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Form **990**

Department of the Treasury  
Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**  
Open to Public Inspection

**A** For the 2013 calendar year, or tax year beginning 06/01/13, and ending 05/31/14

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

**C** Name of organization: **BEAVER BROOK ASSOCIATION, INC.**  
 Doing Business As: \_\_\_\_\_  
 Number and street (or P O box if mail is not delivered to street address): **117 RIDGE ROAD**  
 Room/suite: \_\_\_\_\_  
 City or town, state or province, country, and ZIP or foreign postal code: **HOLLIS NH 03049**

**D** Employer identification number: **02-0267159**

**E** Telephone number: **603-465-7787**

**F** Name and address of principal officer:  
**DREW KELLNER**  
**117 RIDGE ROAD**  
**HOLLIS NH 03049**

**G** Gross receipts \$: **1,058,376**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No" attach a list (see instructions)

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

**J** Website: **WWW.BEAVERBROOK.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Year of formation: **1964**

**M** State of legal domicile: **NH**

#### Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities SEE SCHEDULE O		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>11</b>
	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<b>5</b>	<b>38</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>198</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (A), line 7 <b>7b</b> Net unrelated business taxable income from Form 990-T, line 25		<b>0</b>
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>8</b>	<b>131,225</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>9</b>	<b>170,849</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>10</b>	<b>170,989</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>11</b>	<b>21,844</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>12</b>	<b>494,907</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>13</b>	<b>0</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>14</b>	<b>0</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>15</b>	<b>296,088</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>16</b>	<b>41,058</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>17</b>	<b>203,427</b>
Expenses	<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>18</b>	<b>499,515</b>
	<b>19</b> Revenue less expenses Subtract line 18 from line 12	<b>19</b>	<b>-4,608</b>
	<b>20</b> Total assets (Part X, line 16)	<b>20</b>	<b>6,110,269</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>21</b>	<b>49,229</b>
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	<b>22</b>	<b>6,061,040</b>

#### Part II Signature Block

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

**Sign Here**  
 Signature of officer: *David Tully*  
 Date: \_\_\_\_\_  
 Type or print name and title: **DAVID TULLY** **TREASURER**

**Paid Preparer Use Only**  
 Print/Type preparer's name: **PAUL E. SEELYE, CPA**  
 Preparer's signature: *Paul E. Seelye*  
 Date: **01/06/15**  
 Check  if self-employed  
 PTIN: **P01229372**  
 Firm's name: **SEELYE & SCHULZ PA, CPA**  
 Firm's EIN: **02-0413305**  
 Firm's address: **451 AMHERST ST STE 204 NASHUA, NH 03063-1200**  
 Phone no: **603-886-1900**

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED MAR 05 2015

INTERNAL REVENUE SERVICE  
W & I FIELD ASSISTANCE  
NASHUA, NH 03063

JAN 15 2015  
RECEIVED  
11318

3-17

Part III Statement of Program Service Accomplishments

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



1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

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

4a (Code ) (Expenses \$ 210,847 including grants of \$ ) (Revenue \$ 149,904 )

OUR ENVIRONMENTAL EDUCATION PROGRAMS ARE MULTI-FACETED, PROVIDING FIELD STUDY OPPORTUNITIES FOR LOCAL SCHOOLS, IN-SCHOOL SCIENCE PRESENTATIONS, A SUMMER YOUTH PROGRAM AND SEASONAL PROGRAMS FOR ADULTS AND CHILDREN. WALKS, FIELD TRIPS, LECTURES, WORKSHOPS, CLASSES AND AN ASSORTMENT OF SEASONAL ACTIVITIES PRESENT A WELL-ROUNDED PROGRAM DESIGNED TO EXPAND PEOPLE'S KNOWLEDGE AND ENJOYMENT OF ECOLOGY, FORESTRY, WILDLIFE AND HORTICULTURE. IN ADDITION, BEAVER BROOK ASSOCIATION (BBA) PROVIDES ADVICE AND SUPPORT TO OTHER REGIONAL ORGANIZATIONS ON EDUCATIONAL AND ENVIRONMENTAL TOPICS. BBA ALSO SUPPORTS INTERNSHIPS AND RESEARCH OPPORTUNITIES FOR COLLEGE AND UNIVERSITY STUDENTS. ON AVERAGE, BBA SERVES OVER 10,000 CHILDREN AND ADULTS EACH YEAR. THERE IS INCREASING EVIDENCE THAT A CHILD'S (CONTINUED)

4b (Code ) (Expenses \$ 135,686 including grants of \$ ) (Revenue \$ )

FORESTRY AND WILDLIFE MANAGEMENT IS PRACTICED THROUGHOUT BBA LAND FOR DEMONSTRATING SUSTAINABLE FORESTRY PRACTICES AND WILDLIFE HABITAT MANAGEMENT TECHNIQUES TO PROTECT AND ENCOURAGE A DIVERSE ARRAY OF NATIVE SPECIES. THE 2,100 ACRES ARE A DESIGNATED TREE FARM AND MANAGED FOR TIMBER HARVESTING IN ACCORDANCE WITH BEST MANAGEMENT PRACTICES. FORESTRY DEMONSTRATIONS INFORM THE COMMUNITY OF THE VALUE OF THIS RENEWABLE RESOURCE AND PRINCIPLES OF WISE LAND STEWARDSHIP. OUR LAND PROTECTION EFFORTS ARE CONCENTRATED ON ACQUIRING ABUTTING PARCELS OF LAND TO ENHANCE THE EXISTING PRESERVE. A MAJOR EFFORT IS NOW UNDERWAY TO ENSURE THAT BBA'S CURRENT HOLDINGS REMAIN UNDEVELOPED, THROUGH CONSERVATION EASEMENTS HELD BY A LIKE-MINDED ORGANIZATION. WE HAVE PLACED CONSERVATION (CONTINUED)

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

4d Other program services (Describe in Schedule O )

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

4e Total program service expenses 346,533

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> 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)		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes rows for 1a-1c, 2a-2b, 3a-3b, 4a-4a, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

**Section A. Governing Body and Management**

		Yes	No
1a	11		
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	11		
b Enter the number of voting members included in line 1a, above, who are independent.			
2			X
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3			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?			
4			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
5			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			
6			X
6 Did the organization have members or stockholders?			
7a			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			
b			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8			
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a		X	
a The governing body?			
b		X	
b Each committee with authority to act on behalf of the governing body?			
9			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.			

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

		Yes	No
10a			X
10a Did the organization have local chapters, branches, or affiliates?			
b			
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a			X
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
b			
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		X	
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.			
b		X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
c			
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.			
13		X	
13 Did the organization have a written whistleblower policy?			
14		X	
14 Did the organization have a written document retention and destruction policy?			
15			
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a			X
a The organization's CEO, Executive Director, or top management official.			
b			X
b Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a			X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
b			
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed:  NH
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  DAVE TULLY 117 RIDGE ROAD

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

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GLENN LLOYD VICE PRESIDENT	1.00 0.00	X		X				0	0	0
(2) DREW KELLNER PRESIDENT	1.00 0.00	X		X				0	0	0
(3) DAVE TULLY TREASURER	1.00 0.00	X		X				0	0	0
(4) BOB BARTIS SECRETARY	1.00 0.00	X		X				0	0	0
(5) ART LYFORD TRUSTEE	1.00 0.00	X						0	0	0
(6) ALAN CHASE TRUSTEE	1.00 0.00	X						0	0	0
(7) WALLACE KEY TRUSTEE	1.00 0.00	X						0	0	0
(8) SHIRLEY COHEN TRUSTEE	1.00 0.00	X						0	0	0
(9) JUNE LITWIN TRUSTEE	1.00 0.00	X						0	0	0
(10) CJ HUSK TRUSTEE	1.00 0.00	X						0	0	0
(11) JAY NANNICELLI TRUSTEE	1.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) THOM DAVIES EXEC DIR	20.00 0.00			X				0	0	0
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

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

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

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

**Section B. Independent Contractors**

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

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

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

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 272,381				
	<b>g</b> Noncash contributions included in lines 1a-1f	\$				
	<b>h Total. Add lines 1a-1f</b>	▶	272,381			
<b>Program Service Revenue</b>	<b>2a</b> NATURE PROGRAMS, LECTURES ETC	<b>Busn. Code</b>	136,582	136,582		
	<b>b</b>					
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>	▶	136,582			
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	▶	122,676		122,676
<b>4</b> Income from investment of tax-exempt bond proceeds		▶				
<b>5</b> Royalties		▶				
<b>6a</b> Gross rents		(i) Real	20,788			
		(n) Personal				
<b>b</b> Less rental exps		5,395				
<b>c</b> Rental inc or (loss)		15,393				
<b>d Net rental income or (loss)</b>		▶	15,393	15,393		
<b>7a</b> Gross amount from sales of assets other than inventory		(i) Securities	497,778			
		(ii) Other				
<b>b</b> Less cost or other basis & sales exps		410,163				
<b>c</b> Gain or (loss)		87,615				
<b>d Net gain or (loss)</b>		▶	87,615	87,615		
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		<b>a</b>				
<b>b</b> Less direct expenses		<b>b</b>				
<b>c Net income or (loss) from fundraising events</b>	▶					
<b>9a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>					
<b>b</b> Less direct expenses	<b>b</b>					
<b>c Net income or (loss) from gaming activities</b>	▶					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less cost of goods sold	<b>b</b>					
<b>c Net income or (loss) from sales of inventory</b>	▶					
Miscellaneous Revenue		<b>Busn Code</b>				
<b>11a</b> OTHER REVENUE			8,171	8,171		
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total. Add lines 11a-11d</b>	▶		8,171			
<b>12 Total revenue. See instructions</b>	▶		642,818	247,761	0 122,676	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to 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 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	268,480	206,595	52,291	9,594
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	16,721	16,721		
10 Payroll taxes	21,881	16,838	4,262	781
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	6,100		6,100	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	17,035		17,035	
12 Advertising and promotion	1,125			1,125
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	10,622	6,331	3,386	905
17 Travel	6,768	6,393	300	75
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	15,306	14,197	836	273
23 Insurance	21,969	15,378	4,394	2,197
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a SUPPLIES & MATERIALS	36,168	20,030	16,138	
b MAINTENANCE & REPAIR	23,912	15,842	6,957	1,113
c FUNDRAISING EXPENSES	21,127			21,127
d 50TH ANNIVERSARY EXPENSES	15,966		15,966	
e All other expenses	53,019	28,208	20,943	3,868
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>536,199</b>	<b>346,533</b>	<b>148,608</b>	<b>41,058</b>
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing		1	
	2 Savings and temporary cash investments	447,555	2	485,059
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	11,115	4	13,219
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	12,161	9	10,559
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,329,158		
	b Less accumulated depreciation	10b 780,226	10c 1,536,670	1,548,932
	11 Investments—publicly traded securities	4,102,768	11	4,535,242
	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 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	6,110,269	16	6,593,011	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	6,463	17	14,309
	18 Grants payable		18	
	19 Deferred revenue	41,266	19	57,548
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,500	25	1,500
	26 <b>Total liabilities.</b> Add lines 17 through 25	49,229	26	73,357
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	1,952,130	27	2,282,356
	28 Temporarily restricted net assets	87,578	28	210,966
	29 Permanently restricted net assets	4,021,332	29	4,026,332
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 <b>Total net assets or fund balances</b>	6,061,040	33	6,519,654	
34 <b>Total liabilities and net assets/fund balances</b>	6,110,269	34	6,593,011	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	642,818
2	Total expenses (must equal Part IX, column (A), line 25)	2	536,199
3	Revenue less expenses Subtract line 2 from line 1	3	106,619
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,061,040
5	Net unrealized gains (losses) on investments	5	435,539
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-83,544
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,519,654

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
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?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

**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.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

BEAVER BROOK ASSOCIATION, INC.

Employer identification number

02-0267159

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III—Functionally integrated
  - d  Type III—Non-functionally integrated
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f  If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
  - (ii) A family member of a person described in (i) above?
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

**h Provide the following information about the supported organization(s)**

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2013

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a <b>33 1/3% support test—2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b <b>33 1/3% support test—2012.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2013.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2012.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2012 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2012 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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**Part IV** **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

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**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

Open to Public Inspection

Name of the organization

BEAVER BROOK ASSOCIATION, INC.

Employer identification number

02-0267159

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

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

	(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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.**

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	5
b Total acreage restricted by conservation easements	124.70
c Number of conservation easements on a certified historic structure included in (a)	0
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 1

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 the year ▶ 15

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)(i) and section 170(h)(4)(B)(ii)?  Yes  No

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

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

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

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

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

(i) 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 gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

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

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

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

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

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

**Part IV Escrow and Custodial Arrangements.**

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

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

	Amount
1c	
1d	
1e	
1f	

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

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Yes  No

**Part V Endowment Funds.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,021,332	3,773,591	3,773,591	3,760,195	3,760,195
b Contributions	5,000	247,741		13,396	
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	4,026,332	4,021,332	3,773,591	3,773,591	3,760,195

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

- a Board designated or quasi-endowment  %
- b Permanent endowment  100.00 %
- c Temporarily restricted endowment  %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,440,558		1,440,558
b Buildings		673,574	637,838	35,736
c Leasehold improvements		55,980	13,683	42,297
d Equipment		151,555	123,962	27,593
e Other		7,491	4,743	2,748
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,548,932

**Part VII Investments—Other Securities.**

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

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

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SECURITY DEPOSIT	1,500
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	1,500

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

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

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

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

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

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII )	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )		5	

**Part XIII Supplemental Information**

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

PART II, LINE 9 - ACCOUNTING FOR CONSERVATION EASEMENTS

EASEMENTS ARE CAPITALIZED AT THEIR FAIR MARKET VALUE IN THE PERIOD RECEIVED, IF MATERIAL.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE ASSOCIATION HAS DETERMINED THAT THE ENDOWMENT FUNDS MUST BE MAINTAINED AT THEIR HISTORICAL DOLLAR VALUE. INCOME FROM THE ENDOWMENTS IS TO BE USED IN ACCORDANCE WITH THE ORIGINAL DONORS' STIPULATIONS. THE ASSOCIATION HAS DETERMINED THAT IT IS PRUDENT AND APPROPRIATE TO EXPEND 4.5% OF THE FAIR MARKET VALUE OF THE ENDOWMENT ON A TRAILING 12-QUARTER ROLLING AVERAGE.

THE INVESTMENT POLICY IS INTENDED TO PRESERVE AND INCREASE THE REAL PRINCIPAL VALUE OF ITS ENDOWMENT FUND, WHILE PROVIDING A DEPENDABLE STREAM OF INCOME FOR THE OPERATION OF THE ASSOCIATION AND ITS PROGRAMS. THE TRUSTEES CAREFULLY WEIGH RISK/RETURN CHARACTERISTICS IN THEIR ASSET

**Part XIII Supplemental Information (continued)**

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ALLOCATION DECISIONS. THE TRUSTEES HAVE ELECTED A TOTAL-RETURN POLICY TO PROVIDE THE ASSOCIATION WITH A MAXIMUM POTENTIAL RETURN ON INVESTMENTS AND FUNDS AVAILABILITY FOR OPERATIONS AND LONG-TERM GROWTH OVER TIME.

**PART X - FIN 48 FOOTNOTE**

THE ASSOCIATION'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AUTHORITIES. THE ASSOCIATION'S OPEN AUDIT PERIODS ARE 2010 THROUGH 2013. THE ASSOCIATION BELIEVES IT HAS MET ALL THE REQUIREMENTS TO MAINTAIN ITS NOT-FOR-PROFIT STATUS AND DOES NOT HAVE ANY UNRELATED BUSINESS INCOME WHICH WOULD RESULT IN TAXABLE INCOME. IT IS THE ASSOCIATION'S POLICY TO EXPENSE WHEN PAID ANY INTEREST AND PENALTIES ASSOCIATED WITH ITS INCOME TAX OBLIGATIONS.

**SCHEDULE E**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Schools**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

Open to Public Inspection

Name of the organization

BEAVER BROOK ASSOCIATION, INC.

Employer identification number

02-0267159

**Part I**

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II.  
ALL MEDIA ANNOUNCEMENTS FOR SOLICITATION OF STUDENTS CONTAIN A STATEMENT OF RACIALLY NONDISCRIMINATORY POLICY. THIS POLICY ALSO APPEARS ON ALL PRINTED MATERIALS, REGISTRATION INFORMATION FOR COURSES, AND REGISTRATION FORMS.
- 4 Does the organization maintain the following?
  - a Records indicating the racial composition of the student body, faculty, and administrative staff?
  - b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
  - c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
  - d Copies of all material used by the organization or on its behalf to solicit contributions?  
If you answered "No" to any of the above, please explain. If you need more space, use Part II.

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a		X
6b		X
7	X	

- 5 Does the organization discriminate by race in any way with respect to
  - a Students' rights or privileges?
  - b Admissions policies?
  - c Employment of faculty or administrative staff?
  - d Scholarships or other financial assistance?
  - e Educational policies?
  - f Use of facilities?
  - g Athletic programs?
  - h Other extracurricular activities?  
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.
- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- 6b Has the organization's right to such aid ever been revoked or suspended?  
If you answered "Yes" to either line 6a or line 6b, explain on Part II.
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.

**Part II** **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

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

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013****Open to Public  
Inspection**

Employer identification number

BEAVER BROOK ASSOCIATION, INC.

02-0267159

## FORM 990 - ORGANIZATION'S MISSION

BEAVER BROOK ASSOCIATION'S MISSION IS TO PROMOTE AN UNDERSTANDING OF INTERRELATIONSHIPS IN THE NATURAL WORLD AND TO ENCOURAGE CONSERVATION OF NATURAL RESOURCES THROUGH EDUCATION AND STEWARDSHIP. ITS GOAL IS TO OFFER AN OUTDOOR CLASSROOM EXPERIENCE FOR PEOPLE OF ALL AGES TO GAIN EXPOSURE TO NATURE AND LEARN MORE ABOUT THE WAY THEIR NATURAL RESOURCES COULD BE MANAGED IN A SOUND AND PRODUCTIVE MANNER.

## FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

CONNECTION TO NATURE CAN NURTURE CREATIVITY, LEARNING, AND POSITIVELY MODIFY BEHAVIORS. THE RELATIONSHIP BETWEEN A CHILD'S EXPOSURE TO NATURE AND THE DEVELOPMENT OF THESE LIFE SKILLS AND BEHAVIORS IS VERY STRONG. SOUTHERN NEW HAMPSHIRE IS GROWING AT A RAPID PACE AND ACCESS TO NATURAL AREAS IS IN DECLINE. BEAVER BROOK PROVIDES A CONVENIENT OUTDOOR DESTINATION FOR PEOPLE ANYWHERE FROM NASHUA, MANCHESTER, AND CONCORD, NEW HAMPSHIRE TO BOSTON TO EXPERIENCE NATURE FIRSTHAND. SCHOOLS FROM AS FAR AS AN HOUR AND A HALF AWAY ATTEND OUR FIELD STUDY PROGRAMS. WE DESIRE PEOPLE TO LEARN THAT EDUCATION IS "CONNECTED TO LIFE" AND NOT BOUND TO A SCHOOL SETTING. BEAVER BROOK'S PRIMARY ACTIVITY IS PROVIDING QUALITY OUTDOOR, ENVIRONMENTAL EDUCATION WITH EXPERIENTIAL LEARNING OPPORTUNITIES.

## FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

EASEMENTS ON MORE THAN 800 ACRES OF LAND SINCE THE SUCCESSFUL COMPLETION OF OUR BEAVER BROOK FOREVER CAMPAIGN THAT RAISED FUNDS FOR THIS EFFORT.

Name of the organization

BEAVER BROOK ASSOCIATION, INC.

Employer identification number

02-0267159

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
 THE FORM 990 IS REVIEWED AND APPROVED BY THE TREASURER, THEN A NOTICE IS  
 DISTRIBUTED TO THE BOARD OF TRUSTEES THAT THE DOCUMENT IS AVAILABLE FOR  
 REVIEW UPON REQUEST.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY  
 THE BOARD OF TRUSTEES IS REQUIRED TO FILE AN ANNUAL STATEMENT INDICATING  
 WHETHER OR NOT ANY CONFLICTS OF INTEREST EXIST.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
 GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER

BOOK/TAX REALIZED GAIN DIFFERENCE	\$	-83,544
RENTAL EXPENSES	\$	-5,395
RENTAL EXPENSES	\$	5,395

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

**2013**

Attachment Sequence No **179**

Name(s) shown on return

BEAVER BROOK ASSOCIATION, INC.

Identifying number

02-0267159

Business or activity to which this form relates

INDIRECT DEPRECIATION

**Part I Election To Expense Certain Property Under Section 179**

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

1	Maximum amount (see instructions)	1.	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2012 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 2014 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.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	14,147

**Part III MACRS Depreciation (Do not include listed property) (See instructions)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	316
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

**Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

**Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (See instructions)**

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	14,463
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2013)

**Federal Statements**

**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER FEES	\$ 17,035	\$	\$ 17,035	\$
TOTAL	\$ 17,035	\$ 0	\$ 17,035	\$ 0

**Form 990, Part IX, Line 24e - All Other Expenses**

Description	Total Expenses	Program Service	Management & General	Fund Raising
PRINTING	\$ 9,815	\$ 9,815	\$	\$
SUBCONTRACTORS	9,155		9,155	
CONSERVATION EASEMENTS	7,035	7,035		
PROPERTY DEFENSE FUND EXP	5,244		5,244	
BAD DEBT EXPENSES	4,732		4,732	
TELEPHONE	4,115	2,880	823	412
BANK & CREDIT CARD FEES	4,096	3,686		410
GRANT WRITING COST	2,240			2,240
PAYROLL PROCESSING FEES	1,921	1,478	374	
GARDENING SUPPLIES	1,689	1,689		69
POSTAGE	1,188		476	712
TIMBER TAX	1,074	1,074		
PROFESSIONAL DEVELOPMENT	715	551	139	25
TOTAL	\$ 53,019	\$ 28,208	\$ 20,943	\$ 3,868

BEAVER BROOK  
STOCK SALES  
5/31/2014

DESCRIPTION	DATE	SHARES	PROCEEDS	COST	GAIN
VANGUARD					
LARGE-CAP INDEX FUND ADM	6/20/2013	571 238	21,033 00	13,201.31	7,831.69
LARGE-CAP INDEX FUND ADM	11/8/2013	147 716	6,065.22	3,413.71	2,651 51
MID-CAP INDEX FUND ADM	6/20/2013	190 453	22,024.00	12,632 74	9,391 26
MID-CAP INDEX FUND ADM	11/8/2013	84.092	11,032 09	5,577 82	5,454 27
SMALL-CAP INDEX FUND ADM	6/20/2013	579.233	25,521 00	14,538.74	10,982 26
SMALL-CAP INDEX FUND ADM	11/8/2013	304 547	15,416 15	7,644.12	7,772 03
TOTAL INTL STOCK ADM	11/8/2013	14.373	395 39	324.82	70 57
VANGUARD ENERGY ETF	6/20/2013	20 000	2,259.56	1,564 40	695.16
TOTAL VANGUARD			103,746 41	58,897.66	44,848 75
CHARLES SCWAB					
SCOTTS MIRACLE GROW	6/4/2013	800.000	37,439.12	32,191 58	5,247 54
MASSACHUSETTS ST	8/1/2013	50,000 000	50,000 00	52,406 04	(2,406 04)
WALGREEN COMPANY	10/11/2013	200.000	11,197 46	6,400 00	4,797 46
CHICAGO ILL	1/1/2014	40,000 000	40,000 00	42,830 97	(2,830.97)
CHUBB CORPORATION	1/7/2014	100 000	9,321 79	4,193 00	5,128.79
DOW CHEMICAL COMPANY	1/7/2014	200 000	8,585.50	3,088 00	5,497 50
HERSHEY COMPANY	1/7/2014	100 000	9,708 78	3,747 00	5,961 78
INTL FLAVORS & FRAGRANCES	1/7/2014	100 000	8,545 30	3,300 00	5,245 30
WALGREEN COMPANY	1/7/2014	100.000	5,798 25	3,200 00	2,598 25
METLIFE INC	2/6/2014	50,000 000	50,000 00	51,469 08	(1,469 08)
US TREASUR NT	4/30/2014	50,000 000	50,000 00	50,074 60	(74 60)
FED HOME LN BKS	5/14/2014	50,000 000	50,000 00	49,748 89	251.11
CISCO SYSTEMS	5/14/2014	2,000 000	45,574 04	38,878 43	6,695.61
PFIZER INC	5/22/2014	600 000	17,861 54	9,738.00	8,123 54
TOTAL CHARLES SCHWAB			394,031 78	351,265.59	42,766 19
			497,778 19	410,163 25	87,614.94