

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short 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)
▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2001

Open to Public Inspection

A For the 2001 calendar year, or tax year beginning AUGUST 1, 2001, and ending JULY 31, 2002

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization		D Employer identification number
		CONCERNED CITIZENS OF MONTAUK, INC		11-2517191
		Number and street (or P O box, if mail is not delivered to street address) Room/suite		E Telephone number
		PO BOX 915		631-668-6473
City or town state or country and ZIP + 4		F Enter 4-digit (GEN) ▶		
MONTAUK, NY 11954				

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)
G Accounting method Cash Accrual
 Other (specify) ▶

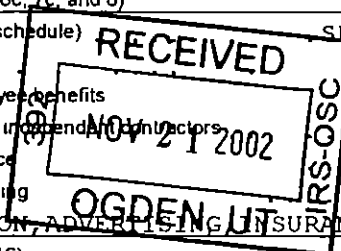
I Web site ▶
J Organization type (check only one) - 501(c)(3) (insert no) 4947(a)(1) or 527
H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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

L Add lines 5b, 6b, and 7b to line 9 to determine gross receipts. If \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 40,289

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 35)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	15,784
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	9,900
	4	Investment income	4	1,854
	5 a	Gross amount from sale of assets other than inventory	5 a	
	5 b	Less: cost or other basis and sales expenses	5 b	
	5 c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5 c	
	6	Special events and activities (attach schedule)		
	6 a	Gross revenue (not including \$ of contributions reported on line 1)	6 a	12,752
6 b	Less: direct expenses other than fundraising expenses	6 b	7,908	
6 c	Net income or (loss) from special events and activities (line 6a less line 6b) SEE STATEMENT 1	6 c	4,844	
7 a	Gross sales of inventory, less returns and allowances	7 a		
7 b	Less: cost of goods sold	7 b		
7 c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7 c		
8	Other revenue (describe ▶)	8		
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ▶	9	32,382	
Expenses	10	Grants and similar amounts paid (attach schedule) SEE STATEMENT 2	10	7,850
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	7,219
	14	Occupancy, rent, utilities, and maintenance	14	1,276
	15	Printing, publications, postage, and shipping	15	2,237
	16	Other expenses (describe ▶ EDUCATION, ADVERTISING, INSURANCE & SUPPLIES)	16	12,393
	17	Total expenses (add lines 10 through 16) ▶	17	30,975
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	1,407
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	100,262
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20) ▶	21	101,669



Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See Specific Instructions on page 39)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	100,262	101,669
23	Land and buildings		
24	Other assets (describe ▶)		
25	Total assets	100,262	101,669
26	Total liabilities (describe ▶)		
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	100,262	101,669

SCANNED DEC 18 02

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 40)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? ENVIRONMENTAL PRESERVATION		
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	ACTIONS TAKEN TO PRESERVE LAKE MONTAUK AND MONTAUK IN GENERAL INCLUDING LEGAL PROCEEDING AND SIGNAGE, AS WELL AS SUPPORT TO THE LOCAL FIRE DEPARTMENT & VILLAGE ASSOCIATION (Grants \$ 7,850)	28a 15,069
29	PREPARATION AND PRINTING OF NEWSLETTERS ON ENVIRONMENTAL ISSUES (Grants \$)	29a 5,674
30	TO INFORM THE COMMUNITY-AT-LARGE ON MONTAUK ENVIRONMENTAL ISSUES (Grants \$)	30a 5,338
31	Other program services (attach schedule) (Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32 26,081

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See Specific Instructions on page 40)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 3				

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes" attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes" attach a conformed copy of the changes		X
35	If the organization had income from business activities such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes" has it filed a tax return on Form 990-T for this year?	N	A
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	NONE
b	Did the organization file Form 1120-POL for this year?		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	N/A
39	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9	39a	N/A
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 0, section 4912 0, section 4955 0		
b	501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation		X
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 40c above reimbursed by the organization		0
41	List the states with which a copy of this return is filed		NEW YORK
42	The books are in care of		SHIRLEY KAT Z Telephone no 631-668-3422
	Located at		PO BOX 915, MONTAUK, NY ZIP + 4 11954
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		
	and enter the amount of tax-exempt interest received or accrued during the tax year		43

including accompanying schedules and statements and to the best of my knowledge (or than officer) is based on all information of which preparer has any knowledge

Date Nov 9 '02

Part III Statements About Activities (See page 2 of the instructions)

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

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

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

Provide the following information about the supported organizations (See page 5 of the instructions)

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

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

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

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

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total	
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	21,521	12,800	35,728	23,841	93,890	
16 Membership fees received	19,635	15,951	12,820	18,295	66,701	
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose						
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	4,256	3,272	2,372	2,583	12,483	
19 Net income from unrelated business activities not included in line 18						
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets			3,700		3,700	
23 Total of lines 15 through 22	45,412	32,023	54,620	44,719	176,774	
24 Line 23 minus line 17	45,412	32,023	54,620	44,719	176,774	
25 Enter 1% of line 23	454.12	320.23	546.2	447.19		
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a	N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					26b	N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c	N/A
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d	N/A
e Public support (line 26c minus line 26d total)					26e	N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f	N/A %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of and total amounts received in each year from each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2000) _____ 15,500 (1999) _____ 12,500 (1998) _____ 17,500 (1997) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2000) _____ 0 (1999) _____ 0 (1998) _____ 0 (1997) _____ 0						
c Add: Amounts from column (e) for lines 15 _____ 93,890 16 _____ 66,701 17 _____ 20 _____ 21 _____					27c	160,591
d Add: Line 27a total _____ 45,500 and line 27b total _____					27d	45,500
e Public support (line 27c total minus line 27d total)					27e	115,091
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f	176,774
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g	65.1062 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h	7.0615 %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.						

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

(To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38 Total lobbying expenditures (add lines 36 and 37)	38													
39 Other exempt purpose expenditures	39													
40 Total exempt purpose expenditures (add lines 38 and 39)	40													
41 Lobbying nontaxable amount. Enter the amount from the following table - <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">If the amount on line 40 is -</td> <td style="width: 50%;">The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	If the amount on line 40 is -	The lobbying nontaxable amount is -	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	
If the amount on line 40 is -	The lobbying nontaxable amount is -													
Not over \$500,000	20% of the amount on line 40													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
42 Grassroots nontaxable amount (enter 25% of line 41)	42													
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43													
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44													

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

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

Schedule of Contributors

2001

Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

Name of organization

Employer identification number

CONCERNED CITIZENS OF MONTAUK, INC

11-2517191

Organization type (check one)

Filers of

Section

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule** (Note Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule - see instructions)

General Rule -

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules -

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year)

▶ \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

CONCERNED CITIZENS OF MONTAUK, INC

11-2517191

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		8,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2		5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution

Name of organization

CONCERNED CITIZENS OF MONTAUK, INC

Employer identification number

11-2517191

Part II Noncash Property (See Specific Instructions) NONE

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____

Name of organization

CONCERNED CITIZENS OF MONTAUK, INC

Employer identification number

11-2517191

Part III Exclusively religious, charitable, etc. individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once - see instructions) ▶ \$

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

990-EZ, STATEMENT 1

Concerned Citizens of Montauk, Inc
Special Events Revenue & Expenses
2001

11-2517191

<u>Event</u>	<u>Gross</u> <u>Receipts</u>	<u>Contributions</u> <u>included</u>	<u>Gross</u> <u>Revenue</u>	<u>Direct</u> <u>Expenses</u>	<u>Net Income</u> <u>(Loss)</u>
Annual Gala & Poster Sales	\$ 12,752	\$ -	\$ 12,752	\$ 7,908	\$ 4,844

11-2517191

**Concerned Citizens of Montauk, Inc
Grants and Similar Amounts Paid
2001**

<u>CLASSIFICATION</u>	<u>DONEE'S NAME & ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
Environmental Preservation	Water Quality & Land Preserve Group for the South Fork	None	5,500
Environmental Preservation	Third House Nature Center	None	1000
Environmental Preservation	Montauk Village Association	None	250
Environmental Preservation	Montauk Fire Department South Edgemere Rd Montauk, NY 11954	None	1100
Total Included on Form 990-EZ, Line 10			<u>\$ 7,850</u>

<u>Name Address</u>	<u>Position</u>	<u>Compensation</u>	<u>Contributions to Employee Plans</u>	<u>Expense Allowances</u>
Bill Akin 10 Flanders Rd, Montauk, NY 11954	President	NONE	NONE	NONE
Dorothy Disken 21 Pinetree Dr, Montauk, NY 11954	Vice-President	NONE	NONE	NONE
Celine Keating Atlantic Bluff Club B10, Montauk, NY 11954	Vice-President	NONE	NONE	NONE
Martin Post 84 Surfside Ave, Montauk, NY 11954	Vice-President	NONE	NONE	NONE
Shirley Katz 119 East Lake Dr, Montauk, NY 11954	Treasurer	NONE	NONE	NONE
Rita McKernan 115 East Lake Dr, Montauk, NY 11954	Secretary	NONE	NONE	NONE
Hy Brodsky 90 Laurel Dr , Montauk, NY 11954	Board Member	NONE	NONE	NONE
Kay Carley 277 East Lake Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Bill Chomooky 58 Cleveland Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Ray Cortell 33 Grant Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Conrad Costanzo 54 Surfside Ave, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Lillian Disken 21 Pinetree Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Julie Evans- Brumm 24 S Dewey Pl, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Jean Fischer 19 Big Reed Path, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Rav Freidel 677 Old Montauk Hwy, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Veronica Garvey 61 Pinetree Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Lisa Grenci 135 Tuthill Rd, Montauk, NY 11954	Board Member	NONE	NONE	NONE

Richard Johnson 11 Big Reed Path, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Richard Kahn 224 West Lake Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Peter Lowenstein 11 East Lake Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Mana Lubinska 359 Old Montauk Hwy, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Hilary Molnar 152 S Fairview, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Carol Morrison 20 Hamilton Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Ed Porco 148 Monroe Dr, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Larry Smith 17 Beech St, Montauk, NY 11954	Board Member	NONE	NONE	NONE
John Taylor Atlantic Bluff Club, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Eugene White 240 Old Montauk Hwy, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Gene Wolsk 187 Old Montauk Hwy, Montauk, NY 11954	Board Member	NONE	NONE	NONE
Chris Yula 45 Riverbend Rd , Clinton, NJ 08809	Board Member	NONE	NONE	NONE