

Return of Organization Exempt from Income Tax

2003

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning , 2003, and ending

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

Please use IRS label or print or type. See specific instructions.
WAREHAM LAND TRUST
P.O. BOX 718
WAREHAM, MA 02571

D Employer Identification Number
04-3548680

E Telephone number
508-295-3646

F Accounting method: Cash Accrual
 Other (specify) _____

H and I are not applicable to section 527 organizations
H (a) Is this a group return for affiliates? Yes No
H (b) If 'Yes,' enter number of affiliates . _____
H (c) Are all affiliates included? Yes No
 (If 'No,' attach a list. See instructions.)
H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Web site: ▶ N/A

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

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

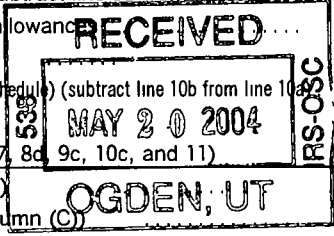
L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **448,078.**

I Group Exemption Number ▶ _____

M Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

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

REVENUE	1 Contributions, gifts, grants, and similar amounts received:					
	a Direct public support	1a	288,835.			
	b Indirect public support	1b				
	c Government contributions (grants)	1c				
	d Total (add lines 1a through 1c) (cash \$ 125,784. noncash \$ 163,051.)	1d			288,835.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3 Membership dues and assessments	3			8,950.	
	4 Interest on savings and temporary cash investments	4			1,319.	
	5 Dividends and interest from securities	5				
	6a Gross rents	6a				
	b Less: rental expenses	6b				
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c				
	7 Other investment income (describe _____)	7				
	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		148,597.	8a			
		148,052.	8b			
		545.	8c			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			545.	
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	377.			
	b Less: direct expenses other than fundraising expenses	9b	275.			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			102.		
10a Gross sales of inventory, less returns and allowances		10a				
	b Less: cost of goods sold	10b				
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11 Other revenue (from Part VII, line 103)	11					
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8c, 9c, 10c, and 11)	12			299,751.		
13 Program services (from line 44, column (B))	13			690.		
14 Management and general (from line 44, column (C))	14			8,023.		
15 Fundraising (from line 44, column (D))	15					
16 Payments to affiliates (attach schedule)	16					
17 Total expenses (add lines 16 and 44, column (A))	17			8,713.		
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			291,038.		
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			117,354.		
20 Other changes in net assets or fund balances (attach explanation)	20					
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			408,392.		



REVENUE
SCANNED
JUN 15 2004

6-13

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) (cash \$ _____ non-cash \$ _____)	22			
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31	1,850.	1,850.	
32	Legal fees	32			
33	Supplies	33	147.	147.	
34	Telephone	34			
35	Postage and shipping	35	183.	183.	
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38	425.	425.	
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize)				
a	SEE STATEMENT 3	43a	6,108.	690.	5,418.
b		43b			
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	8,713.	690.	8,023. 0.

Joint Costs. Check if you are following SOP 98-2.

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

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 4
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)

a	REAL ESTATE TAXES PAID ON LAND ACQUIRED FOR THE PURPOSE OF PROTECTING OPEN SPACE. (Grants and allocations \$ _____)	690.
b	 (Grants and allocations \$ _____)	
c	 (Grants and allocations \$ _____)	
d	 (Grants and allocations \$ _____)	
e	Other program services (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	690.

Part IV Balance Sheets (See Instructions)

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing	8,316.	45	666.
	46 Savings and temporary cash investments	109,038.	46	215,280.
	47 a Accounts receivable	47 a		
	b Less: allowance for doubtful accounts	47 b		47 c
	48 a Pledges receivable	48 a		
	b Less: allowance for doubtful accounts	48 b		48 c
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less: allowance for doubtful accounts	51 b		51 c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments – securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments – land, buildings, & equipment, basis	55 a 270,446.		
	b Less: accumulated depreciation (attach schedule)	55 b STATEMENT 5.		55 c 270,446.
	56 Investments – other (attach schedule)		56	
	57 a Land, buildings, and equipment, basis	57 a		
	b Less: accumulated depreciation (attach schedule)	57 b		57 c
58 Other assets (describe ►)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	117,354.	59	486,392.	
LIABILITIES	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)	SEE STATEMENT 6	64 b	78,000.
	65 Other liabilities (describe ►)		65	
66 Total liabilities (add lines 60 through 65)	0.	66	78,000.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	117,354.	70	408,392.
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21)	117,354.	73	408,392.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	117,354.	74	486,392.

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

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, and other support per audited financial statements	a	300,027.
b	Amounts included on line a but not on line 12, Form 990.		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	SEE STM 7 \$ 276.		
	Add amounts on lines (1) through (4)	b	276.
c	Line a minus line b	c	299,751.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	299,751.

a	Total expenses and losses per audited financial statements	a	8,989.
b	Amounts included on line a but not on line 17, Form 990.		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		
	SEE STMT 8 \$ 276.		
	Add amounts on lines (1) through (4)	b	276.
c	Line a minus line b	c	8,713.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	8,713.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions.)

(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 and deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 9		0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
 If 'Yes,' attach schedule — see instructions.

Part VI Other Information (See instructions.)

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If 'Yes,' enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	0.	
b	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A	
c	Dues, assessments, and similar amounts from members	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87	501(c)(12) organizations. Enter. a Gross income from members or shareholders	87a	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.	88		X
89a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b		X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
d	Enter. Amount of tax on line 89c, above, reimbursed by the organization			0.
90a	List the states with which a copy of this return is filed <u>MASSACHUSETTS</u>			
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)	90b	0	
91	The books are in care of <u>NANCY L. MCHALE</u> Telephone number <u>508-295-3646</u> Located at <u>87 FEARING HILL RD. WEST WAREHAM, MA</u> ZIP + 4 <u>02576</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here... and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A	<input type="checkbox"/>

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2003

Department of the Treasury
Internal Revenue Service

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

Name of the organization: **WAREHAM LAND TRUST** Employer identification number: **04-3548680**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	▶ 0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ 0	

Part III Statements About Activities (See instructions.)

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ... ► \$ N/A
(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

	Yes	No
1		X

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.

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.)

2a		X
2b		X
2c		X
2d		X
2e		X
3a		X
3b		X
4		X

a Sale, exchange, or leasing of property?

b Lending of money or other extension of credit?

c Furnishing of goods, services, or facilities?

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?

e Transfer of any part of its income or assets?

3a Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)

b Do you have a section 403(b) annuity plan for your employees?

4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? .

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

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

5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____

10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

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 instructions.)

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

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	166,310.	30,802.			197,112.
16 Membership fees received.	7,295.	6,705.			14,000.
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	506.	432.			938.
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	181.				181.
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					
23 Total of lines 15 through 22	174,292.	37,939.			212,231.
24 Line 23 minus line 17	173,786.	37,507.			211,293.
25 Enter 1% of line 23	1,743.	379.			
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 4,226.
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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 211,293.
d Add. Amounts from column (e) for lines:	18 181.	19	22	26b	26d 181.
e Public support (line 26c minus line 26d total)					26e 211,112.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 99.91 %
27 Organizations described on line 12:	N/A				
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.	(2002) _____ (2001) _____ (2000) _____ (1999) _____				
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.	(2002) _____ (2001) _____ (2000) _____ (1999) _____				
c Add. Amounts from column (e) for lines:	15	16	17	20	21
d Add: Line 27a total _____ and line 27b total _____					27c
e Public support (line 27c total minus line 27d total) ..					27d
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27e
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)		

32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)		

33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)		

34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

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

N/A

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

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred.)

Table with columns for line numbers (36-44) and descriptions of lobbying expenditures, with sub-table for line 41 showing nontaxable amount rules.

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.)

Table titled 'Lobbying Expenditures During 4-Year Averaging Period' with columns for years 2003, 2002, 2001, 2000, and Total, and rows for lines 45-50.

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

N/A

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

Table with columns for Yes, No, and Amount, corresponding to items a-i.

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

WAREHAM LAND TRUST

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STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 148,597.
COST OR OTHER BASIS: 148,052.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 545.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ 545.

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

<u>SPECIAL EVENTS</u>	<u>GROSS RECEIPTS</u>	<u>LESS CONTRI- BUTIONS</u>	<u>GROSS REVENUE</u>	<u>LESS DIRECT EXPENSES</u>	<u>NET INCOME (LOSS)</u>
SALE OF CUP PLATES	377.	0.	377.	275.	102.
TOTAL	<u>\$ 377.</u>	<u>\$ 0.</u>	<u>\$ 377.</u>	<u>\$ 275.</u>	<u>\$ 102.</u>

STATEMENT 3
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) <u>TOTAL</u>	(B) <u>PROGRAM SERVICES</u>	(C) <u>MANAGEMENT & GENERAL</u>	(D) <u>FUNDRAISING</u>
BANK CHARGES	129.		129.	
CONTRACT LABOR	2,000.		2,000.	
INSURANCE	2,966.		2,966.	
MASS ATTORNEY GENERAL FEE	35.		35.	
MISCELLANEOUS	288.		288.	
REAL ESTATE TAXES	690.	690.		
TOTAL	<u>\$ 6,108.</u>	<u>\$ 690.</u>	<u>\$ 5,418.</u>	<u>\$ 0.</u>

STATEMENT 4
FORM 990, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO PROTECT OPEN SPACE & NATURAL RESOURCES

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STATEMENT 5
FORM 990, PART IV, LINE 55B
INVESTMENTS - LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
LAND	\$ 270,446.		\$ 270,446.
TOTAL	\$ 270,446.	\$ 0.	\$ 270,446.

STATEMENT 6
FORM 990, PART IV, LINE 64B
MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME:	DAVID AND KATHARINE CHANNING	
RELATIONSHIP OF LENDER:	NONE	
DATE OF NOTE:	9/30/2003	
MATURITY DATE:	1/15/2004	
REPAYMENT TERMS:	DUE JANUARY 15, 2004	
SECURITY PROVIDED:	LAND	
PURPOSE OF LOAN:	TO ACQUIRE LAND	
ORIGINAL AMOUNT:	78,000.	
BALANCE DUE:		\$ 78,000.
TOTAL		\$ 78,000.

STATEMENT 7
FORM 990, PART IV-A, LINE B(4)
OTHER AMOUNTS

SPECIAL EVENTS EXPENSE		
TOTAL	\$ 276.	\$ 276.

STATEMENT 8
FORM 990, PART IV-B, LINE B(4)
OTHER AMOUNTS

SPECIAL EVENTS EXPENSE		
TOTAL	\$ 276.	\$ 276.

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STATEMENT 9
FORM 990, PART V
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MARY MCFADDEN 39 WARREN POINT RD. WAREHAM, MA 02571	PRESIDENT 10	\$ 0.	\$ 0.	\$ 0.
NANCY MCHALE 87 FEARING HILL RD. WEST WAREHAM, MA 02576	TREASURER 10	0.	0.	0.
DAVID STONE 7 GRANSTON WAY BUZZARDS BAY, MA 02532	VICE PRESIDENT 10	0.	0.	0.
CLAIRE SMITH 1 OLD PLATE ROAD WEST WAREHAM, MA 02576	CLERK 10	0.	0.	0.
JAMES CLEMMEY 34 GREAT HILL DRIVE WEST WAREHAM, MA 02576	DIRECTOR 10	0.	0.	0.
SAM CORBITT 81 GIBBS AVE WAREHAM, MA 02571	BOARD/ADVISORS 10	0.	0.	0.
MARY CROWLEY 3193 CRANBERRY HIGHWAY BUZZARDS BAY, MA 02532	DIRECTOR 10	0.	0.	0.
DR. CHARLES GLEASON 22 NOBSKA WAY WAREHAM, MA 02571	DIRECTOR 10	0.	0.	0.
MARTIN HIMMELFARB 117 BEAUMONT AVE NEWTON, MA 02460	BOARD/ADVISOR 10	0.	0.	0.
MARTHA MAGUIRE 6 PROSPECT AVE. ONSET, MA 02558	DIRECTOR 10	0.	0.	0.
NICK MEMOLI 24 BAYBERRY ROAD WAREHAM, MA 02573	DIRECTOR 10	0.	0.	0.
JIM MUNISE 8 LUNA AVE WAREHAM, MA 02571	DIRECTOR 10	0.	0.	0.

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STATEMENT 9 (CONTINUED)
 FORM 990, PART V
 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
KATHY PAPPALARDO 87 FEARING HILL ROAD WEST WAREHAM, MA 02576	DIRECTOR 10	\$ 0.	\$ 0.	\$ 0.
BOB SCOTT BURGESS POINT ROAD, RR1 WAREHAM, MA 02571	BOARD/ADVISOR 10		0.	0.
DALE SCOTT BURGESS POINT ROAD, RR1 WAREHAM, MA 02571	DIRECTOR 10		0.	0.
LARRY STIFLER 39 WARREN POINT ROAD WAREHAM, MA 02571	DIRECTOR 10		0.	0.
DAVID WARR 184 HIGH STREET WAREHAM, MA 02571	DIRECTOR 10		0.	0.
SANDRA WHEELER 35 LONG BEACH RD WAREHAM, MA 02571	DIRECTOR 10		0.	0.
		TOTAL	\$ 0.	\$ 0.