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990 Form

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

⊃ • Departir	ent of t	the Treasury			50.10.11		,					'	n to Public
<u>_dn</u> ternal	Revent	ue Service	<u> </u>	The organization may h	nave to use					uirement		<u> </u>	nspection
A Fo	r the	2009 calenda	ır year, oı	r tax year beginning			7-01 , 2009,				06-3	30 , 2	0 10
B Ch	eck if a	pplicable	Please	C Name of organization Fo:	rd K Say	re Memorial	Ski Counci	l, In	c.		D	Employe	er identification no
~ >n	dress c	hange	use IRS label or	Doing Business As						0	2-024	15359	
Na Na	me cha	inge	print or	Number and street (or P O	box if mail is r	ot delivered to street	address)		Room	/suite	E	Telepho	ne number
No Init	al retu	· .	type See	PO Box 471							(603) 643-2226		
C Te	rmınate		Specific	City or town, state or count	try, and ZIP + 4						G	Gross re	ceipts
	nended		Instruc- tions.	Hanover, NH 037								\$	344,648
		n pending	F Name	and address of principal office	Linda	Bedford							
	pilodilo	in perialing	25 P	Partridge Road, E	tna, NH	03750			H(a)	Is this a greatfiliates?	oup return	for	Yes X No
IE.		pt status		3) ◀ (insert no)	4947(a)(1) o			3	Н(ъ)	Are all affil	iates incli	ided?	Yes No
	ebsite:			ayre.org					⊢ ``	If "No," atta Group exe	ach a list	(see instr	uctions)
			Corporation		Other		L Year of forma	tion 19	967	M State			NH
				Trast 7 tasediation									
Par	1	Summar Briefly descri		ganization's mission or n	nost signific	ant activities	The Counc	ıl or	ganız	es sno	WSDOI	cts 1	nstruction
				rams for over 50									
A		Hampshire											
c G t o		папраптте	-										
iy	,	Chack this b	ov N	f the organization discon	stinued its or	perations or dispo	sed of more that	n 25% (of its ne	t assets			
řг			_	nbers of the governing b							3		20
t n	3			nt voting members of the							4		20
e n	4										5		0
S C	5			oyees (Part V, line 2a)							6		
&	6			teers (estimate if necess									150
	7a			business revenue from F							7a		0
<u>=</u>	ь	Net unrelated	d busines	s taxable income from F	orm 990-1	ine 34 · · · ·	117FD		• • • •	• • • •	7b		
8, 201D					i	RECE	IVED	_	Pi	nor Year		<u> </u>	ment Year
con l	8		_	nts (Part VIII, line 1h) •		· · · · · · · · · · · · · · · · · · ·	SC	• •			, 365		1,125
<u>ح</u>	9	NOV 1 8 2010										273,630	
<u></u> .	10	Investment ii	ncome (P	art VIII, column (A), lines	3, 4, and 7	B)	S. 1. 1. 1. S.	• •			,183		1,660
	11	Other revenu	ie (Part V	'III, column (A), lines 5, 6	id, 8c, 9c, 70	oc, (and 11e)	_ 	• • _			,917		24,070
	12			nes 8 through 11 (must e				• •		······	,870		300,485
P	13			ounts paid (Part IX, colu				· •		1	,200		0
	14			members (Part IX, colun			• • • • • • •	••⊢					0
5	15	Salaries, oth	er compe	nsation, employee bene	fits (Part IX,	column (A), lines	5-10)	•• _					0
) ae	16a	Professional	fundraisi	ng fees (Part IX, column	(A), line 11	e) • • • • • • •							0
n Os	b	Total fundra	sing expe	enses (Part IX, column (E)), line 25) ▶	·	0						
e	17	•	-	IX, column (A), lines 11a				••			,892		286,466
S	18			lines 13-17 (must equal						244	,092		286,466
	19	Revenue les	s expens	es Subtract line 18 from	n line 12 ·	· · · · · · · · · · ·		• •		(2	,222)		14,019
Net								LE	Beginning	of Current		Е	nd of Year
Assets or	20	Total assets	(Part X, I	ıne 16) • • • • • • • •		· · · · · · · · ·		••		188	,575		202,794
Fund	21	Total liabilitie	es (Part X	(, line 26)				••		2	, 935		3,135
Bal⊢ ances	22	Net assets o	r fund bal	lances Subtract line 21	from line 20	· <u>· · · · · · · · · · · · · · · · · · </u>	· · · · · · · · · · ·	• •		185	,640		199,659
Par	t II	Signatu	re Bloc	<u>k / / / / / / / / / / / / / / / / / / /</u>	7								
		Under penalti	es of perjury	y, I declare that I bave examined	d this return in	cluding accompanying	schedules and state	ments, a	nd to the l	est of my k	nowledge	;	
		and belief, it is	s true, corre	ct, and complete Declaration o	r preparer (othe	er than omcer) is base	o on all information o	r wnich pi	reparer na	as any know			
Sign					7						15	N	<u>01, 3010</u>
Here		Signatur	re of officer	X							Date		
Here	•	Mark	Lindbe	erg, Treasurer									
			print name										
		 				Da	ite	Check	ıf	Prepar	er's identi	ifying nun	nber
		Preparer's signature				į		self-	red ▶	(see in	structions	s)	
Paid		5.93.2.0	•					Ciripioy	- L	_			
Prepa								1	EIN	•			
Use C	nly	Firm's name								-			
		If self-employ	eu), ZIP + 4						<u> </u>				

Phone no

Part 1 1 Br T) Ur 2 Dr th	90 (2009) Ford K Sayre Med Statement of Program refly describe the organization's missible Council organizes snow pper Valley area of Verm	m Service Accomplishm			
1 Br TI UI 	riefly describe the organization's mis he Council organizes sno	ssion			
2 Di th		wsports instruction an			
2 Di	pper Valley area of Verm			over 500 children i	n the
th If		ont and New Hampshire	•		
th If					
lf	old the organization undertake any si	gnificant program services durin	g the year which were not listed	on	
	ne prior Form 990 or 990-EZ? •• "Yes," describe these new services			· · · · · · · · · · · · · · · · · · ·	es X No
se	old the organization cease conductin			· · · · · · · · · · · · · · · · · · ·	es X No
	"Yes," describe these changes on S Describe the exempt purpose achieve		on's three largest program servi	ces by expenses	
	section 501(c)(3) and 501(c)(4) organ Illocations to others, the total expens			amount of grants and	
	Code (Expenses laught approximately 225	\$ 249,252 including			268,447)
_		ill taught by voluntee:			
	articipated in alpine an				
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4b (C	Code (Expenses	\$ including	g grants of \$) (Revenue \$)
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4c ((Code) (Expenses	\$ including	g grants of \$) (Revenue \$)
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-					
-					
	Other program services (Describe in		\ (Payarya 6		
	Expenses \$ Total program service expenses	including grants of \$ 249,252) (Revenue S)	

Pai	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,"			1
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			1
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		_x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	6		_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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable · · · · · · · · · · · · · · · · · · ·	11	x	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		N. Service	L 1 A.
•	Schedule D, Part VI	, a ag , .		Š. O
	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		7.0	
	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			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			r L
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	* 1		To the second
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	्रे "व		A CONTRACTOR
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	,**/st		潜波
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	س دورود در	1	4.
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12	W.F 4 P	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No		5 53	<u>^</u>
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1 8	* '	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_ X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		\dashv	
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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 · · · · · · · · · · · · · · · · · ·	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		-4	
	If "Yes," complete Schedule G, Part III - · · · · · · · · · · · · · · · · ·	19	ł	Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		$-\frac{\Lambda}{X}$
		لتت		43

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х 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 23 Х 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 25 24a Х Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? • • • • • 24d d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Х 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 25b Х 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L. Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Х An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

38

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			ı
	U.S. Information Returns Enter -0- if not applicable			l
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable • • • • • • • • • 1b 0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			<u> </u>
	gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1
	Statements, filed for the calendar year ending with or within the year covered by this return ••••• 2a 0	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			1
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			l <u></u>
	this return? · · · · · · · · · · · · · · · · · · ·	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," 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 the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
_	and Financial Accounts	F-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a 5b		X
b	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	30		
С	Prohibited Tax Shelter Transaction?	5c		
c-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			\vdash
6a	organization solicit any contributions that were not tax deductible?	6a		Х
.	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		
b	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 which it was			
	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			ـ نـــــــــــــــــــــــــــــــــــ
	benefit contract? • • • • • • • • • • • • • • • • • • •	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? • • • • • • • • • • • • • • • • • • •	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required? • • • • • • • • • • • • • • • • • • •	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ļ
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	ļ. <u>.</u>		
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • 10b	-		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them)	42-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 -	-
b	If ites, enter the amount of tax-exempt interest received of accrued during the year			L

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

Sec	ction A. Governing Body and Management			
		T CANA	Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
_	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 make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • •	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	andan naste.	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		4	
	the year by the following		200	334
a	The governing body? • • • • • • • • • • • • • • • • • • •	8a	X	
b	2231 Committee Will additionly to dot on Schilling Sody	8b	X	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code)			
40-	Does the experience have lead charters branches or efficience?		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
11	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
• •	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11	X	ad cilidada
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	$\overline{}$	eW.	Mary.
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12a	X	
•	rise to conflicts? ••••••••••••••••••••••••••••••••••••	425	.,	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	_X	
٠	describe in Schedule O how this is done • • • • • • • • • • • • • • • • • • •	42-		
13	Does the organization have a written whistleblower policy?	12c	X	
14	Does the organization have a written document retention and destruction policy?	14		<u>X</u>
15	Did the process for determining compensation of the following persons include a review and approval by		Salat ne	X
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
9	The organization's CEO, Executive Director, or top management official	I I		
b	Other officers or key employees of the organization ••••••••••••••••••••••••••••••••••••	15a 15b		<u>X</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	7.20	145 55	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	5.4		
	with a taxable entity during the year?	16a	# 27 9 2	
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	i la	C	X
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		72.5	
	the organization's exempt status with respect to such arrangements?	16b	13113	175 C
900	tion C. Disclosure	100		
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed NH	——		
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)	—-		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Mark Lindberg (603) 643-2226			
	PO Box 621 Norwich, VT 05055		_	
	•			

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not compensate any current officer, director, or trustee

(A)	(B)	(C)						(D)		(E)	(F)
Name and Title	Average hours per week	Position of the control of the contr	I t n r s u t s t t e u e	Office	K e y e m p l o y e e	H c e I o m g mp h p I e e o y t s e t e d	F o r m e	Reportable compensation from the organization (W-2/1099-MISC)	C	Reportable compensation from related organizations W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Linda Bedford											
Chair	3.00	Х	l _	X			}		þ	0	0
Janet Hardy											
Secretary	2.00	X		X							
Mark Lindberg											
Treasurer	2.00	Х		X	L				\perp		
Cathy Richmond	2.00	x									
Meg Noonan	2.00	Х									
Tracy Walsh	2.00	Х									
Tiger Shaw	2.00	X							1		
Mike Woods	2.00	Х								_	·
KJ Dell'Antonia	2.00	X								_	
Michelle Couture	2.00	X									
Robert Couture	2.00	X									
Liz Gray	2.00	X									
Susan Harper	2.00	X				-					
Jane Henry	2.00	X									
Brian Pogue	2.00	X									
Lars Blackmore	2 00	v									

Pant VII . Section A. Officers, Directors, Truste (A)											(F)
Name and Title	Average hours per week	Posit I t d n r i d u r i s e v t c i e t d e o u r a o i r	I t n r s L t s	Office	All the yemployee	H c e I o m g mp h p l e e o s n y t s e t e d	Form	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	a COI) or a	stimated imount of other impensation from the ganization and related ganizations
Bruce Sacerdote	2.00	х					-				
Tom Dodds	2.00	X					-				
William Taylor	2.00										
Dan Haedrich		X		-							
	2.00	X	-				-			-	<u> </u>
		ļ					_				
			<u> </u>	_							
		-									
1b Total		• • •	<u> </u>	٠.	٠.	• • •			 	0	0
Total number of individuals (including but not limit		abov	e) w	ho r	ecei	ved m	ore t	han \$100,000 in		0	
reportable compensation from the organization	<u></u>										Yes No
3 Did the organization list any former officer, director										700	G 357
employee on line 1a? If "Yes," complete Schedule 4 For any individual listed on line 1a, is the sum of r									• • • • • •	• • 3	X
the organization and related organizations greate	-					-					4
ındıvıdual · · · · · · · · · · · · · · · · · · ·								• • • • • • • • •	• • • • • •	. 4	Х
5 Did any person listed on line 1a receive or accrue										\$1.32 E	
services rendered to the organization? If "Yes," co	mplete Schedul	e J for	suc	h pe	rson	• •	• •		• • • • • • •	• 5	X
Section B. Independent Contractors 1 Complete this table for your five highest compens	ated independer	t contr	acto	ors th	nat r	eceive	d m	ore than \$100,000	of		
compensation from the organization		_									
(A) Name and business ad	drace							(B) Description of s	100000	Come	(C) ensation
rame and business as								Description of s	icivices .	Comp	ensauon
			_								
Total number of independent contractors (including more than \$100,000 in compensation from the order.)		to thos	se li	sted	abo	ve) wh	о ге	ceived			

Part VIII		Statement of Revenue			<u> </u>		
<u>,</u>				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u></u>	1a	Federated campaigns · · · · · 1a	1,125				
	b	Membership dues 1b					1 ;
Contri-	c	Fundraising events 1c					
butions,	d d	Related organizations 1d	-				1
gifts, grants	- u	Government grants (contributions) • • 1e					
and		All other contributions, gifts, grants,					į,
other sımilar	'	and similar amounts not included above 1f					
amounts	а	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f · · · · · · · · · · · · · · · · · · ·		1,125			
			Business Code				
	2a	Teaching snowsports	713990	273,630	273,630		
	b						
Program	c						
Service Revenue	d						
	е		-				
	f	All other program service revenue • • • • • •		<u> </u>			
		Total. Add lines 2a-2f	• • • • • •	273,630			
		Investment income (including dividends, interest.	and			_	
	•	other similar amounts)	▶	1,660	1,660		
	4	Income from investment of tax-exempt bond produced					
	5	Royalties · · · · · · · · · · · · · · · · · · ·	• • • • • • •				
		(ı) Real	(II) Personal	t	¥	s.	
	6a	Gross Rents · · · · · ·					
	b	Less rental expenses · · · ·		**			. •
	С	Rental income or (loss) · · ·					J
	d	Net rental income or (loss) • • • • • • • • • •	• • • • • • •			3%	
	7a	Gross amount from sales of (i) Securities assets other than inventory	(II) Other	*	*,	****	*
	b	Less cost or other basis and sales expenses • • • •			· ·	ŧ	
•	C	Gain or (loss)		- Marie - 1/2	* ,		Š×.
h		Net gain or (loss)	• • • • • •				
e	8a	Gross income from fundraising		,**	•	,	
•		events (not including \$:		
R	1	of contributions reported on line 1c)			49 1		ς
e v		See Part IV, line 18 · · · · · · · a	67,884				İ
e	b	Less direct expenses · · · · · · · b	44,163				
n u	C	Net income or (loss) from fundraising events	· · · · · · · •	23,721	23,721		
e	9a	Gross income from gaming activities					
		See Part IV, line 19 · · · · · · · a		*		<u> </u>	
		Less direct expenses · · · · · · · b					
	С	Net income or (loss) from gaming activities • •	· <u>· · · · · · · · · · · · · · · · · · </u>				
	10a	Gross sales of inventory, less					
		returns and allowances · · · · · · · a					
		Less cost of goods sold - · · · · · b	L		<u> </u>		
	С	Net income or (loss) from sales of inventory •					
		Miscellaneous Revenue	Business Code	<u> </u>	<u> </u>		
	11a	Miscellaneous	713990	349	349	,	
	Ь				-		
	С						
	d			344			
		Total. Add lines 11a-11d · · · · · · ·		349			d (
	1 12	Total revenue. See instructions	🗩	300,403	299,360	1	٧ ,

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).												
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising								
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses								
1	Grants and other assistance to governments and												
	organizations in the U.S. See Part IV, line 21												
2	Grants and other assistance to individuals in		-										
	the U.S. See Part IV, line 22 - · · · · · · · ·												
3	Grants and other assistance to governments,				[
	organizations, and individuals outside the				į								
	U.S. See Part IV, lines 15 and 16 · · · · · · · · ·												
4	Benefits paid to or for members												
5	Compensation of current officers, directors,												
_	trustees, and key employees												
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 · · · · · · · · · · · · · · · · · · ·												
8	Pension plan contributions (include section 401(k)												
•	and section 403(b) employer contributions) • • • • •												
9	Other employee benefits • • • • • • • • • • • • •				_								
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·												
11	Fees for services (non-employees)												
''	Management · · · · · · · · · · · · · · · · · · ·												
h	Legal · · · · · · · · · · · · · · · · · · ·	-											
č	Accounting • • • • • • • • • • • • • • • • • • •	· <u>-</u>											
ď	Lobbying · · · · · · · · · · · · · · · · · · ·				_								
-	Professional fundraising services See Part IV, line 17 •		4-4										
f	Investment management fees		^/		, "								
g	Other · · · · · · · · · · · · · · · · · · ·												
12	Advertising and promotion												
13	Office expenses · · · · · · · · · · · · · · · · · ·	4,861	329	4,532									
14	Information technology • • • • • • • • • • • • • • • • • • •			-									
15	Royalties · · · · · · · · · · · · · · · · · · ·												
16	Occupancy · · · · · · · · · · · · · · · · · · ·	4,630	4,630		•								
17	Travel · · · · · · · · · · · · · · · · · · ·	819	819		_								
18	Payments of travel or entertainment expenses												
	for any federal, state, or local public officials												
19	Conferences, conventions, and meetings • • • • • •			-									
20	Interest · · · · · · · · · · · · · · · · · · ·												
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •												
22	Depreciation, depletion, and amortization • • • • • •	2,674	2,674		 								
23	Insurance · · · · · · · · · · · · · · · · · · ·	31,723	3,877	27,846									
24	Other expenses ltemize expenses not	*	* . , , , , , , , , , , , , , , , , , ,		*								
_~	covered above (Expenses grouped together												
	and labeled miscellaneous may not exceed												
	5% of total expenses shown on line 25 below)												
2	Coaching	144,898	144,898										
h	Instructor training	7,380	7,380	·									
	Vehicle operating costs	18,597	18,597										
ر ب	Race expenses	25,347	25,347										
u a	Equipment maintenence	10,321	10,271	50									
f	All other expenses · · · · · · · · · · · · · · · · · ·	35,216	30,430	4,786									
25	Total functional expenses. Add lines 1 through 24f · ·	286,466	249,252	37,214	0								
26	Joint Costs. Check here If following	,,		,									
	SOP 98-2 Complete this line only if the												
	organization reported in column (B) joint costs												
	from a combined educational campaign and fundraising solicitation												
	iunoraising solicitation		I		Form 990 (2009)								

Part X	Balance Sheet			
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	(3,450)	1	(9,237)
2	Savings and temporary cash investments	176,649	2	188,226
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	· · · · · · · · · · · · · · · · · · ·
5	Receivables from current and former officers, directors, trustees, key			•
	employees, and highest compensated employees. Complete Part II of			
	Schedule L · · · · · · · · · · · · · · · · · ·		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
A s	Part II of Schedule L · · · · · · · · · · · · · · · · · ·		6	
s 7	Notes and loans receivable, net		7	
e 8	Inventories for sale or use	6,161	8	4,680
s 9	Prepaid expenses and deferred charges		9	
10		,		
	other basis Complete Part VI of Schedule D · · · · 10a 38 , 434			
	b Less accumulated depreciation · · · · · · · · · 10b 19,309	9,215	10c	19,125
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)	188,575	16	202,794
17	Accounts payable and accrued expenses		17	
18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
L 19	Deferred revenue · · · · · · · · · · · · · · · · · · ·		19	
i 20	Tax-exempt bond liabilities		20	
a 21	- 1 1 1 1 0 1 1 1 Dead N/ of Calcadula D		21	
i 22		, , **		« ` * *
!	employees, highest compensated employees, and disqualified	, ×		s
¦	persons Complete Part II of Schedule L		22	
i 23	and the state of t		23	
e 24	and the state of t		24	
25		2,935	25	3,135
26		2,935	26	3,135
- + -	Organizations that follow SFAS 117, check here	, , ,		*
NF	complete lines 27 through 29, and lines 33 and 34.		,	
e u 27		The state of the s	27	
t n 2		- -	28	
A 29			29	
s B	Organizations that do not follow SFAS 117, check here			*
s a	and complete lines 30 through 34.		*	*
e I ta 3	and the state of t		30	
s n 3			31	
o e 3		185,640	32	199,659
r s 3		185,640	33	199,659
3.		188,575	34	202,794
	EEA			Form 990 (2009)

Pa	rt XI Financial Statements and Reporting			
_			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in	1		
	Schedule O	İ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	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?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both	l		
	Separate basis Consolidated basis Both consolidated and separate basis			
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?	3a		X
ь	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	3b		

EEA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

		organization						ļ		dentification r	number			
For	d K	Sayre Memorial	Ski Council	, Inc.						245359				
Pa	rt I	Reason for	Public Charity	/ Status (All organiza	tions must	complete	this part)	See instru	ctions					
The	orgar	ization is not a private	e foundation becau	use it is (For lines 1 thro	ugh 11, ch	eck only of	ne box)	411						
1				sociation of churches de		section 17	70(b)(1)(A)	(1).						
2				(A)(ii). (Attach Schedule										
3		A hospital or a coope	erative hospital sen	vice organization describ	ed in secti	ion 170(b)((1)(A)(iii).							
4			organization operat	ed in conjunction with a	hospital de	escribed in	section 1	70(b)(1)(A)	(iii). Enter	the hospit	al's nan	ne,		
		city, and state												
5		An organization oper	ated for the benefi	t of a college or universit	y owned o	r operated	by a gove	rnmental (ınıt descrit	bed in				
		section 170(b)(1)(A)(
6				governmental unit descr										
7	X													
		described in section 170(b)(1)(A)(vi). (Complete Part II)												
8				170(b)(1)(A)(vi). (Compl										
9				(1) more than 33 1/3% of										
				empt functions - subject t										
				and unrelated business (1 tax) fron	1 business	ses				
	_			30, 1975 See section 5										
10				d exclusively to test for p										
11				d exclusively for the ben										
				orted organizations descri						section				
				the type of supporting o						□ Tuno II	II-Other			
		a Type I	b Type		J .		lly integrate		d	туре п	II-Other			
е				rganization is not control						a a ation				
		-		rs and other than one or	more publ	iciy suppoi	neu organ	izations de	scribed iii	SECTION				
		509(a)(1) or section		to the IDS		Tuna I T	mall as T	مينو اللومية	nadina					
f		-		etermination from the IRS	tnat it is a	i type i, i	ype II, or I	ype iii sup	porting				_	
		organization, check t					au af tha		• • • • •			•••	••	
g			06, has the organiz	zation accepted any gift of	or contribu	ion iioiii a	iny or the							
		following persons?			togothoru	uth noroon	o docoribo	dun (u)				Г.:	T	
				controls, either alone or				u III (II)				Yes	No	
				y of the supported organicribed in (i) above? •••							11g(i)	<u> </u>		
											11g(ii)	1	 	
				in described in (i) or (ii) a							11g(iii)]	<u>i</u>	
<u>h</u>			· -	the supported organization	(iv) Is the o	rannation	(v) Did y	ou notify	(4)	is the	(10)	Amount	of	
	(1)	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col (i) lis	_	the organ		organizat			support	. 01	
				above or IRC section	governing o	locument?	col (i)	of your port?	(i) organiz	zed in the S?				
				(see instructions))	Yes	No	Yes	No	Yes	No				
					1.7-		-							
										ļ				
	_													
					 		 							
				, *		· **	-	- 4	-	4,24				
Tota	al		44					1	1 '		1			

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) Part II

	tion A. Public Support						
Calen	dar 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")	11,052	3,076	1,900	1,365	2,525	19,918
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 · · · · ·	11,052	3,076	1,900	1,365	2,525	19,918
5	The portion of total contributions by each	> . \$	*	ž " ⁵ ,		4	
	person (other than a governmental unit or	, , ,	* «	· "*		*	
	publicly supported organization) included			, ,	\$	*	
	on line 1 that exceeds 2% of the amount					ş ³ 5 ^,	
	shown on line 11, column (f)	-÷·	* , * , * ,	, , , , , ,	> ;"'	* '	
6	Public support. Subtract line 5 from In 4	, , ,	/ · · · · · · · · · · · · · · · · · · ·	1 1	,	· .	19,918
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4 · · · · · · · ·	11,052	3,076	1,900	1,365	2,525	19,918
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,162	7,004	8,761	3,533	1,660	26,120
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)	23,665	55,384	8,037	19,201	22,670	128,957
11	Total support. Add lines 7 through 10 -	,	, ; • 🐔 , 1	- Maria 1800 1800 1800 1800 1800 1800 1800 180	<u>``</u> ;∴∴ **		174,995
12	Gross receipts from related activities, etc. (see instructions)		• • • • • • • •	• • • • • • • • •	12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)	▶□
Sec	tion C. Computation of Public St	upport Percen	tage			Y —	
14	Public support percentage for 2009 (line 6,			ı (f)) • • • • •	• • • • • • • •		L1.38 %
15	Public support percentage from 2008 Sche	dule A, Part II, line	14	• • • • • • • • •		15	%
16a	33 1/3% support test - 2009. If the organization	ation did not check	the box on line 13	, and line 14 is 33	1/3% or more, che	ck this box	
	and stop here. The organization qualifies a						• • • • □
Ь	33 1/3% support test - 2008. If the organization	ation did not check	a box on line 13 o	r 16a, and line 15 i	s 33 1/3% or more	, check this	. =
	box and stop here. The organization qualif						••••
17a	10%-facts-and-circumstances test - 2009.						
	more, and if the organization meets the "fa	cts-and-circumstar	ices" test, check th	us box and stop he	ere. Explain in Part	IV how the	
	organization meets the "facts-and-circums						• • • • • • • • • • • • • • • • • • •
b	10%-facts-and-circumstances test - 2008.						
	more, and if the organization meets the "fa	cts-and-circumstar	nces" test, check th	ns box and stop he	e re . Explain in Part	IV how the	
	organization meets the "facts-and-circums	tances" test. The o	rganızatıon qualıfie	es as a publicly sup	ported organizatio	n • • • • • • • •	• • • • • • □
18	Private foundation. If the organization did	not check a box or	i line 13, 16a, 16b,	17a, or 17b, check	k this box and see	instructions	· · · · • X
	-						_

Page 3

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I)

							
	etion A. Public Support 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	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 bus under sec 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) · · · · · · · · · · · · · · · · · ·						
Se	ction B. Total Support				· · · · · · · · · · · · · · · · · · ·	_	_
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6 · · · · · · · · ·	<u> </u>				<u> </u>	
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						
С	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 or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	ganızatıon's first, s	econd, third, fourth	n, or fifth tax year a	is a section 501(c)	(3)	· · · · · ▶ □
<u>Se</u>	ction C. Computation of Public Su Public support percentage for 2009 (line 8, c	pport Percen	tage	(f))		15	
16	Public support percentage from 2008 Sched					16	<u> </u>
	ction D. Computation of Investme Investment income percentage for 2009 (line	nt Income Per	rcentage			17	%
18	Investment income percentage from 2008 Se					18	
	33 1/3% support tests - 2009. If the organization is not more than 33 1/3%, check this box	ation did not check	the box on line 14	, and line 15 is mo	re than 33 1/3%, a	and line	· · · · · • 🗀
b	33 1/3% support tests - 2008. If the organizatine 18 is not more than 33 1/3%, check this	ation did not check box and stop here	a box on line 14 o	r line 19a, and line i qualifies as a pub	e 16 is more than 3 dicly supported org	3 1/3%, and ganization	▶□
20	Private Foundation: If the organization did r	ot check a box on	line 14, 19a, or 19	b, check this box a	and see instruction	ıs	▶ 🛅

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047 2009

Open to Publi

Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organizations	Complete Part III			
Na	me of organization			Employer is	dentification number
Fo	ord K Sayre Memorial Ski Coun	cil, Inc.		02-024	5359
Pa	til-A Complete if the organ	ization is exempt under sec	tion 501(c) or	is a section 527 org	anization.
1	Provide a description of the organization	s direct and indirect political campaigi	activities in Part I	V	
2	Political expenditures · · · · · · ·				
3	Volunteer hours		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · <u> </u>	4,500
Pa	it I B Complete if the organ	ization is exempt under sec	tion 501(c)(3).		
1	Enter the amount of any excise tax incurr				
2	Enter the amount of any excise tax incurr				
3	If the organization incurred a section 495	5 tax, did it file Form 4720 for this yea	r> • • • • • • • •		· · Yes X No
4a	Was a correction made?		• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	· · Yes No
b	If "Yes," describe in Part IV				
Pa		ization is exempt under sec		cept section 501(c)	3)
1	Enter the amount directly expended by the				
	activities · · · · · · · · · · · · · · · · · · ·			▶ \$	
2	Enter the amount of the filing organizatio	n's funds contributed to other organiza	itions for section		
	527 exempt function activities • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	▶ \$	
3	Total exempt function expenditures Add				
	line 17b				
4	Did the filing organization file Form 1120	-POL for this year? • • • • • •	· · · · · · · · · ·		· · Yes No
5	State the names, addresses and employ	er identification number (EIN) of all se	ction 527 political c	organizations to which payr	nents
	were made. For each organization listed,	enter the amount paid from the organ	ization's funds Als	o enter the amount of polit	ıcal
	contributions received that were promptly	and directly delivered to a separate p	olitical organizatioi	n, such as a separate segr	egated
	fund or a political action committee (PAC) If additional space is needed, provide	le information in Pa	art IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

cha	edule C (Form 990 or 990-EZ) 2009 Ford K Sayre	Memorial Skı	Council, Inc.		02-0245	359 Page 2
_	art II-A Complete if the organization			(c)(3) and filed	Form 5768 (elec	ction
<u> </u>	under section 501(h)).	n to oxiompi an		(-,(-,		
A .	Check Inf the filing organization belongs to	an affiliated group				
	Check ▶ ☐ if the filing organization checked t		ntrol" provisions appl	y		
		ying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts paid	or incurred.)		organization's totals	group totals
1a						
b						
С						
d						
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f						
	columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount is			
	Not over \$500,000		ount on line 1e			+
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess ov	ver \$500,000	* , }	>
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess ov	ver \$1,000,000	****	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess over	er \$1,500,000		
	Over \$17,000,000	\$1,000,000			,	
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f) • • • • • •			-	
h	Subtract line 1g from line 1a If zero or less, ent	er -0- • • • • •				
i	Subtract line 1f from line 1c If zero or less, ente	er-0- • • • • •				
i	If there is an amount other than zero on either li	ne 1h or line 1i, did t	he organization file F	orm 4720 reporting		
·	section 4911 tax for this year?					Yes No
	(Some organizations that		riod Under Section 5		of the five	
			ons for lines 2a throu		i tile live	
					·	
	Lobb	ying Expenditures [During 4-Year Averag	ing Period		
	Calendar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
	beginning in)	(2) 2000	(=, ===:	(-,	(=, ====	(=) (= 0.00)
	50gg,					~ ·~ ·
2a	Lobbying non-taxable amount					
					<u>,</u>	
t	Lobbying ceiling amount	· · · · · · · · · · · · · · · · · · ·	4 4 4	* *	11 % #	
	(150% of line 2a, column (e))	^*	* *	4. 4	* 3 % * · ·	
	Total lobbying expenditures					
c	d Grassroots nontaxable amount					
				* .		<u> </u>
6	Grassroots ceiling amount	e e		* .		
	(150% of line 2d, column (e))	*				
f	F Grassroots lobbying expenditures					

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) Yes No	hedule C (Form 990 or 990-EZ) 2009 Ford K Sayre Memorial Ski Council, Inc.	02-	-0245	359 Page 3
Call Call	Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f	iled F	orm	5768
Duning the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Maings to members, legislators, or the public? e Publications, or published or broadcast statements? d Maings to members, legislators, or the public? e Publications, or published or broadcast statements? d Crants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? g Direct contact with legislators, their staffs, government officials, or a legislative body? g Direct contact with legislators in the staffs, government officials, or a legislative body? d Clither activities if Irves, "describe in Part IV Total Add lines 1c through 11 Dod the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 lax, did if file form 4720 for they year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Total the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures from the prior year? Did the organization make only in-house lobbying and political expenditures from the prior year? Did the organization make only in-house proad year to the prior year to the section 501(c)(4), section 501((election under section 501(h)).	1 4		/ L>
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? 1 Part staff or management (include compensation in expenses reported on lines 1c through 1))? 2 Media advertisements? 3 Mailings to members, legislators, or the public? 4 Mailings to members, legislators, or the public? 5 Publications, or published or broadcast statements? 5 Publications, or published or broadcast statements? 6 Carnats to other organizations for lobbying purposes? 9 Direct contact with legislators, their staffs, government officials, or a legislative body? 1 Total add lines 1c through 11 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 6 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 2 If "Yes," enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 2 If the filing organization incurred a section 4912 tax, did if file form 4720 for this year? 2 Did the organizationally all (50% or more) dues received nondeductible by members? 9 Did the organizationally all (50% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures from the prior year? 2 Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Did the organization agree to ca			a)	(a)
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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 Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 11 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2	e Publications, or published or broadcast statements?			
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i Other activities? If "Yes," describe in Part IV j Total Add lines to through 11 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total C Carryover from last year T avable amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? T avable amount of lobbying and political expenditures (see instructions) Supplemental Information omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1	g Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • •			
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Did the organization agree to carryover lobbying and political expenditures from the prior year?	Were substantially all (90% or more) dues received nondeductible by members / · · · · · · · · · · · · · · · · · ·			
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members				
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Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year	Dues, assessments and similar amounts from members		1	-
a Current year				· · ·
b Carryover from last year	expenses for which the section 527(f) tax was paid).			
b Carryover from last year	a Current year · · · · · · · · · · · · · · · · · · ·		2a	
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	b Carryover from last year · · · · · · · · · · · · · · · · · · ·		2b	
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	c Total		2c	
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
and political expenditure next year?				
Taxable amount of lobbying and political expenditures (see instructions)	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying			
Part IV Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i	and political expenditure next year?		4	
omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i	Taxable amount of lobbying and political expenditures (see instructions)		5	
omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i	Part IV Supplemental Information			
so, complete this part for any additional information	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line	:11		
	lso, complete this part for any additional information			
			<u></u> .	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. 2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

NOpen to Public

Name	or the organization	спроуа маникавон пштва
For	cd K Sayre Memorial Ski Council, Inc.	02-0245359
Pai		or Accounts. Complete if
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year • • • • • • • • • •	
2	Aggregate contributions to (during year) · · · ·	
3	Aggregate 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?	····· Yes 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?	
Pai		rt IV, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or pleasure)	-
	Protection of natural habitat Preservation of a certified	historic structure
	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
а	Total number of conservation easements	· 2a
b	Total acreage restricted by conservation easements	· 2b
С	Number of conservation easements on a certified historic structure included in (a)	· 2c
d	Number of conservation easements included in (c) acquired after 8/17/06 · · · · · · · · · · · · · · · · · · ·	- 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	panization 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, and enforcing conservation easements during	g the year
_	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, 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)(ı) and section 170(h)(4)(B)(ıı)?	······································
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense sta	•
	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	
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" to Form 990, Part IV, line 8	Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furthera	nce of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance s	heet 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) Revenues included in 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 ga	
	following amounts required to be reported under SFAS 116 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	· · · · · > \$
b	Assets included in Form 990, Part X	
-		·

Р	age	2
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Par	t III Organizations Maintaining Co	llections of Art, His	<u>toricai i reasures</u>	<u>, or Other Similar A</u>	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)				
а	Public exhibition	d Loan or excha	nge programs		
b	Scholarly research	e Other			
C	Preservation for future generations				
4	Provide a description of the organization's collection	s and explain how they fui	ther the organization's	exempt purpose in	
	Part XIV				
5	During the year, did the organization solicit or receiv	e donations of art, historic	al treasures, or other si	mılar	
•	assets to be sold to raise funds rather than to be ma				Yes No
Da	t IV Escrow and Custodial Arrange	aments Complete if or	ganization answered "Y	es" to Form 990.	
<u>r</u> Eal	Part IV, line 9, or reported an amount on	Form 990. Part X. line 21	•	,	
	Is the organization an agent, trustee, custodian or of		butions or other assets	not	
ıa	included on Form 990, Part X? · · · · · ·				Yes No
	If "Yes," explain the arrangement in Part XIV and co				
b	if "Yes," explain the arrangement in Part XIV and Co	implete the following table			mount
	Beginning balance				
С	Additions during the year			10	
d	Additions during the year			· · 1d	· · · · · · · · · · · · · · · · · · ·
e	Distributions during the year				
f	Ending balance · · · · · · · · · · · · · · · · · · ·			· · 1f	
2a	Did the organization include an amount on Form 99	0, Part X, line 21? • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • •	· · · Yes No
b	If "Yes," explain the arrangement in Part XIV				
Pa	t Va Endowment Funds. Complete if the	organization answered "	Yes" to Form 990, Part	IV, line 10	
	(4	a) Current year (b) Pri	or year (c) Two years	s back (d) Three years bac	k (e) Four years back
1a	Beginning of year balance		*1		
b	Contributions		, ja "	سامير دده کم از کا	
С	Net investment earnings, gains, and losses -		• \$ ~ ~ ,	, ,, [2]	p . 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d	Grants or scholarships			1	S. 2 . S. 4
e	Other expenditures for facilities				. 3. 4. 2. 3
-	and programs · · · · · · · · · · · ·			En to the second	
f	Administrative expenses · · · · · · ·		12	13 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	End of year balance			A	
g 2	Provide the estimated percentage of the year end ba	alance held as	, <u>*</u> , *	*** /	
	Board designated or quasi-endowment	%			
a	Permanent endowment > %				
b	Term endowment ▶ %				
C n-	Are there endowment funds not in the possession o	f the organization that are	held and administered	for the	
3а		i the organization that are	neid and administered	ioi tile	Yes No
	organization by				· · 3a(i)
	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·				3a(ii)
	(ii) related organizations · · · · · · · · · ·	an command on Cohodule I	72	• • • • • • • • • • • • •	
b	If "Yes" to 3a(II), are the related organizations listed				· · 3b
4	Describe in Part XIV the intended uses of the organ				
Pa	rt VI Investments - Land, Buildings	s, and Equipment.	see Form 990, Part X, II	ne 10	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land · · · · · · · · · · · · · · · · · · ·	•			
b	Buildings · · · · · · · · · · · · · · · · · · ·	•			
С	Leasehold improvements • • • • • • • • • • • • • • • • • • •	•			
d	Equipment · · · · · · · · · · · · · · · · · · ·	•	38,434	19,309	19,125
e	Other • • • • • • • • • • • • • • • • • • •				
	I. Add lines 1a through 1e (Column (d) must equal F	orm 990, Part X. column (B), line 10(c)) • •		19,125
100	. Add mics to through to (obtain to) mest odder		77		

Page 3

Part VII	Investments - Other Securities. S	ee 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	
Financial deriv	vatives · · · · · · · · · · · · · · · · · · ·			
Closely-held e	equity interests • • • • • • • • • • • • • • • • • •			
Other				
 -				
				
Total. (Column ((b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. S	see Form 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
·				
_				
				· .
				
-				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line	15		
		Description		(b) Book value
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 1	5) •••••	• • • • • • • • • • • • • • •	
Part X	Other Liabilities. See Form 990, Part X, I	ine 25		
1	(a) Description of liability	(b) Amount		
Federal incon				
USSA Fund	- Used to support USSA	2,935		
Fund to s	upport Biathlon Program	200		
			<u> </u>	
			ą.	~
			_]	
			_	
Tetal (Column	(b) must equal Form 990, Part X, col (B) line 25)	3,135	7	

ched	ule D (Form 990) 2009 Ford K Sayre Memorial Ski Council, Inc.	02-0245359	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Financial Statements	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	•
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses · · · · · · · · · · · · · · · · · ·	6	
7	Prior period adjustments · · · · · · · · · · · · · · · · · · ·	7	
8	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·	8	
9	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	9	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
	Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
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	RIF6	
– a	Net unrealized gains on investments		
b	Donated services and use of facilities • • • • • • • • • • • • • • • • 2b		
c	Recoveries of prior year grants · · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV) • • • • • • • • • • • • • • • • • •		
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	20	
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		
b	Other (Describe in Part XIV) • • • • • • • • • • • • • • • • • •		
c	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
<u>Ra</u> 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	0.78	
a	Donated services and use of facilities		
b	Prior year adjustments · · · · · · · · · · · · · · · · · · ·	- S -24-1	
c	Other losses · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·		
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:	V # 1/	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) • • • • • • • • • • • • • • • • • •		
	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	Supplemental Information		
<u>്ജങ</u> റഗ്ന	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
	part to provide any additional information		
1115	dicto provide any detailed		
			

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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.

OMB No 1545-0047

2009 Open to Publicar

Internal Revenue Service Employer identification number Name of the organization Ford K Sayre Memorial Ski Council, Inc. 02-0245359 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part Partil Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations 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 ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have (i) Name of individual (iv) Gross receipts (v) Amount paid to (ii) Activity (vi) Amount paid to or entity (fundraiser) custody or control of from activity (or retained by) (or retained by) contributions? fundraiser listed in organization col (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Con more than \$15,000 on Form 990	npiete it the organization a	inswered "tes" to norm 990 with arose receipts greater t	o, marciv, line To, of repo han \$5,000	neu
		more man \$15,000 on Form 990	(a) Event #1 Sk1 sale	(b) Event #2	(c) Other Events	(d) Total Events Add col (a) through
R			(event type)	(event type)	(total number)	col (c))
e v e	1	Gross receipts · · · · · · ·	55,174	12,710		67,884
n	2	Less Charitable		-	-	
u e		contributions · · · · · · · ·				
	3	Gross revenue (line 1	55,174	12,710		67,884
_		minus line 2) · · · · · ·		12,710		07,804
D	4	Cash prizes				
r e	5	Non-cash prizes · · · · · ·			<u> </u>	
c t	6	Rent/facility costs • • • • • •	2,007			2,007
E x	7	Food and beverages · · · · ·				
p e n	8	Entertainment				
s e s	9	Other direct expenses · · · · ·	42,156			42,156
	10	Direct expense summary Add lines	4 through 9 in column (d)		• • • • • • • • • •	(44,163)
	11	Net income summary Combine line	3, column (d), and line 10)	40	23,721
Pa	rt II	Gaming. Complete if the or than \$15,000 on Form 990-EZ		" to Form 990, Part IV, line	19, or reported more	
	Γ-	(liai) \$15,000 0ii 1 0iiii 990-L2	, inte oa	(b) Pull tabs/Instant		(d) Total gaming (Add
e			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
Revenue	1	Gross revenue · · · · · · ·				
Direct	2	Cash prizes				
ot Expe	3	Non-cash prizes				
n	4	Rent/facility costs · · · · · ·				
e s	5	Other direct expenses · · · · ·				
	6	Volunteer labor · · · · · · ·	Yes %	Yes %	Yes %) ; < "
	7	Direct expense summary Add lines	s 2 through 5 in column (d)		• • • • • • • • •	()
	8	Net gaming income summary Com	ibine line 1, column (d), ar	d line 7 · · · · · ·	• • • • • • • • • •	Yes No
9	Fn	ter the state(s) in which the organiza	tion operates gaming activ	vities		Tes No
		the organization licensed to operate			• • • • • • • • • • • • • • • • • • • •	· · · · 9a
ı		No," Explain				
	_				 	
10:	a W	ere any of the organization's gaming	licenses revoked, suspend	ded or terminated during the	e tax year? · · · ·	· · · · · 10a
ı	b If"	Yes," Explain	<u> </u>			
11	<u> </u>	pes the organization operate gaming	activites with nonmembers	37		
12	ls ·	the organization a grantor, beneficiar	y or trustee of a trust or a	member of a partnership or	other entity	
	for	med to administer charitable gaming	?			• • • • 12

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. See separate instructions. OMB No 1545-0047

2009

Internal Revenue Service	► Attach to Fo	rm 990 or	Form 99	10-EZ.	See sepa	rate instru	ictions.			S. Pin	špect	ION P	
Name of the organization								1 -	loyer ide			ber	
Ford K Sayre Me	emorial Ski Council	, Inc.						0	2-02	4535	9		
Parti Excess	Benefit Transaction	s (section	(501(c)(3) and sec	tion 501(c)(4) organız	ations only)						
Complete	of the organization answere	d "Yes" on	Form 99	90, Part IV	, line 25a or	25b, or F	orm 990-EZ	, Part \	/, line	40b		,	
1 (a) i	Name of disqualified person				a) Descriptio	n of transaction	ı					rected?
					·	<u> </u>						Yes	No
				_								ļ	ļ
			-		·····								-
							-						
													-
2 Enter the amount	of tax imposed on the organ	nization ma	anagers (or disqualif	ied nersons	during th	e vear					ļ	<u> </u>
2 Efficience amount	58 · · · · · · · · · · · · · · ·			or disquain					s				
	of tax, if any, on line 2, abov								S				
3 Enter the amount	or tax, if arry, on line 2, above	rc, iciiliba	raca by t	ino organiz	ation				•				-
Part Loans	to and/or From Intere	eted De	reone	,									
	e if the organization answere				. line 26. or	Form 990-	-EZ. Part V.	line 38	За				
	sted person and purpose	(b) Loan to			ngınal		lance due		lefault?	(f) App	nroved	(g) V	latten.
(a) Name of theres	sted person and purpose	the organ		principal	_	(4) 54	dillo dae	(0)	Ciddic	by boa			ment?
										committee?			
		То	From					Yes	No	Yes	No	Yes	No
								<u> </u>	<u> </u>				
										<u> </u>			
									<u> </u>	<u> </u>	<u> </u>	ļ	
						ļ		. 8. 60	<u> </u>		<u> </u>	ļ <u>,</u>	
									(4) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$	·: . [3	v 75	MĄ,
	s or Assistance Bene												
Complet	te if the organization answer	ed "Yes" o	n Form 9	990, Part I	V, line 27		1						
(a) Name of I	nterested person	(b) Rela	tionship be		ted person and	d the	(0) Amou	nt and ty	pe of as	ssistanc	e	
		Son of	Formor	organizatio									100
Paco DeFrancis		Son of			T MOI	-							100
Gunnar Shaw		5011 01	Counci										
							1						
	<u> </u>						 -						
Part IV Busin	ess Transactions Inv	olvina l	ntores	ted Per	eone		<u>. </u>						
	te if the organization answer					28b, or 28	С						
									of trans			(-) Ch-	
(a) Name of	nterested person		tionship be d person ai	L	(c) Amo transa		(4) 56	SCIPUO	Oi dalls	action		(e) Sha	-
			rganization									reven	
												Yes	No
Greg DeFrancis		Fmr. Co	uncil	Member	,	920	Coaching	Con	p				Х
Peh Walsh		Spouse	Counci	ıl Mbr		180	Coachine	т Сол	ID OIL			1	Y

Council Member

Child of Council Mbr

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

Schedule L (Form 990 or 990-EZ) 2009

2,925 Coaching Comp

252 Coaching Comp

Tiger Shaw

Claudia Noonan

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open to Public Inspection Employer identification number

Ford K Sayre Memorial Ski Council, Inc.	02-0245359
01. Officer, directors, etc. family relationship (Part VI, line 2)	
The following members of the Council are married:	
Jane Henry and Brian Pogue	
Michelle and Robert Couture	
02. Form 990 governing body review (Part VI, line 11)	
Copies of the Form 990 are provided to the members of the Council conte	emporaneously with
the filing of the form.	
03. Conflict of interest policy compliance (Part VI, line 12c)	
The Council maintains a conflict of interest policy that is reviewed year	early. Council
members are required to inform the governing body of any potential or a	actual conflicts of
interest.	
04. Governing documents, etc, available to public (Part VI, line 19)	,
Governing documents are available to the public upon request, through t	the NH Secretary of
State or through the website guidestar.org	

Form **4562**

Depreciation and Amortization

	(Including Information	tion on Listed P	roperty)		2009
Department of the Treasury Internal Revenue Service (99)	► See separate instructions.	► Attach to you	r tax return.		Attachment Sequence No 67
Name(s) shown on return		Business or activity to which th	s form relates		Identifying number
Ford K Sayre Memoria	l Ski Counci	FORM 990 -	1		02-0245359
Part I Election To Expens Note: If you have any liste	e Certain Property Und ed property, complete Part V be	der Section 179 fore you complete Part I			
1 Maximum amount See the instruc				1	
2 Total cost of section 179 property			[2	· · · · · · · · · · · · · · · · · · ·
3 Threshold cost of section 179 prop				3	
4 Reduction in limitation Subtract lir				4	
5 Dollar limitation for tax year Subtr	act line 4 from line 1 If zero or	less, enter -0- If married f	iling		
separately, see instructions				5	
(a) Description of p	roperty	(b) Cost (business use only)	(c) Elected cost		* * *,
6					* 5
					* '
7 Listed property Enter the amount	from line 29	7			

			* >	
7	Listed property Enter the amount from line 29 · · · · · · · · · · · · · · · · 7			
	Total elected cost of section 175 property 7 and amounts in solution (e); interest and i	8		
	Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · · · · · · · · · · ·	9		
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	·	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 · ▶ 13	,		
Note:	Do not use Part II or Part III below for listed property Instead, use Part V			

∣ Pa	rt II Special Depreciation Allowance and Other Depreciation (Do not include listed proj	perty)	(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	
·Po	MACRS Depreciation (Do not include listed property) (See instructions)		-

Part III | MACKS Depreciation (

Section A	
-----------	--

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general	.1,	
	asset accounts, check here · · · · · · · · · · · · · · · · · ·	* ,	

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and (C) Basis for depreciation (d) Recovery (business/investment use (e) Convention (f) Method year placed in (9) Depreciation deduction (a) Classification of property service only-see instructions) 3-year property 19a b 5-year property 12,584 7-year property HY S/L 899 10-year property 15-year property 20-year property 25 yrs S/L 25-year property ММ S/L 27 5 yrs Residential rental 27 5 yrs MM S/L property ММ S/L 39 yrs Nonresidential real MM S/L property Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

S/L 20a Class life 12-year 12 yrs S/L MM 40 yrs S/L 40-year Summary (see instructions) 1,775 Listed property Enter amount from line 28 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 2,674

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs OMB No 1545-0172

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

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

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

24a Do you have evidence to support the business/investme			ess/investment	use claime	ed?		Yes	No	24b lf "	"Yes," is the evidence written?					s N	łо
Т,	(a) ype of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		(d) t or other basis		(e Basıs for dep (busıness/in use o	reciation restment nly)	(f) Recovery period	Me	(g) thod/ rention		(h) reciation duction	sect	(i) ected ion 179 cost	
25	Special depreciat	ion allowance fo	r qualified lis	sted prop	erty pla	ced ır	service d	uring the	е							
	tax year and used	more than 50%	ın a qualifie	d busine	ss use	(see II	nstruction	s) -		• • • •	• 25					
26	Property used mo	ore than 50% in a	a qualified bu	usiness i	use							_				
Suk	ourban	20061213	100 %	14	,700)	14,	700	_ 5	S/L-	HY		1,775	5		
			%		- 											_
~~	Danagh wood EO	9/ 25 222 12 2 21												—J——		_
27	Property used 50	% or less in a qu	T		-					S/L-		Γ				_
	 	l. <u>.</u> l	% %							S/L-		 				
		<u> </u>	%						-			-				x.
							h 04	4		S/L-	- 00	!				
28	Add amounts in c		_						• • • • •	• • • •	- 28		1,775			
<u> 29</u>	Add amounts in c	olumn (i), line 26									• • • •	• • • •	• • • 2	9		
							on on Use									
	nplete this section t		-									-	-		es es	
to y	our employees, firs	t answer the que	estions in Se	ction C t	o see if	you n	neet an ex	ception	to completi	ng this	section	for thos	e vehicle	es		
30	Total business/inv	vestment miles d	Iriven	(a)		(b)	1	(c)	(d)		(e)	1 .	(f)	
	during the year (d			Veha	cle 1	V	ehicle 2	Vel	hicle 3	Vehic	cle 4	Veh	icle 5	Vehi	cle 6	
	commuting miles)															
31	Total commuting	miles driven duri	ing the year] -								
32	Total other person	nal (noncommuti	ing)													
	miles driven															
33	Total miles driver	during the year	Add								-			1		_
	lines 30 through 3	32														
34	Was the vehicle a			Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No	Yes	No	_
	use during off-du											_	-			_
35	Was the vehicle i		a										 			_
	more than 5% ow															
36	Is another vehicle												 	†	 	_
•	use? · · · · ·	•						į								
_	430		Questions	for Emp	lovers V	Vho P	rovide Ve	hicles fo	or Use by 1	heir Fr	nnlovee	s	<u> </u>	.1	<u> </u>	
۸	wer these question			-	_				_				aro not			
	e than 5% owners				1017 10 00	Jilipic	ing occin)	vernoles us	ica by e	mploye	CS WIIO	a16 110t			
	Do you maintain a				te all no	reona	Luca of ve	hicles i	ncludina co	mmutu	na by			Yes	No	_
31	•	• •	tatement ma	it prombi	ts all pe	13011a			including co	Jimmuu	ig, by			162	100	_
20	your employees?		tatamant tha	t probibi	to noron	nal w	o of vobu	doe ove	ont commi	itina bi					<u> </u>	_
38	Do you maintain a employees? See			•	-				•		•					
				•	•		•		1% 01 111016	owner	s •	• • • •	• • • •		 	_
39	Do you treat all us	-		-					uromplovo		· · · ·	• • • •			<u> </u>	_
40	Do you provide m					lam m	ioiiiation	nom yo	ui empioye	es abo	ut the				1	
	use of the vehicle					• • •		• • • •	• • • • • • • • • • • • • • • • • • •		• • • •	• • • •	• • • •		 	
41	Do you meet the	•	-								• • •					
	Note: If your answ	ver to 37, 38, 39,	, 40, or 41 is	"Yes," d	o not co	mple	te Section	B for the	e covered	vehicles	<u> </u>					
Pa	art VI Amort	ization											_	_		
	(a) Description of	f costs	Date amo	b) ortization gins		Amortiz	(c) zable amoun	ı	(d) Code sec	tion	(е Amortiz peпod percen	ation or	Amortiza	(f) ation for this	s year	
42	Amortization of co	osts that begins o	during your 2	2009 tax	year (se	e insi	tructions)						-			_
			T		T											
																_
43	Amortization of co	osts that began b	efore your 2	2009 tax	year •	• • •		• • • •			• • • •	43				
44	Total. Add amour						report					44				_
		(7	-				_•							orm 456	2 (2000	<u>~</u>

NEIN						
curity numbe	02-0245359	Bonus depreciation			,	ST ADJ:
Social se		Pnor expense				1
		Accumulated Depreciation	3,895	6 8	19, 309	
	-	Current depr	1,775	σ σ ω	2,674	_
		Rate	0 0 70	7.143		
		Method	T HY	ÄH H		
					-	
			3,895 5 7,255 7 14,700 9	12, 584	38, 434	
	-	Section 179	,			
		Business percentage	100 00 100.00 100.00	100.00		
		Satvage				
	l, Inc.	Cost	3,895 7,255 14,700	12, 584	38,434	38,434
	ty Counci	Date	19900101 19980201 20061213	20091221		
lame(s) as shown on return	Ford K Sayre Memorial S	Description	Computer Alpine Race Center Suburban	Race Center Upgrades	Totals	Land Amount Net Depreciable Cost
	Name(s) as shown on return	morial Ski Council, Inc.	Emorial Ski Council, Inc. Date Cost Salvage Percentage 179 Basis Life Method Rate depr Deprecation expe	Pate Cost Salvage Business Section Deprecation Life Method Rate Current Accumulated Pn	Dua Council Inc. Shope Bauers Section Deprecation Lie Method Rein Communication Properties Prope	1990 190