

Return of Organization Exempt from Income Tax

2001

Under Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning 10/01, 2001, and ending 9/30, 2002

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return
 - Amended return
 - Application pending

Please use IRS label or print or type. See specific instructions.

TIN MOUNTAIN CONSERVATION CENTER, INC
P O BOX 1170
CONWAY, NH 03818

D Employer Identification Number
02-0353541

E Telephone number
603-447-6991

F Accounting method: Cash Accrual
 Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

- H and I are not applicable to Section 527 organizations
- H (a)** Is this a group return for affiliates? Yes No
- H (b)** If yes enter number of affiliates _____
- H (c)** Are all affiliates included? Yes No
(If no attach a list. See instructions.)
- H (d)** Is this a separate return filed by an organization covered by a group ruling? Yes No
- I** Enter 4 digit group GEN _____
- M** Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

G Web site N/A

J Organization type (check only one): 501(c) 3 (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 517,504

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see instructions)

1	Contributions, gifts, grants, and similar amounts received			
	a	Direct public support	1a	186,197
	b	Indirect public support	1b	
	c	Government contributions (grants)	1c	
d	Total (add lines 1a through 1c) (cash \$ <u>186,197</u> noncash \$ _____)	1d		186,197
2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	124,711
3	Membership dues and assessments		3	
4	Interest on savings and temporary cash investments		4	5,315
5	Dividends and interest from securities		5	
6a	Gross rents		6a	3,900
	b	Less rental expenses	6b	
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	3,900
7	Other investment income (describe <u>SEE STATEMENT 1</u>)		7	-31,362
8a	Gross amount from sales of assets other than inventory		(A) Securities	(B) Other
	b	Less cost or other basis and sales expenses	8a	
	c	Gain or (loss) (attach schedule)	8b	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	
8d			8d	
9	Special events and activities (attach schedule)			
9a	Gross revenue (not including \$ _____ of contributions reported on line 1a)		9a	228,518
	b	Less direct expenses other than fundraising expenses	9b	83,892
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	144,626
10a	Gross sales of inventory less returns and allowances		10a	225
	b	Less cost of goods sold	10b	3,235
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	-3,010
11	Other revenue (from Part VII, line 103)		11	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	430,377
13	Program services (from line 44, column (B))		13	219,214
14	Management and general (from line 44, column (C))		14	131,451
15	Fundraising (from line 44, column (D))		15	22,352
16	Payments to affiliates (attach schedule)		16	
17	Total expenses (add lines 16 and 44, column (A))		17	373,017
18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	57,360
19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	563,948
20	Other changes in net assets or fund balances (attach explanation)		20	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	621,308

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Part II - Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) (cash \$ _____ non cash \$ _____)	22			
23 Specific assistance to individuals (att sch)	23			
24 Benefits paid to or for members (att sch)	24			
25 Compensation of officers, directors, etc	25			
26 Other salaries and wages	26	191,110	118,282	64,627
27 Pension plan contributions	27			8,201
28 Other employee benefits	28	26,952	16,681	9,114
29 Payroll taxes	29	15,100	9,350	5,122
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	10,020	7,724	2,266
34 Telephone	34	3,455	2,073	864
35 Postage and shipping	35	5,889	2,983	1,503
36 Occupancy	36	7,428	7,057	371
37 Equipment rental and maintenance	37	3,933	3,933	
38 Printing and publications	38	13,664	10,456	
39 Travel	39	7,318	5,995	1,321
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42	6,674	220	6,454
43 Other expenses not covered above (itemize)				
a SEE STATEMENT 4	43a	81,474	34,460	39,809
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22-43) Organizations completing columns (B) - (D), carry these totals to lines 13-15	44	373,017	219,214	131,451

Joint Costs Check if you are following SOP 98 2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to program services \$ _____, (iii) the amount allocated to management and general \$ _____ and (iv) the amount allocated to fundraising \$ _____

Part III - Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <u>CONSERVATION/WILDLIFE - FOREST MANAGEMENT</u>	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a SEE STATEMENT 5 _____ _____ _____ (Grants and allocations \$ _____)	219,214
b _____ _____ _____ (Grants and allocations \$ _____)	
c _____ _____ _____ (Grants and allocations \$ _____)	
d _____ _____ _____ (Grants and allocations \$ _____)	
e Other program services (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B) program services)	219,214

Part IV Balance Sheets (See instructions)

Note		(A) Beginning of year		(B) End of year			
ASSETS	45	Cash – non interest bearing		75	45	300	
	46	Savings and temporary cash investments		139,072	46	71,044	
	47a	Accounts receivable	47a	15,763			
		b Less allowance for doubtful accounts	47b		6,541	47c	15,763
	48a	Pledges receivable	48a				
		b Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable			49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50		
	51a	Other notes & loans receivable (attach sch)	51a				
		b Less allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use		7,843	52	4,608	
	53	Prepaid expenses and deferred charges			53		
	54	Investments – securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54		
	55a	Investments – land, buildings, & equipment basis	55a				
		b Less accumulated depreciation (attach schedule)	55b			55c	
	56	Investments – other (attach schedule)			56		
	57a	Land, buildings, and equipment basis	57a	259,137			
		b Less accumulated depreciation (attach schedule)	57b	33,852	32,224	57c	225,285
	58	Other assets (describe <input type="checkbox"/> STATEMENT 6 <input type="checkbox"/> SEE STATEMENT 7)		394,117	58	341,198	
59	Total assets (add lines 45 through 58) (must equal line 74)		579,872	59	658,198		
LIABILITIES	60	Accounts payable and accrued expenses		15,924	60	16,890	
	61	Grants payable			61		
	62	Deferred revenue			62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63		
	64a	Tax exempt bond liabilities (attach schedule)	64a				
		b Mortgages and other notes payable (attach schedule)	64b			20,000	
	65	Other liabilities (describe <input type="checkbox"/>)			65		
66	Total liabilities (add lines 60 through 65)		15,924	66	36,890		
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74						
	67	Unrestricted		156,289	67	248,500	
	68	Temporarily restricted		13,542	68	31,610	
	69	Permanently restricted		394,117	69	341,198	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74						
	70	Capital stock, trust principal, or current funds			70		
	71	Paid in or capital surplus, or land, building, and equipment fund			71		
	72	Retained earnings, endowment, accumulated income, or other funds			72		
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		563,948	73	621,308	
	74	Total liabilities and net assets/fund balances (add lines 66 and 73)		579,872	74	658,198	

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

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Part VI Other Information (See specific instructions)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination or substantial contraction during the year? If 'Yes,' attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?		X
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b	N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85a	501(c)(4) (5), or (6) organizations. Were substantially all dues nondeductible by members?		N/A
85b	Did the organization make only in house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		N/A
85c	Dues, assessments, and similar amounts from members	85c	N/A
85d	Section 162(e) lobbying and political expenditures	85d	N/A
85e	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e	N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85g	Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?		N/A
85h	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
86a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
86b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87a	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations Sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under Section 4911 ▶ 0, Section 4912 ▶ 0, Section 4955 ▶ 0		
89b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any Section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction		X
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958		0
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed ▶ NEW HAMPSHIRE		
90b	Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	0
91	The books are in care of ▶ THE ORGANIZATION Telephone number ▶ 603-447-6991 Located at ▶ OLD PINE TREE SCHOOL, CENTER CONWAY, NH ZIP + 4 ▶ 03085		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See instructions)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a CAMP REVENUE & SCHOLA					52,015
b COMMUNITY PROGRAM FEE					12,686
c SCHOOL PRGRAMS					60,010
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	5,315	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt financed property					
b not debt financed property			16	3,900	
98 Net rental income or (loss) from pers prop					
99 Other investment income			18	-31,362	
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			3	144,626	
102 Gross profit or (loss) from sales of inventory			5	-3,010	
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				119,469	124,711
105 Total (add line 104 columns (B), (D), and (E))					244,180

Note Line 105 plus line 1d Part I, should equal the amount on line 12 Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
1	SEE STATEMENT 9

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay pr

b Did the organization, during the year, pay premiums, directly or indi

Note If Yes' to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

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, this return and all accompanying schedules and statements are true, correct, and complete. Declaration of preparer (other than officer) is based on information furnished by filer.

Signature of Officer: *Michael L. Cline*

Type or Print Name and Title: MICHAEL L. CLINE, EXECUTIVE

Paid Preparer's Use Only

Preparer's Signature: *Jan O...*

Firm's name (or yours if self-employed) and address and ZIP + 4: GRONDIN & CHANDEL, P A
3 ELM STREET / P O BOX 7
BRIDGTON, ME 04009

Schedule A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No 1545 0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1)
Nonexempt Charitable Trust Supplementary Information - (See separate instructions)

2001

Department of the Treasury
Internal Revenue Service

Supplementary Information - (see separate instructions)

▶ Must be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the Organization

TIN MOUNTAIN CONSERVATION CENTER, INC

Employer Identification Number

02-0353541

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter 'None')

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

Total number of other employees paid over \$50,000 ▶

0

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

(See instructions List each one (whether individuals or firms) If there are none, enter 'None')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶

0

Part III Statements About Activities (See instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities. \$ <u>N/A</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A. Other organizations checking 'Yes,' must complete Part VI B and attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs 'qualify' to receive payments		

Part IV Reason for Non-Private Foundation Status (See instructions)

The organization is not a private foundation because it is (please check only **One** applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11 b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc. functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

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

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

Note. You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	85,192	97,431	123,536	27,699	333,858
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	118,572	114,855	95,764	87,839	417,030
18 Gross income from interest, dividends, amounts received from payments on securities loans (Section 512(a)(5)), rents, royalties, and unrelated business taxable income (less Section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,944	5,516	4,875	1,954	18,289
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets SEE STMT 10				2,029	2,029
23 Total of lines 15 through 22	209,708	217,802	224,175	119,521	771,206
24 Line 23 minus line 17	91,136	102,947	128,411	31,682	354,176
25 Enter 1% of line 23	2,097	2,178	2,242	1,195	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24 N/A				26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					26b
c Total support for Section 509(a)(1) test Enter line 24, column (e)					26c
d Add Amounts from column (e) for lines	18	19			26d
	22	26b			26e
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person' prepare a list for your records to show the name of and total amounts received in each year from each 'disqualified person' Do not file this list with your return Enter the sum of such amounts for each year	(2000)	(1999)	(1998)	(1997)	
	0	0	0	0	
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(2000)	(1999)	(1998)	(1997)	
	14,840	5,000	23,000	0	
c Add Amounts from column (e) for lines	15	16			27c
	17	20			27d
d Add Line 27a total	0	and line 27b total			27e
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f 771,206				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 91.81 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 2.37 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

Part V Private School Questionnaire (See instructions)
 (To be completed Only by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement) ----- ----- -----		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues brochures announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975 2 C B 587, covering racial nondiscrimination? If 'No' attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions)
 (To be completed **Only** by an eligible organization that filed Form 5768)

N/A

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term 'expenditures' means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table –		
	If the amount on line 40 is –		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is –		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000	41	
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0 if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter 0 if line 41 is more than line 38	44	
Caution If there is an amount on either line 43 or line 44, you must file Form 4720			

4 -Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4 -Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI A) (See instructions)

N/A

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

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

Yes	No	Amount

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

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TIN MOUNTAIN CONSERVATION CENTER, INC

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**STATEMENT 1
FORM 990, PART I, LINE 7
OTHER INVESTMENT INCOME**

FEEES ON INVESTMENT	\$ -3,455
GAIN/LOSS NHCF INVESTMENT	-27,907
TOTAL	<u><u>\$ -31,362</u></u>

**STATEMENT 2
FORM 990, PART I, LINE 9
NET INCOME (LOSS) FROM SPECIAL EVENTS**

SPECIAL EVENTS	GROSS RECEIPTS	LESS CONTRI-BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
BIKE RACE	196,900	0	196,900	69,843	127,057
FIRST SEASON	19,911	0	19,911	6,957	12,954
CENTURY RIDE	11,707	0	11,707	7,092	4,615
TOTALS	<u><u>\$ 228,518</u></u>	<u><u>\$ 0</u></u>	<u><u>\$ 228,518</u></u>	<u><u>\$ 83,892</u></u>	<u><u>\$ 144,626</u></u>

**STATEMENT 3
FORM 990, PART I, LINE 10
GROSS PROFIT (LOSS) FROM SALES OF INVENTORY**

SALES OF T-SHIRTS, BOOKS & OTHER MERCH	\$ 225
GROSS SALES	<u>\$ 225</u>
LESS RETURNS & ALLOWANCES	0
NET SALES	<u>\$ 225</u>
LESS COST OF GOODS SOLD	3,235
GROSS PROFIT FROM SALES OF INVENTORY	<u><u>\$ -3,010</u></u>

**STATEMENT 4
FORM 990, PART II, LINE 43
OTHER EXPENSES**

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
ADVERTISING, PUBLICITY	9,213	1,558	450	7,205
BANK CHARGES	1,061		1,061	
CAMP SCHOLARSHIPS	8,549	8,549		
COMPUTER/WEB DESIGN	3,459	2,870	589	
FEEES AND PERMITS	100	100		
FOOD	2,339	1,969	370	
INSURANCE	8,227	2,774	5,453	
MISCELLANEOUS EXPENSE	1,061	697	364	
PROFESSIONAL FEEES	34,359	3,970	30,389	
PROPERTY TAXES	238		238	
REPAIRS AND MAINTENANCE	8,497	7,702	795	
STAFF TRAINING	635	535	100	
T-SHIRTS	2,870	2,870		

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STATEMENT 4 (CONTINUED)
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
UTILITIES	866	866		
TOTAL	<u>\$ 81,474</u>	<u>\$ 34,460</u>	<u>\$ 39,809</u>	<u>\$ 7,205</u>

STATEMENT 5
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
TEACHING WILDLIFE AND FOREST MANAGEMENT, ECOLOGY AND CONSERVATION PRACTICES TO ELEMENTARY AGE CHILDREN, EDUCATING THE GENERAL PUBLIC ABOUT THE SAME ISSUES AND MAINTAINING PROPERTIES WHICH ARE DEDICATED TO GOOD CONSERVATION PRACTICES FOR THE WELFARE AND ENJOYMENT OF THE GENERAL PUBLIC		219,214
	<u>\$ 0</u>	<u>\$ 219,214</u>

STATEMENT 6
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM DEPREC	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT	\$ 9,589	\$ 4,076	\$ 5,513
MACHINERY AND EQUIPMENT	39,813	29,776	10,037
LAND	209,735		209,735
TOTAL	<u>\$ 259,137</u>	<u>\$ 33,852</u>	<u>\$ 225,285</u>

STATEMENT 7
FORM 990, PART IV, LINE 58
OTHER ASSETS

INVESTMENT FUND WITH NHCFC		\$ 341,198
TOTAL		<u>\$ 341,198</u>

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**STATEMENT 8
FORM 990, PART V
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
THERESA BECKETT PO BOX 44 FREEDOM, NH 03836	TRUSTEE NONE	\$ 0	\$ 0	\$ 0
PAUL GETCHELL PO BOX 2211 CONWAY, NH 03818	TRUSTEE NONE	0	0	0
EMILY BENSON PO BOX 224 JACKSON, NH 03846	TRUSTEE NONE	0	0	0
JUDY FOWLER PO BOX 58 EATON, NH 03832	TRUSTEE NONE	0	0	0
BRENDA THIBODEAU RR1 BOX 101 FRYEBURG, ME 04037	TRUSTEE NONE	0	0	0
SUSAN HOOPLE 26 BENNETT RD FREEDOM, NH 03836	VICE CHAIR NONE	0	0	0
SETH ROCKWELL 1014 SE 15TH AVENUE PORTLAND, OR 97214	TRUSTEE NONE	0	0	0
VICTORIA HILL 241 THOMPSON RD NORTH CONWAY, NH 03860	TRUSTEE NONE	0	0	0
WILLIAM CHAPIN PO BOX 1397 NORTH CONWAY, NH 03860	TREASURER NONE	0	0	0
DONALD BEAN 21 WOODLAND ST FRYEBURG, ME 04037	TRUSTEE NONE	0	0	0
JEAN ANDREWS PO BOX 51 FRYEBURG, ME 04037	TRUSTEE NONE	0	0	0
PAT BRUNELLE PO BOX 1843 NORTH CONWAY, NH 03860	TRUSTEE NONE	0	0	0

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STATEMENT 8 (CONTINUED)
 FORM 990, PART V
 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
CHRIS LYDECKER PO BOX 1303 NORTH CONWAY, NH 03860	TRUSTEE NONE	\$ 0	\$ 0	\$ 0
KATRINE BIDDLE PO BOX 2116 NORTH CONWAY, NH 03860	TRUSTEE NONE	0	0	0
PAT MCCOY 7 SKI DOO ALLEY FREEDOM, NH 03836	TRUSTEE NONE	0	0	0
DOUGLAS C BURNELL PO BOX 2785 CONWAY, NH 03818	TRUSTEE NONE	0	0	0
ANDY ORSINI PO BOX 205 INTERVALE, NH 03845	TRUSTEE NONE	0	0	0
SUSANNAH CARGILL 2531 CHINOOK TRAIL TAMWORTH, NH 03886	TRUSTEE NONE	0	0	0
BETSY BUNGEROTH PO BOX 158 EATON, NH 03832	TRUSTEE NONE	0	0	0
ANNE PETERSON PO BOX 462 JACKSON, NH 03846	TRUSTEE NONE	0	0	0
LEO SULLIVAN PO BOX 1139 INTERVALE, NH 03845	CHAIRMAN NONE	0	0	0
COREY ENGFER PO BOX 191 BARTLETT, NH 03812	TRUSTEE NONE	0	0	0
TOTAL		\$ 0	\$ 0	\$ 0

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**STATEMENT 9
FORM 990, PART VIII
RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES**

LINE #	EXPLANATION OF ACTIVITIES
93	ALL REVENUES FROM ABOVE ACTIVITIES PROVIDED FUNDS TO ACHIEVE THE ORGANIZATION'S EXEMPT PURPOSES - PROMOTING UNDERSTANDING OF WILDLIFE AND FOREST MANAGEMENT, ECOLOGY AND CONSERVATION PRACTICES PARTICULARLY AMONG ELEMENTARY AGE CHILDREN - EDUCATION OF THE GENERAL PUBLIC ABOUT THE SAME ISSUES - AND MAINTAINING PROPERTIES DEDICATED TO GOOD CONSERVATION PRACTICES FOR THE WELFARE AND ENJOYMENT OF THE GENERAL PUBLIC

**STATEMENT 10
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME**

DESCRIPTION	(A) 2000	(B) 1999	(C) 1998	(D) 1997	(E) TOTAL
MISCELLANOUS INCOME	\$ 0	\$ 0	\$ 0	\$ 2,029	\$ 2,029
TOTAL	\$ 0	\$ 0	\$ 0	\$ 2,029	\$ 2,029