

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)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

A For the 2003 calendar year, or tax year beginning 8/01/03, and ending 7/31/04

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: CONCERNED CITIZENS OF MONTAUK, INC. D Employer identification number: 11-2517191 E Telephone number: 631-668-3422 F Group Exemption Number: [ ]

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: [X] Cash [ ] Accrual Other (specify) [ ]

I Website: [ ]

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

J Organization type (check only one): [X] 501(c) ( 3 ) (Insert no.) 4947(a)(1) or 527

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.

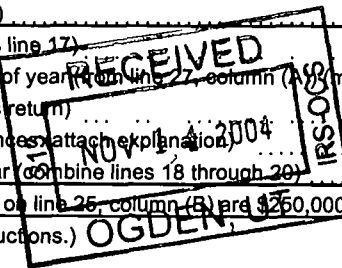
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. \$ 61,103

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 37 of the instructions.)

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 48,257. Expenses total: 52,985. Net Assets total: 73,153. Includes handwritten notes like 'See Worksheet' and 'See Stmt 1'.

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.

Table for Balance Sheets with columns (A) Beginning of year and (B) End of year. Rows include Cash, Land, Other assets, Total assets, Total liabilities, and Net assets.



REVENUE SCANNED NOV 24 2004

Handwritten mark resembling a stylized 'P' or 'R'.

Handwritten mark resembling a stylized 'W'.

Part III Statement of Program Service Accomplishments (See page 41 of the instructions.)

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

Table with 2 columns: Description of program service and Expenses. Includes items like 'PREPERATION AND PRINTING OF NEWSLAETTERS ON ENVIRONMENTAL ISSUES' and 'TO INFORM THE COMMUNITY AT LARGE ON MONTAUK ENVIRONMENTAL ISSUES'.

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 41 of the instructions.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week devoted to position, (C) Compensation, (D) Contrib. to employee benefit plans, (E) Expense account and other allowances.

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)

Form with multiple questions (33-43) regarding organizational activities, tax status, and financial information. Includes checkboxes for 'Yes' and 'No' and various input fields.

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.

Signature of officer: [Handwritten Signature] Date: 11/14/04

PRESIDENT Date: 11/14/04 Check if self-employed: [ ] Preparer's SSN or PTIN: P00348364

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

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

OMB No. 1545-0047

**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

Employer identification number

**CONCERNED CITIZENS OF MONTAUK, INC.**

**11-2517191**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the 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 ben plans & deferred compensation	(e) Expense account and other allowances
<b>NONE</b>				
Total number of other employees paid over \$50,000 ▶				

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the 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
<b>NONE</b>		
Total number of others receiving over \$50,000 for professional services ▶		

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

Schedule A (Form 990 or 990-EZ) 2003

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

	Yes	No
<b>1</b> 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 ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of 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.	1	<b>X</b>
<b>2</b> 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.)		
<b>a</b> Sale, exchange, or leasing of property?	2a	<b>X</b>
<b>b</b> Lending of money or other extension of credit?	2b	<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities?	2c	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expiration if more than \$1,000)?	2d	<b>X</b>
<b>e</b> Transfer of any part of its income or assets?	2e	<b>X</b>
<b>3a</b> 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.)	3a	<b>X</b>
<b>3b</b> Do you have a section 403(b) annuity plan for your employees?	3b	<b>X</b>
<b>4</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	<b>X</b>

**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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	14,660	15,784	21,521	12,800	64,765
16 Membership fees received	17,044	9,900	19,635	15,951	62,530
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					0
18 Gross income from interest, dividends, amounts received from payment 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	929	1,854	4,256	3,272	10,311
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf					0
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.					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	32,633	27,538	45,412	32,023	137,606
24 Line 23 minus line 17	32,633	27,538	45,412	32,023	137,606
25 Enter 1% of line 23	326	275	454	320	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ 26a 0

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

d Add: Amounts from column (e) for lines: 18 \_\_\_\_\_ 19 \_\_\_\_\_ 22 \_\_\_\_\_ 26b \_\_\_\_\_ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ 26f %

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:  
 (2002) 13,000 (2001) 13,000 (2000) 15,500 (1999) 12,500

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 64,765 16 62,530 17 54,000 20 \_\_\_\_\_ 21 \_\_\_\_\_ ▶ 27c 127,295

d Add: Line 27a total 54,000 and line 27b total \_\_\_\_\_ ▶ 27d 54,000

e Public support (line 27c total minus line 27d total) ▶ 27e 73,295

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f 137,606

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g 53.2644%

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h 7.4931%

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 page 7 of the 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 page 9 of the 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.

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures .....	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount. Enter the amount from the following table-		
	<b>If the amount on line 40 is-</b> <b>The lobbying nontaxable amount is-</b>		
	Not over \$500,000 .....		
	Over \$500,000 but not over \$1,000,000 .....		
	Over \$1,000,000 but not over \$1,500,000 .....		
	Over \$1,500,000 but not over \$17,000,000 .....		
	Over \$17,000,000 .....		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>	

**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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>45</b> Lobbying nontaxable amount .....					
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) .....					
<b>47</b> Total lobbying expenditures .....					
<b>48</b> Grassroots nontaxable amount .....					
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) .....					
<b>50</b> 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.) **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:	Yes	No	Amount
<b>a</b> Volunteers .....			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) .....			
<b>c</b> Media advertisements .....			
<b>d</b> Mailings to members, legislators, or the public .....			
<b>e</b> Publications, or published or broadcast statements .....			
<b>f</b> Grants to other organizations for lobbying purposes .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....			
<b>i</b> 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.





11-2517191

**Federal Statements**

FYE: 7/31/2004

**Statement 1 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid**

<u>Description</u>	<u>Cash Contribution</u>	<u>Noncash Contribution</u>
EAST LAKE ASSOCIATION	\$ 10,000	\$
GROUP FOR THE SOUTH FORK	5,500	
DARK SKY ORGANIZATION	1,000	
MONTAUK FIRE DEPARTMENT	100	
Total	<u>\$ 16,600</u>	<u>\$ 0</u>

**Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses**

<u>Description</u>	<u>Amount</u>
Expenses	\$
EDUCATION/MEETING	18,567
ADVERTISING	1,542
INSURANCE	1,375
MISCELANEOUS	50
OFFICE EXPENSE	2,806
Total	<u>\$ 24,340</u>

**Statement 3 - Form 990-EZ, Part III, Line 28 - Statement of Program Service  
Accomplishments**

ACTIONS TAKEN TO PRESERVE LAKE MONTAUK AND MONTAUK IN  
GENERAL, INCLUDING LEGAL PROCEEDING AND SINAGE, AS WELL  
AS SUPPORT TO THE LOCAL FIRE DEPARTMENT AND VILLAGE  
ASSOCIATION.

## Federal Statements

Statement 4 - Form 990-EZ, Part IV - Officers, Directors, Trustees, and Key Employees

Name	Benefits		Expenses	Title	Address	Average Hrs	City, State, Zip
	Comp						
BILL AKIN	0	0	0	PRESIDENT	10 FLANDERS RD.		MONTAUK NY 11954
DOROTHY DRISKEN	0	0	0	VICE-PRESIDE	21 PINE TREE DR.		MONTAUK NY 11954
CELINE KEATING	0	0	0	VICE-PRESIDE	ATLANTIC BLUFFS CLUB B-10		MONTAUK NY 11954
PETER LOWENSTEIN	0	0	0	VICE-PRESIDE	11 EAST LAKE DR.		MONTAUK NY 11954
MARTIN POST	0	0	0	VICE PRESIDE	84 SURFSIDE AVE.		MONTAUK NY 11954
SHIRLEY KATZ	0	0	0	TREASURER	119 EAST LAKE DR.		MONTAUK NY 11954
RITA MCKERNAN	0	0	0	SECRETARY	115 EAST LAKE DR.		MONTAUK NY 11954
HY BRODSKI	0	0	0	BOARD MEMBER	90 LAUREL DR.		MONTAUK NY 11954
KAY CARLEY	0	0	0	BOARD MEMBER	227 EAST LAKE DR.		MONTAUK NY 11954
JOHN CHIMPLES	0	0	0	BOARD MEMBER	75 SOUTH FAIRVIEW AVE.		MONTAUK NY 11954
BILL CHORNOOKY	0	0	0	BOARD MEMBER	58 CLEVELAND DR.		MONTAUK NY 11954
RAYMOND CORTELL	0	0	0	BOARD MEMBER	33 GRANT DR.		MONTAUK NY 11954
CONRAD COSTANZO	0	0	0	BOARD MEMBER	54 SURFSIDE AVE.		MONTAUK NY 11954
LILLIAN DISKEN	0	0	0	BOARD MEMBER	21 PINE TREE DR.		MONTAUK NY 11954
JULIE EVANS-BRUMM	0	0	0	BOARD MEMBER	24 SOUTH DEWEY PLACE		MONTAUK NY 11954
JEAN FISCHER	0	0	0	BOARD MEMBER	19 BIG REED PATH		MONTAUK NY 11954
RAV FREIDEL	0	0	0	BOARD MEMBER	677 OLD MONTAUK HWY		MONTAUK NY 11954
VERONICA GARVEY	0	0	0	BOARD MEMBER	61 PINE TREE DR.		MONTAUK NY 11954

## Federal Statements

**Statement 4 - Form 990-EZ, Part IV - Officers, Directors, Trustees, and Key Employees**  
**(continued)**

Name		Title	Address	Average Hrs	City, State, Zip	
Comp	Benefits					Expenses
LISA GRENCI	0	0	0	0	0	BOARD MEMBER 135 TUTHILL RD. MONTAUK NY 11954
JODI GINDROD	0	0	0	0	0	BOARD MEMBER PO BOX 569 BRIDGEHAMPTON NY 11932
PERRY HABERMAN	0	0	0	0	0	BOARD MEMBER 27 TYLER RD. MONTAUK NY 11954
RICHARD KAHN	0	0	0	0	0	BOARD MEMBER 224 WEST LAKE DR. MONTAUK NY 11954
MARIA LUBINSKA	0	0	0	0	0	BOARD MEMBER 359 OLD MONTAUK HWY MONTAUK NY 11954
MARIA MAMOROWSKI	0	0	0	0	0	BOARD MEMBER PO BOX 2031 MONTAUK NY 11954
HILARY MOLNAR	0	0	0	0	0	BOARD MEMBER 152 SOUTH FAIRVIEW MONTAUK NY 11954
CAROL MORRISON	0	0	0	0	0	BOARD MEMBER 20 HAMILTON DR. MONTAUK NY 11954
ED PORCO	0	0	0	0	0	BOARD MEMBER 148 MONROE DR. MONTAUK NY 11954
LARRY RAYMOND	0	0	0	0	0	BOARD MEMBER 39 SOUTH DAVIS DR. MONTAUK NY 11954
LARRY SMITH	0	0	0	0	0	BOARD MEMBER 17 BEECH ST. MONTAUK NY 11954
EUGENE WHITE	0	0	0	0	0	BOARD MEMBER 240 OLD MONTAUK HWY MONTAUK NY 11954
GENE WOLSK	0	0	0	0	0	BOARD MEMBER 187 OLD MONTAUK HWY MONTAUK NY 11954
CHRIS YULA	0	0	0	0	0	BOARD MEMBER 42 GRANT DR. MONTAUK NY 11954