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990-EZ

Short Form Return of Organization Exempt From Income Tax

2009

December 31

, 2009, and ending

Open to Public Inspection

, 20 09

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

A For the 2009 calendar year, or tax year beginning

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

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

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

June 1 2009

В	Check	if applicable	Please	C Name of organization	D Empl	oyer id	entific	ation number							
	Addres	ss change	use IRS label or	NH Alpine Racing Association Inc		0.	2 - 037	5066							
=		change	nange print or Number and street (or P O box, if mail is not delivered to street address) Room/suite E Tele												
=	Initial r Termir		ted See PO Box 1344												
H		ded return	Specific Instruc-	City or town, state or country, and ZIP + 4	F Grou	лр Ехе	mptio	n							
		ation pending	tions.	Campton NH 03223-1344		ber 🕨	•								
_	• S	ection 501(c)(3	3) organi.	ations and 4947(a)(1) nonexempt charitable trusts must attach G Acco	ounting M	ethod.	V	Cash							
	▶														
	if the c	rganiz	zation is not												
1.3	Neb:	site: ► <u>ww</u>	w.nhalpi	e.org requ	ired to at	ach So	hedu	le B (Form 990,							
<u>J</u> :	Гах-е	exempt status	(check o	ly one) — 501(c) (3) (insert no) 4947(a)(1) or 527 990-	EZ, or 99	0-PF).	ì								
K	Chec	k▶ 🔲 ıft	he organ	ation is not a section 509(a)(3) supporting organization and its gross receipts are	normally	not m	re tha	an \$25,000. A							
	Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return 1. Add lines 55, 65, and 75, to line 9 to determine gross receipts: if \$500,000 or more file Form 990 instead of Form 990, EZ.														
	L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)														
L	_	_	ue, Exp	enses, and Changes in Net Assets or Fund Balances (See th	e instru	ctions	for	Part I.)							
	1	=		s, grants, and similar amounts received		1	1	3123							
	2	•		evenue including government fees and contracts		2	<u>:</u>	0							
	3			and assessments		3	·	43300							
	4	• =				4	<u>i</u>	852							
	1 -			n sale of assets other than inventory 5a			1								
	1			r basis and sales expenses	n/a										
ø				sale of assets other than inventory (Subtract line 5b from line 5a) vities (complete applicable parts of Schedule G). If any amount is from gaming, check her		5c	-	n/a							
5	6		e▶ ⊔		i										
Revenue		a Gross rev	- 1-												
~	1	reported		n/a		!									
		b Less: dire		n/a	1000	İ									
	١,	c Net incor	 	6c	 	n/a									
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	8					7c 8	1								
	9					9	i -	47275							
_	10			amounts paid (attach schedule)	D. P	10	!	0							
	11				SC: L	11		0							
Ų,	1	Salaries	other co	npensation, and employee benefits		12	!	16405							
Jse	13			and other payments to independent contractors	RS.	13	!	1750							
Expenses	14			utilities, and maintenance		14	; 	3049							
ŭ	15			ons, postage, and shipping	JT :	15		7338							
	16			lescribe ▶	1	16	Ţ	20996							
	17			Add lines 10 through 16	•	17	1	49417							
· ·	18			for the year (Subtract line 17 from line 9)		18	1	-2142							
ŧ,	19	Net asse	ts or fu	d balances at beginning of year (from line 27, column (A)) (must agr	ee with		i								
Ā	!	end-of-ye	ear figur	reported on prior year's return)		19	1	98522							
Not Assets	20	Other ch	anges ir	net assets or fund balances (attach explanation)		20	1	0							
_	21			balances at end of year. Combine lines 18 through 20	▶	21	1	95380							
	art	II Balan	ce She	ts. If Total assets on line 25, column (B) are \$1,250,000 or more, file F	orm 990	inste	d of	Form 990-EZ.							
				(See the instructions for Part II.) (A) E	Beginning o	f year	,	(B) End of year							
	2	Cash, saving	gs, and i	vestments		98522	22	95380							
	:3	Land and bu	-				23	0							
	4	Other assets	•	e▶)			24	0							
	25	Total assets			_	98522	· · · · · · · · · · · · · · · · · · ·	95380							
	6	Total liabilit					26	0							
4-	71			alances (line 27 of column (B) must agree with line 21)		98522		95380							
F	r Při	vacy Appeand	Paperwo	k Reduction Act Notice, see the separate instructions. Cat No	106421		For	m 990-EZ (2009)							

SCANNED SEP 1 7 2010



om s	990-EZ (2009)					raye Z
Part	Statement of Program Service Accomp	lishments (See the instru	ctions for Part III	.)		Expenses
Vhat		Membership Orginzation				red for section
)esc	ribe, what was achieved in carrying out the orga		es. In a clear an	d concise		(3) and 501(c)(4)
220	ner, describe the services provided, the number of	nersons benefited, and o	ther relevant infor	mation for		zations and section
	program title.	po. 20.10 20.10.11.20, a.v.a. 2			for oth	a)(1) trusts, optional ners)
					101 00	
28	We have 300 coaches, 100 officals. We provide inform	nation and training for ski ra	cing and coaches		1 i 1	
					1 ¦	
					li I	
	(Grants \$) If this amount	ncludes foreign grants, che	eck here	. ▶ 🗆	28a	5000
29	We have 2000 +/- members 8 and up, we provide hand					
23	THE HEAD TO THE HEAD TO WHAT THE PROPERTY OF T					
		li l				
						42000
		ncludes foreign grants, che	eck here	<u>. ▶ ⊔</u>	29a	13000
30	We provide fencing and radios for events				}	
					1 1	
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ □	30a	31000
24	<u> </u>					*
31	p g	includes foreign grants, che			31a	
~~						49000
	Total program service expenses (add lines 28a t				32	
Par	t IV List of Officers, Directors, Trustees, and Key					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (if not paid,	(d) Contribution employee benefit	ns to	(e) Expense account and
	(a) Name and address	devoted to position	enter -0)	deferred compe		other allowances
see	attachment A				Ī	
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Part	Other Information (Note the statement requirements in the instructions for Part V.)			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	Yes	No ✓
34	description of each activity	34	 	✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		1
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year?	35b 36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b 38a	Did the organization file Form 1120-POL for this year?	37b 38a		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	300		
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b 400	Gross receipts, included on line 9, for public use of club facilities			
40a	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1 1 1 1 1 1 1 1 1 1
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		10	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
6	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
h	Located at ► ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority			••••
U	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	$\overline{}$	No
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		1
40	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	•		▶ ⊔
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		No V
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ.			
			-	

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) none 17(a)(1) nonexempt chari ad 51.	xempt charitatable trusts m	able trusts only ust answer que	r. All section stions 46–49b
46	Did the organization engage in direct or indirect candidates for public office? If "Yes," complete s				
47	Did the organization engage in lobbying activities	·			
48	Is the organization a school as described in section				
49a	Did the organization make any transfers to an ex				
	If "Yes," was the related organization a section 5	· · · · · · · · · · · · · · · · · · ·			49b ✓
50	Complete this table for the organization's five his employees) who each received more than \$100,000.	ghest compensated emplo	yees (other tha the organization	n officers, directo n. If there is none,	rs, trustees and key enter "None."
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation		to (e) Expense account and
n/a					
				_	
			<u> </u>	_	
					1
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		•			
f	Total number of other employees paid over \$100	0.000			
n/a	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Compensation
					
				···	<u> </u>
d	Total number of other independent contractors	each receiving over \$100,0	▶		
	Under penalties of perjury, I declare that I have examin	and this ratius, including passenge	nying schedules and	statements, and to the	
	and belief, it is true, correct, and complete Declaration	n of preparer (other than officer) is	based on all informa	ation of which prepare	e best of my knowledge has any knowledge
Sign Here	and belief, it is true, correct, and complete Declaration	n of preparer (other than officer) is	based on all informa	ation of which prepare	e best of my knowledge has any knowledge
Sign Here	Signature of Officer Jeffrey P Brimblecom, Treasurer	no of preparer (other than officer) is	based on all informa	Date	has any knowledge
-	Signature of Oficer Jeffrey P Brimblecom, Treasurer Type or print name and title	n of preparer (other than officer) is	basēd on all informa	Date 5	has any knowledge
Here Paid	Signature of Officer Jeffrey P Brimblecom, Treasurer Type or print name and title Preparer's signature	not preparer (other than officer) is	Check if self-employed	Date Preparer's identify	has any knowledge
Here Paid Prepa	Signature of officer Jeffrey P Brimblecom, Treasurer Type or print name and title Preparer's signature Firm's name (or	n of preparer (other than officer) is	based on all information of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the cont	Date Preparer's identify	has any knowledge
Paid Prepa Use 0	Signature of officer Jeffrey P Brimblecom, Treasurer Type or print name and title Preparer's signature Firm's name (or	n of preparer (other than officer) is	Check if self-employed	Date Preparer's identify	has any knowledge

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

NH Alpine Racing Association inc Part 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). A medical research organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(ii). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(ii). (Complete Part II) A community trust described in section 170(b)(1)(A)(ii). (Complete Part II) A community trust described in section 170(b)(1)(A)(ii). (Complete Part II) A organization that normally receives; (1) more than 333% of its support from contributions, membership fees, and gro receipts from activities related to its exempt functions—subject to certain exceptions, and (2) in omore than 336% of support from gross investment income and unrelated business taxable income (less etcino 1511 tax) from business acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for	
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A chool described in section 170(b)(1)(A)(iii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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. A organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A norganization 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.) A norganization that normally receives: (1) more than 33% % of its support from contributions, membership fees, and groer receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of support from gross investment income and unrelated business taxable income (less section 511 tax) from business acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organization described in section 509(a)(1) or section 509(a)(2). See sectio 509(a)(1) or section 509(a)(2). See sectio 509(a)(1) or section 509(a)(2). See sectio 509(a)(1) or section 509(a)(2). See section 509(a)(1) or section 509(a)(2). See sec	
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A school described in section 170(b)(1)(A)(iii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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. A medical research organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part II.) A norganization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part III.) A community trust described in section 170(b)(1)(A)(iv). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A norganization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and grorecepts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of support from gross investment income and unrelated business taxable income (less section 511 tax) from business acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(4).	
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A modical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part II.) A dederal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vii). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vii). (Complete Part III.) An organization that normally receives: (1) more than 33½ % of its support from contributions, membership fees, and grove receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½ % of support from gross investment income and unrelated business taxable income (less section 511 tax) from business acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out 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 that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Othe e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualify persons other than foundation managers and other than one or more publicly supported organizations described in (i) approved organization in coli (ii) A family member of a p	
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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)(vi). (Complete Part II.) 9 ☑ An organization that normally receives: (1) more than 33½ % of its support from contributions, membership fees, and grorecepts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½ % of support from gross investment income and unrelated business taxable income (less section 511 tax) from business acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(3). Check the box that describes the type of supporting organization accomplete lines 11e through 11h a ☐ Type II b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Othe By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualify persons other than foundation managers and other than one or more publicly supported organizations described in (i) and (iii) below, the governing body of the supported organization? 10 A person who directly or indirectly controls, either alone or together with persons described in (i) above	_
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. An organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(†1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(†1)(A)(v). 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.) A community trust described in section 170(b)(†1)(A)(vi). (Complete Part II.) An organization that normally receives: (†1) more than 33½ % of its support from contributions, membership fees, and groeipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½ % of support from gross investment income and unrelated business taxable income (less section 511 tax) from business acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, 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 that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type II D ☐ Type III C ☐ Type III—Functionally integrated d ☐ Type III—Othe Persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (ii) A family member of a person described in (i) above? (iii) A family member of	_
hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described section 170(b)(1)(A)(iv). (Complete Part II.) 6	_
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Par	Support Schedule for Org (Complete only if you chec	janizations D ked the box	Described in on line 5, 7, c	Sections 17 or 8 of Part I	'0(b)(1)(A)(iv) .)	and 170(b)(1)(A)(vi)
Sec	tion A. Public Support					a multi-	
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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. 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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)						
6_	Public support. Subtract line 5 from line 4.						n/a
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4			'	 		
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 IV.)						
11	Total support. Add lines 7 through 10 .				2 2 E COL		L
12	Gross receipts from related activities, et-	c. (see instruction	ons)			12	n/a
13	First five years. If the Form 990 is for organization, check this box and stop he	ere	 		h, or fifth tax y		on 501(c)(3)
Sec	tion C. Computation of Public Su	ipport Perce	ntage				
14	Public support percentage for 2009 (line	6, column (f) d	ivided by line 1	1, column (f))		14	%_
15	Public support percentage from 2008 Sc	•	•			15	%
16a	33%% support test – 2009. If the organ and stop here. The organization qualifie	s as a publicly	supported orga	nization		!	▶ 🗆
b	33½ % support test—2008. If the organ box and stop here. The organization qu						
17a	10%-facts-and-circumstances test — 2 more, and if the organization meets the "organization meets the "facts-and-circumstance"	facts-and-circu	mstances" test,	check this box	x and stop here	. Explain in Part	IV how the
b 18	10%-facts-and-circumstances test – 200 more, and if the organization meets the organization meets the "facts-and-circums Private foundation. If the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined in the organization defined i	"facts-and-circur tances" test. The	nstances" test, e organization qu	check this box alifies as a publ	and stop here licly supported o	Explain in Part rganization .	IV how the
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	Support Schedule for Orga (Complete only if you checke)(2) 										
	tion A. Public Support														
Ca	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total							
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	51822	51098	48324	56815		43300	251359							
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.	23732	28971	50198	50396		400	153697							
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0		0	0							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0	0							
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0		0	0							
6	Total. Add lines 1 through 5	75554	80069	98522	107211		43700	405056							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0		0	0							
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							0							
С	Add lines 7a and 7b	75554	80069	98522	197211		43700								
8	Public support (Subtract line 7c from line 6.)							424998							
Sec	Section B. Total Support														
Ca	llendar year (or fiscal year beginning in)	(e)	2009	(f) Total											
9 10a		75554	80069	98522	107211		43700	405056							
	payments received on securities loans, rents, royalties and income from similar sources	1639	2409	2773	2298		852	9971							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	i		0							
_	acquired after June 30, 1975	1639	2409	2773	2298		852	9971							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0		0	0							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0		0	0							
13	Total support. (Add lines 9, 10c, 11,]				4								
14	and 12.) . First five years. If the Form 990 is for	the organization	on's first, seco	l nd, third, fourti	l h, or fifth tax y	ear as	asectic	424998 on 501(c)(3)							
55.	organization, check this box and stop			· · · · ·	<u>· · · · · · · · · · · · · · · · · · · </u>		_ 	<u> </u>							
_	tion C. Computation of Public Su					T T	1	05 0							
15 16	Public support percentage for 2009 (In Public support percentage from 2008	Schedule A, Pa	art III, line 15	e 13, column		15 16		95 % 96 %							
	ction D. Computation of Investme							2.25							
17	Investment income percentage for 200			-		17		2.35 %							
18	Investment income percentage from 2					18	1	2.20 %							
19a	17 is not more than 331/3 %, check this	box and stop h	ere. The organ	zation qualifie:	s as a publicly	suppo	rted orga	anization 🕨 🗹							
b	line 18 is not more than 33%%, check th	is box and stop	here. The orga	ınızatıon qualıfıe	es as a publicly	suppo	rtėd orga	inization 🕨 🗌							
20	Private foundation. If the organization	n did not check	a box on line	14, 19a, or 19t				tructions ► □ or 990-EZ) 2009							

Attachment A 990-EZ Tax # 02-0375066		•	603 -669-9697	603 485-7205	603 726-8121	603 625-4141	603 745-2467	603 472-5448	603 938-6128	603 726-2022	603 569-5690	802 333-9157	603 520-1642	603 938-6128	978 470-0317	603 745-6318	603 547-2312	603 267-1758	603 428-3245 x107	781 772-1394	603 968-4429	603-715-2922	603 735-5971	603-526-3608	603 536-4111	603-938-6065
			03104	03275	01810	03104-1562	03223	03110	03255	03215	96880	03755-0248	03845-0780	03255	01810	03251	03595	03237	03242	02481	03264	03304	03216	03257	03264	03255
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ion, Inc			Manchester	Pembroke	Andover	Manchester	Campton	Bedford	Newbury	Waterville Valley	Wolfboro Falls	Hanover	Intervale	Newbury	Andover	Lincoln	Twin Mtn	Gilmanton	Henniker	Wellesley	Plymouth	Bow	Andover	New London	Plymouth	Newbury
New Hampshire Alpine Racing Association, Inc PO Box 1344 Campton NH 03223-1344			65 Linda Ln	188 Main St	31 Mohawk Rd	120 Ward St	PO Box 1344	8 Carriage Lane	15 Richards Road	PO Box 113	PO Box 997	PO Box 248	PO Box 780	15 Richards Road	15 David Drive	PO Box 730	PO Box 263	12 Shellcamp Road	PO Box 2448	40 Emerson Road	1892 River Rd	7 Fernwood Place	PO Box 500	541 Main Street	47 Pleasant Street	55 Morse Hill Road
ew Hampshire	<u>-</u>	Address	Marshall	Cremeno	Oliver	Brimblecom	Stevens	Holland	Underhill	Antoides	Newman	Riess	Gregory	Fishbrook	Green	Sutton	Maybee	Workman	Blomback	DiGangi	Crane	Poole	Salathe	Lashner	Dahl	Iacopino
Z		Name & Ad	Oan	ic Paul	Bev	reasurer Jeffrey	Laurie	Peter	Bob	Craig	Ted	Gred	Dave	, III.	J. E.	Ted	Harry	Mike	Kris	Tony	Emil?	Joe	Dave	Garrett	Ivar	Jack
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