth Program Director, Seacoast Youth Services (non profit)
867 Lafayette Rd., Seabrook, NH 03874
Responsible for implementation of after school, weekend, evening, and summer programming for at-risk middle and high school aged youth and adolescents in the New Hampshire seacoast area.
- *Outreach* in seacoast area middle schools and high schools including classroom presentations of programs, faculty integration and involvement, and parent and family involvement and awareness.
 - *Project Alert Certified* to educate youth and adolescents in alcohol and substance abuse with interactive and integrative lessons.
 - *Overnight Adventure Trips* consisting of four two day overnights with 24 adolescents and 3 staff, project adventure team building and leadership activities, high adventure, and structured itinerary.
 - *Grant Writing* skills successful in obtaining several major grants, including the \$500,000 21st CCLC grant that supports the Seabrook Adventure Zone.
- 2013 – Current Afterschool Master Professional Workshop Trainer, Faculty, Individual Mentor, and Program Consultant, ACROSS NH DHS
Develops, coordinates, and facilitates workshops for all audiences with a focus on Project Adventure, Curriculum Development, Staff Communication, and Positive Youth Development content and design throughout the state of New Hampshire.
- 2014 – Current Adjunct Faculty, Manchester Community College
1066 Front St, Manchester, NH
Adjunct faculty professor responsible for teaching Introduction to School Age Programming and School Age Environment & Curriculum to undergraduate students.
- 2008-2010 Coordinator, Teen Leadership Adventures Program (non profit)
Seabrook Community Center, Seabrook, NH 03874
Designed, proposed, and implemented the program successfully.
Responsibilities include offering adventure based activities, free tutoring, and leadership trainings to adolescents in the town of Seabrook, NH at low, subsidized costs. Other duties include volunteer management, allocating program funding, leadership public training, and organizing adventure trips.
- *Volunteer Management* and scheduling for 35 volunteers that assist various program activities, including volunteer tutors, chaperones, and leadership training instructors.
 - *Leadership Trainings* held monthly focusing on sculpting adolescents into strong, independent future leaders by offering lecture and service learning opportunities of selected topics. Training topics have included organization skills, games and modifications workshop, 1, 2, 3 Magic, and several diversity awareness trainings.
 - *Donations/Contributions of Funding* were allocated through direct contacts and networking within and outside of the community. Official letters, interviews, and sponsorships were attained by numerous methods, including e-mail, letters, telephone, and Internet.
- 2003 – 2009 Site-Director, Seabrook YMCA School's Out Program (non profit)
Southern District: YMCA – Camp Lincoln, Kingston, NH 03848
Responsibilities include offering a quality after school program for children grades K-6, organizing and implementing activities, tutoring children with homework, supervising and managing staff members and pay roll sheets, as well as parent correspondence.

VOLUNTEER/COMMUNITY SERVICE

2011-2014	6 Flags Read 2 Succeed Event w/SAZ & SMS
2011-2014	"Teens For Jeans" with Aeropostale
2010-2014	United Way Day of Caring
2014	Arts & Literacy Festival, w/CLIF/SAZ/SMS
2005-2009, 2013-2014	Holiday Fundraiser for Community Action in Seabrook, NH
2007 - 2014	SPCA Fundraiser and Food Drive
2013	SAZ & SMS Challenge Course Community Clean-Up
2013	SAZ & SMS Outdoor Classroom w/Seabrook PTO
2009-2013	Servapalooza Volunteer Day
2000-2013	New Hampshire Food Drive
2007-2011	Care Package Fundraiser for US Army
2007&2011	"Walk-the-Walk" Event In Seabrook, NH, Assisted Organization of event

MEMBERSHIPS/AFFILIATIONS

Seabrook Recreation Commission Member At Large
Association of Experiential Education Member
New Hampshire Afterschool Network (NHAN) Leadership Team

TECHNOLOGY

Microsoft Office Power point, Word, Excel, Publisher, Adobe Workshop & Illustrator,
Print Shop, iPhoto, iMovie, Movie Maker, SPSS, Black Board, i4SSE, Performance
Pathways, CAYEN database system

Brittney Gentile

CAREER OBJECTIVE Obtain a position working in the field of youth development, afterschool programming, and education.

EDUCATION

Northern Essex Community College
Associates In Early Childhood Education
*Current

Haverhill, MA

CERTIFICATIONS

American Red Cross 1st Aid/CPR/AED Certified
2013 - Current

ACROSS NH Professional Activity Hours: 9.5

EXPERIENCE

2014 - Current

Site-Coordinator, Seabrook Adventure Zone (21st Century CCLC)
Collaboration between Seabrook Middle School, Seacoast Youth Services, and other Community Partners in Seabrook, NH 03874
Responsible for program design, management, implementation, and evaluation of an academic and positive social development after school program with foundations based on both the 4-H values and Project Adventure paradigm of leadership.

- *Data Entry* of crucial and confidential information for youth and staff in the Seabrook Adventure Zone, including attendance, survey results, evaluation materials, and demographics.
- *Curriculum Design & Activity Development* for after school and weekend programming for 120 middle school youth throughout the academic year.
- *Evaluation* of program goals by using the on-line and data base programs of Youth Services, 14See, and Performance Pathways.
- *Financial Reporting* of budgeted items including snack, supplies, and personnel salary.
- *Human Resource Management* responsible for evaluating and managing all SAZ personnel, volunteers, and community partners.

2005 - Current

Group Leader, Seabrook Community Center
311 Lafayette Rd., Seabrook, NH 03874
Responsible for implementation of summer programming for youth Preschool - 5th Grade in Seabrook, New Hampshire.

- *Summer Program Director*
- *4-H Certified Leader.*
- *American Red Cross 1st Aid & CPR w/AED Certified*

VOLUNTEER/COMMUNITY SERVICE

2014	6 Flags Read 2 Succeed Event w/SAZ & SMS
2013-2014	"Teens For Teens" with Aeropostale
2013	SAZ & SMS Challenge Course Community Clean-Up
2010	Scotly Lago Olympic Event
2013-2014	SPCA Fundraiser and Food Drive
2013-2014	Toys For Tots

TECHNOLOGY

Power point, Print Shop, Digital Photos, IPhoto, Microsoft Word, Apple Works, Microsoft Excel, Microsoft Office Publisher, Quick Books, Adobe Workshop

REFERENCES

1. Forrest E Carter Jr., Program Director, Seabrook Adventure Zone
PO Box 873, Seabrook, NH 03874
(603) 997-1909
forrest@seacoastyouthservices.org
2. Cassandra Carter, Program Director, Seabrook Recreation Department
26 Washington St., Seabrook, NH 03874
(603) 997-1749
ccarter@seabrooknh.org

