



The State of New Hampshire  
**Department of Environmental Services**



HRC

**Robert R. Scott, Commissioner**

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JAN 28 2026

December 18, 2025

Her Excellency, Governor Kelly A. Ayotte  
and The Honorable Council  
State House  
Concord, NH 03301

**REQUESTED ACTION**

Authorize the New Hampshire Department of Environmental Services (NHDES) to enter into an agreement with the Newfound Lake Region Association, Bristol, NH (VC # 156100-B001) in the amount of \$100,000 to complete streambank restoration for Atwell Brook and related stormwater management efforts as part of the Newfound Lake Watershed Management Plan, effective upon Governor and Council approval through December 31, 2027. 100% Federal Funds.

Funding is available in the following account:

03-44-44-442010-2035-072-500575  
Dept. Environmental Services, NPS Restoration Program, Grants-Federal

FY 2026  
\$100,000

**EXPLANATION**

NHDES requests approval to enter into a grant agreement for \$100,000 with the Newfound Lake Region Association to complete the Newfound Watershed Management Plan, Streambank Restoration in Atwell Brook project.

This project protects the high-quality waters of Newfound Lake, the centerpiece of a rural, 63,150-acre watershed in central New Hampshire. In 2019, a localized and intense rainstorm destroyed the streambank containing Atwell Brook, a tributary to the Cockermouth River that flows directly into Newfound Lake. As a result of the streambank destruction, Atwell Brook jumped its former channel in a process called an avulsion, and it now forges a new path where it is adjusting its slope and through aggressive erosion of land and sediment transport downstream. Sediment from the avulsed channel has impacted the water clarity in Newfound Lake. The Newfound Lake Region Association will work with the Town of Groton and the NH Fish and Game Department to return Atwell Brook to its original channel and stabilize the avulsed streambank. By redirecting Atwell Brook to its former, stable, channel, this project will restore 160 linear feet of stream. This will prevent 670 tons of sediment and 570 pounds of phosphorus per year from reaching Newfound Lake. In addition, the Small-Scale Stormwater Program (formerly the Youth Conservation Corps) will work with homeowners throughout the watershed to implement stormwater control measures on their properties to manage stormwater.

[www.des.nh.gov](http://www.des.nh.gov)

29 Hazen Drive • PO Box 95 • Concord, NH 03302-0095  
(603) 271-3503 • Fax: 271-2867 TDD Access: Relay NH 1-800-735-2964

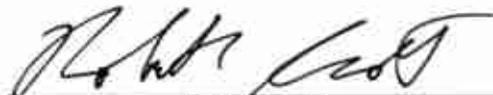
NHDES issued a Request for Proposals (RFP) for the 2025 Watershed Assistance grants program in July 2024. The eleven proposals received were ranked based on the criteria included in the RFP: water quality improvement or protection; cost/benefit ratio; local capacity to complete the project; relative value or significance of the water body; consideration of the project's impact on communities; the project's incorporation of environmental risks; and general quality and thoroughness of the proposal. Based on the results of the selection process and available federal grant funding levels, six implementation projects were selected to receive funding. Please see Attachment B for a list of project rankings and NHDES review team members.

Watershed Assistance grants focus on the reduction of nonpoint source (NPS) pollution. NPS pollution occurs when rainfall, snowmelt, or irrigation waters travel through the ground or across land, transporting materials that are then introduced into groundwater or deposited into rivers, lakes, and coastal waters. Pollutants can include chemicals, sediments, nutrients, and toxins that often have harmful effects on drinking water supplies, recreation, fisheries, and wildlife. Land development or changes in land use can also cause NPS pollution by disrupting the natural hydrology of a water body, increasing impervious surfaces, and contributing to the loss of aquatic habitat. Watershed Assistance grants address NPS pollution by promoting responsible land use practices on the watershed scale.

The project costs are budgeted at \$166,700. NHDES will provide \$100,000 (60%) of the project costs through a federal grant, and the Newfound Lake Region Association will provide the remaining costs through cash and in-kind services. A budget estimate is provided in Attachment A.

In the event that federal funds become no longer available, general funds will not be requested to support this program. The agreement has been approved by the Office of the Attorney General as to form, execution, and substance.

We respectfully request your approval of this item.

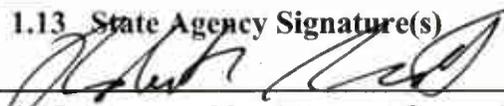
A handwritten signature in black ink, appearing to read "Robert R. Scott", written over a horizontal line.

Robert R. Scott, Commissioner

GRANT AGREEMENT

The State of New Hampshire and the Grantee hereby  
Mutually agree as follows:  
GENERAL PROVISIONS

1. Identification and Definitions.

<b>1.1. State Agency Name</b> Department of Environmental Services		<b>1.2. State Agency Address</b> PO Box 95 Concord, NH 03302-0095	
<b>1.3. Grantee Name</b> Newfound Lake Region Association		<b>1.4. Grantee Address</b> 10 N Main St Unit 1, Bristol, NH 03222	
<b>1.5 Grantee Phone #</b> (603) 744-8689	<b>1.6. Account Number</b> 03-44-442010-2035-072	<b>1.7. Completion Date</b> 12/31/2027	<b>1.8. Grant Limitation</b> \$ 100,000
<b>1.9. Grant Officer for State Agency</b> Stephen Landry, Watershed Assistance Section Supervisor		<b>1.10. State Agency Telephone Number</b> (603) 271-2969	
If Grantee is a municipality or village district: "By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
<b>1.11. Grantee Signature 1</b> 		<b>1.12. Name &amp; Title of Grantee Signor 1</b> Rebecca Hanson MPA Executive Director	
<b>Grantee Signature 2</b>		<b>Name &amp; Title of Grantee Signor 2</b>	
<b>Grantee Signature 3</b>		<b>Name &amp; Title of Grantee Signor 3</b>	
<b>1.13. State Agency Signature(s)</b> 		<b>1.14. Name &amp; Title of State Agency Signor(s)</b> Robert R. Scott, Commissioner NHDES	
<b>1.15. Approval by Attorney General (Form, Substance and Execution) (if G &amp; C approval required)</b>			
By:  Keely Lovato, AAG		Assistant Attorney General, On: 12 / 23 / 2025	
<b>1.16. Approval by Governor and Council (if applicable)</b>			
By:		On: / /	

2. **SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), the Grantee identified in block 1.3 (hereinafter referred to as "the Grantee"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT B (the scope of work being hereinafter referred to as "the Project").

3. AREA COVERED. Except as otherwise specifically provided for herein, the Grantee shall perform the Project in, and with respect to, the State of New Hampshire.
4. EFFECTIVE DATE: COMPLETION OF PROJECT.
- 4.1. This Agreement, and all obligations of the parties hereunder, shall become effective on the date of approval of this Agreement by the Governor and Council of the State of New Hampshire if required (block 1.16), or upon signature by the State Agency as shown in block 1.14 ("the Effective Date").
- 4.2. Except as otherwise specifically provided herein, the Project, including all reports required by this Agreement, shall be completed in ITS entirety prior to the date in block 1.7 (hereinafter referred to as "the Completion Date").
5. GRANT AMOUNT: LIMITATION ON AMOUNT: VOUCHERS: PAYMENT.
- 5.1. The Grant Amount is identified and more particularly described in EXHIBIT C, attached hereto.
- 5.2. The manner of, and schedule of payment shall be as set forth in EXHIBIT C.
- 5.3. In accordance with the provisions set forth in EXHIBIT C, and in consideration of the satisfactory performance of the Project, as determined by the State, and as limited by subparagraph 5.5 of these general provisions, the State shall pay the Grantee the Grant Amount. The State shall withhold from the amount otherwise payable to the Grantee under this subparagraph 5.3 those sums required, or permitted, to be withheld pursuant to N.H. RSA 80:7 through 7-c.
- 5.4. The payment by the State of the Grant amount shall be the only, and the complete payment to the Grantee for all expenses, of whatever nature, incurred by the Grantee in the performance hereof, and shall be the only, and the complete, compensation to the Grantee for the Project. The State shall have no liabilities to the Grantee other than the Grant Amount.
- 5.5. Notwithstanding anything in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made, hereunder exceed the Grant limitation set forth in block 1.8 of these general provisions.
6. COMPLIANCE BY GRANTEE WITH LAWS AND REGULATIONS. In connection with the performance of the Project, the Grantee shall comply with all statutes, laws regulations, and orders of federal, state, county, or municipal authorities which shall impose any obligations or duty upon the Grantee, including the acquisition of any and all necessary permits and RSA 31-95-b.
7. RECORDS and ACCOUNTS.
- 7.1. Between the Effective Date and the date seven (7) years after the Completion Date, unless otherwise required by the grant terms or the Agency, the Grantee shall keep detailed accounts of all expenses incurred in connection with the Project, including, but not limited to, costs of administration, transportation, insurance, telephone calls, and clerical materials and services. Such accounts shall be supported by receipts, invoices, bills and other similar documents.
- 7.2. Between the Effective Date and the date seven (7) years after the Completion Date, unless otherwise required by the grant terms or the Agency pursuant to subparagraph 7.1, at any time during the Grantee's normal business hours, and as often as the State shall demand, the Grantee shall make available to the State all records pertaining to matters covered by this Agreement. The Grantee shall permit the State to audit, examine, and reproduce such records, and to make audits of all contracts, invoices, materials, payrolls, records of personnel, data (as that term is hereinafter defined), and other information relating to all matters covered by this Agreement. As used in this paragraph, "Grantee" includes all persons, natural or fictional, affiliated with, controlled by, or under common ownership with, the entity identified as the Grantee in block 1.3 of these provisions
8. PERSONNEL.
- 8.1. The Grantee shall, at its own expense, provide all personnel necessary to perform the Project. The Grantee warrants that all personnel engaged in the Project shall be qualified to perform such Project, and shall be properly licensed and authorized to perform such Project under all applicable laws.
- 8.2. The Grantee shall not hire, and it shall not permit any subcontractor, subgrantee, or other person, firm or corporation with whom it is engaged in a combined effort to perform the Project, to hire any person who has a contractual relationship with the State, or who is a State officer or employee, elected or appointed.
- 8.3. The Grant Officer shall be the representative of the State hereunder. In the event of any dispute hereunder, the interpretation of this Agreement by the Grant Officer, and his/her decision on any dispute, shall be final.
9. DATA: RETENTION OF DATA: ACCESS.
- 9.1. As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.
- 9.2. Between the Effective Date and the Completion Date the Grantee shall grant to the State, or any person designated by it, unrestricted access to all data for examination, duplication, publication, translation, sale, disposal, or for any other purpose whatsoever.
- 9.3. No data shall be subject to copyright in the United States or any other country by anyone other than the State.
- 9.4. On and after the Effective Date all data, and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason, whichever shall first occur.
- 9.5. The State, and anyone it shall designate, shall have unrestricted authority to publish, disclose, distribute and otherwise use, in whole or in part, all data.
10. CONDITIONAL NATURE OR AGREEMENT. Notwithstanding anything in this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability or continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available or appropriated funds. In the event of a reduction or termination of those funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Grantee notice of such termination.
11. EVENT OF DEFAULT: REMEDIES.
- 11.1. Any one or more of the following acts or omissions of the Grantee shall constitute an event of default hereunder (hereinafter referred to as "Events of Default"):
  - 11.1.1 Failure to perform the Project satisfactorily or on schedule; or
  - 11.1.2 Failure to submit any report required hereunder; or
  - 11.1.3 Failure to maintain, or permit access to, the records required hereunder; or
  - 11.1.4 Failure to perform any of the other covenants and conditions of this Agreement.
- 11.2. Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:
  - 11.2.1 Give the Grantee a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Grantee notice of termination; and
  - 11.2.2 Give the Grantee a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the Grant Amount which would otherwise accrue to the Grantee during the period from the date of such notice until such time as the State determines that the Grantee has cured the Event of Default shall never be paid to the Grantee; and
  - 11.2.3 Set off against any other obligation the State may owe to the Grantee any damages the State suffers by reason of any Event of Default; and
  - 11.2.4 Treat the agreement as breached and pursue any of its remedies at law or in equity, or both.
12. TERMINATION.
- 12.1. In the event of any early termination of this Agreement for any reason other than the completion of the Project, the Grantee shall deliver to the Grant Officer, not later than fifteen (15) days after the date of termination, a report (hereinafter referred to as the "Termination Report") describing in detail all Project Work performed, and the Grant Amount earned, to and including the date of termination. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall entitle the Grantee to receive that portion of the Grant amount earned to and including the date of termination.
- 12.2. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall in no event relieve the Grantee from any and all liability for damages sustained or incurred by the State as a result of the Grantee's breach of its obligations hereunder.
- 12.3. Notwithstanding anything in this Agreement to the contrary, either the State or, except where notice default has been given to the Grantee hereunder, the Grantee, may terminate this Agreement without cause upon thirty (30) days written notice.
- 12.4. CONFLICT OF INTEREST. No officer, member of employee of the Grantee, and no representative, officer or employee of the State of New Hampshire or of the governing body of the locality or localities in which the Project is to be performed, who exercises any functions or responsibilities in the review or

- approval of the undertaking or carrying out of such Project, shall participate in any decision relating to this Agreement which affects his or her personal interest or the interest of any corporation, partnership, or association in which he or she is directly or indirectly interested, nor shall he or she have any personal or pecuniary interest, direct or indirect, in this Agreement or the proceeds thereof.
14. GRANTEE'S RELATION TO THE STATE. In the performance of this Agreement the Grantee, its employees, and any subcontractor or subgrantee of the Grantee are in all respects independent contractors, and are neither agents nor employees of the State. Neither the Grantee nor any of its officers, employees, agents, members, subcontractors or subgrantees, shall have authority to bind the State nor are they entitled to any of the benefits, workmen's compensation or emoluments provided by the State to its employees.
  15. ASSIGNMENT AND SUBCONTRACTS. The Grantee shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the State. None of the Project Work shall be subcontracted or subgranted by the Grantee other than as set forth in Exhibit B without the prior written consent of the State.
  16. INDEMNIFICATION. The Grantee shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based on, resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Grantee or subcontractor, or subgrantee or other agent of the Grantee. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant shall survive the termination of this agreement.
  17. INSURANCE.
    - 17.1 The Grantee shall, at its own expense, obtain and maintain in force, or shall require any subcontractor, subgrantee or assignee performing Project work to obtain and maintain in force, both for the benefit of the State, the following insurance:
      - 17.1.1 Statutory workers' compensation and employees liability insurance for all employees engaged in the performance of the Project, and
      - 17.1.2 General liability insurance against all claims of bodily injuries, death or property damage, in amounts not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury or death any one incident, and \$500,000 for property damage in any one incident; and
  - 17.2. The policies described in subparagraph 17.1 of this paragraph shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire. Grantee shall furnish to the State, certificates of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy.
  18. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event, or any subsequent Event. No express waiver of any Event of Default shall be deemed a waiver of any provisions hereof. No such failure of waiver shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other default on the part of the Grantee.
  19. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses first above given.
  20. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Council of the State of New Hampshire, if required or by the signing State Agency.
  21. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the law of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assignees. The captions and contents of the "subject" blank are used only as a matter of convenience, and are not to be considered a part of this Agreement or to be used in determining the intent of the parties hereto.
  22. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.
  23. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings relating hereto.
  24. SPECIAL PROVISIONS. The additional or modifying provisions set forth in Exhibit A hereto are incorporated as part of this agreement.

**Exhibit A**  
**Special Provisions**

Federal Funds paid under this agreement are from a Grant Agreement to the State from the US Environmental Protection Agency, NPS Implementation Grant under CFDA # 66.460. All applicable requirements, regulations, provisions, terms and conditions of this Federal Grant Agreement are hereby adopted in full force and effect to the relationship between this Department and the grantee. Additionally, the Grantee shall comply with the terms of the Federal Funding Accountability and Transparency Act (FFATA) and has provided NHDES with their Unique Entity Identifier (UEI-SAM) number. The Grantee's UEI-SAM number is RXN8MHV78769.

In addition to the General Provisions of Paragraph 1 through 23, the following provisions, including those required by federal regulations apply to this Agreement:

- I) **Nondiscrimination.** The Grantee shall comply with 40 CFR part 7 which prohibits discrimination under any program or activity receiving Federal assistance on the basis of race, color, national origin, or gender, and 40 CFR part 12 which prohibits discrimination based on handicap.
- II) **Financial management.** The Grantee shall comply with 2 CFR Part 200 Subpart D and the specific standards regarding financial reporting, accounting records, internal control, budget control, allowable cost, source documentation, and cash management outlined therein.
- III) **Allowable costs.** All costs charged to this Agreement shall be eligible, necessary, and reasonable for performing the tasks outlined in the approved project scope of services. The costs shall be allowable, meaning that the costs must conform to specific Federal requirements detailed in 2 CFR Part 200 Subpart E. The costs, including match, shall be incurred between the Agreement's Effective Date and the Completion Date, except that match may begin to accrue prior to the Effective Date provided it conforms to the terms of the federal Grant Agreement from the U.S Environmental Protection Agency to the State and follows the date of a NHDES letter of approval of the proposed project scope of services.
- IV) **Matching funds.** All matching funds contributed by the Grantee shall conform to the same laws, regulations, and grant conditions as the federal funds in the Agreement and referenced in 2 CFR Part 200 Subpart E.
- V) **Property Management.** The Grantee shall comply with the property management and procedures detailed in 2 CFR Part 200 Subpart D.
- VI) **Debarment and Suspension.** The Grantee shall comply with 2 CFR Part 200 Subpart C. By signing and submitting the Agreement, the Grantee certifies that it has not been debarred or suspended by a government agency. Additionally, the Grantee certifies that it will not make or permit any award (subgrant or subcontract) at any tier to any party which is debarred or

suspended or is otherwise excluded from or ineligible for participation in Federal assistance programs under Executive Order 12549, "Debarment and Suspension."

VII) **Procurement.** When purchasing goods or services with grant or match funds, the Grantee shall comply with procurement regulations as detailed in 2 CFR Part 200 Subpart D which includes procurement standards, competition, methods of procurement, contract cost and price, agency review, bonding requirements, and contract provisions.

- a. Assignment of Subcontracts. The Grantee shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the State Agency.
- b. Consultant Fee Cap. The Grantee will limit grant-funded payment to subcontractors under the circumstances detailed in 2 CFR Part 1500.9
- c. Subcontracts. The Grantee shall:
  - i. Ensure that every subcontract includes provisions for compliance with Federal and State standards applicable to the contract;
  - ii. Ensure that every subcontract includes all clauses required by Federal statute and executive orders, and their implementing regulations; and
  - iii. Ensure that subcontractors are aware of requirements imposed upon them by State and Federal statutes and regulations.

VIII) **Participation by Disadvantaged Business Enterprises.** The Grantee shall comply with the terms of 40 CFR Part 33 Subpart C, which requires that organizations conduct a competitive procurement process making a good faith effort to utilize goods and services provided by disadvantaged businesses.

IX) **New Restrictions on Lobbying: Interim Final Rule.** The Grantee shall comply with the terms of 40 CFR part 34, and 2 CFR Part 200 Subpart E which prohibit the use of Federal grant funds to influence (or attempt to influence) a Federal employee, and requires the submission of Standard Form LLL ("Disclosure of Lobbying Activities") if *non*federal funds have been used to influence (or attempt to influence) a Federal employee.

X) **Drug-Free Workplace.** The Grantee shall comply with the terms of 2 CFR Part 1536 which require as a condition of the Agreement, certification that the Grantee maintains a drug-free workplace. By signing and submitting this Agreement, the Grantee certifies that they will observe the required practices for maintaining a drug-free workplace.

XI) **Bonding requirements.** For construction or facility improvement contracts or subcontracts exceeding the simplified acquisition threshold (currently \$150,000), the minimum requirements shall be as follows:

- a. A bid guarantee from each bidder equivalent to five percent of the bid price. The "bid guarantee" shall consist of a firm commitment such as a bid bond, certified check, or other negotiable instrument accompanying a bid as assurance that the bidder will, upon acceptance of his bid, execute such contractual documents as may be required within the time specified.
- b. A performance bond on the part of the contractor for 100 percent of the contract price. A

“performance bond” is one executed in connection with a contract to secure fulfillment of all the contractor's obligations under such contract.

c. A payment bond on the part of the contractor for 100 percent of the contract price. A “payment bond” is one executed in connection with a contract to assure payment as required by law of all persons supplying labor and material in the execution of the work provided for in the contract.

XII) **Limitation on Administrative Costs.** In accordance with §319(h)(12) of the Clean Water Act, administrative costs in the form of salaries, overhead, or indirect costs shall not exceed in any fiscal year 10 percent of the amount of the grant except that costs of implementing enforcement and regulatory activities, education, training, technical assistance, demonstration projects, and technology transfer programs shall not be subject to this limitation.

XIII) **Management fees.** Management fees or similar charges in excess of the direct costs and approved indirect rates are not allowable. The term "management fees or similar charges" refers to expenses added to the direct costs in order to accumulate and reserve funds for ongoing business expenses; unforeseen liabilities; or for other similar costs which are not allowable under this Agreement. Management fees or similar charges may not be used to improve or expand the project funded under this Agreement, except to the extent authorized as a direct cost of carrying out the scope of work.

## Exhibit B Scope of Services

The Newfound Lake Region Association (NRLA) will perform the following tasks as described in the proposal titled *Newfound Watershed Management Plan Implementation Phase 5: Streambank Restoration in Atwell Brook*:

**Objective 1:** Issue a Request for Qualifications (RFQ) for an engineering consultant and Request for Bids (RFB) for a construction firm. Execute contracts.

*Measure of Success:* An engineering consultant and construction firm are hired to aid in the implementation of the Newfound Lake Watershed Management Plan.

**Deliverable 1:** Provide NHDES with draft and final versions of RFQ and RFB, related documents and subcontracts.

Task 1. Following NHDES approved procurement procedures, issue a Request for Qualifications to select an engineering consultant for the Atwell Brook project. Provide the draft to NHDES for review and approval prior to publication.

Task 2. Review and rank engineering consultant responses and conduct interviews as needed. Provide the list of respondents and the selection process to NHDES.

Task 3. Submit the draft engineering consultant contract agreement with scope of work to NHDES for review and comment.

Task 4. Following NHDES response, finalize and execute the contract agreements with the engineering consultant.

Task 5. Develop a Request for Bids for construction for the Atwell Brook project. Follow NHDES-approved procurement procedures, and consider the potential benefits of a bidder pre-qualification process. Provide draft documents to NHDES for review and approval and then publish the approved solicitation, complete selection and contracting.

Task 6. Review construction consultant responses and conduct interviews as needed. Provide the list of respondents and selection process to NHDES.

Task 7. Submit the draft construction contract agreement with scope of work to NHDES for review and comment.

Task 8. Following NHDES response, finalize and execute the subcontract with the construction firm.

**Objective 2:** Site Specific Project Plan (SSPP) for pollutant load reduction modeling will be completed and approved by NHDES.

*Measures of Success:* SSPP is approved by NHDES.

**Deliverable 2:** A SSPP will be completed and submitted to NHDES.

Task 9. Prepare a SSPP in accordance with project scope and NHDES requirements.

Task 10. Submit the draft SSPP to NHDES for review and comment. After incorporating any comments, finalize, sign and submit the finalized SSPP to NHDES.

**Objective 3:** Structural Stormwater Control Measures (SCMs): Plan and complete structural SCMs that reduce the input of phosphorus to Newfound Lake.

*Measures of Success:* Completion of one large scale stormwater project at Atwell Brook and twelve small-scale private homeowner projects.

**Deliverable 3:** Copies of required permits; final plans/designs; documentation of completed Atwell Brook stabilization project; yearly summary of small scale SCM projects; Operation and Management Agreements; and, pollutants controlled reports (PCRs) are sent to NHDES.

Task 11. Coordinate with the New Hampshire Fish and Game Department, and the engineering consultant to prepare and submit the necessary permits for the Atwell Brook project including Standard Dredge and Fill Wetlands Permit, Section 401 Water Quality Certification and Section 404 Permit, and Section 106 Consultation.

Task 12. Work with the engineering consultant to complete project engineering/design and project management in order to return Atwell Brook to its original channel, stabilize the avulsed streambank, and install material in the avulsed stream bed to prevent future avulsions.

Following the SSPP-approved procedures, complete load reduction modeling and PCRs. Submit the project engineering/design and PCRs to NHDES.

Task 13. Oversee the construction firm's work to complete construction at the site to return Atwell Brook to its original channel, stabilize the avulsed streambank, and install material in the avulsed stream bed to prevent future avulsions.

Task 14. Work with six homeowners per year to plan and execute small-scale stormwater projects on private property around the watershed with the Small-Scale Stormwater Program (formerly the Youth Conservation Corps). Develop operations and maintenance agreements, and complete pollutant load reduction modeling and associated PCRs for each SCM. Provide copies of the operation and maintenance agreements and PCRs to NHDES.

**Objective 4:** Conduct outreach by engaging with residents, homeowners, watershed towns (Alexandria, Bridgewater, Bristol, Groton, and Hebron), and others to communicate the work of the watershed plan and the implementation process.

*Measures of Success:* Hold annual watershed conferences; meetings with residents and update NLRA website.

**Deliverable 4:** Documentation of the number of participants at meetings, and copies of outreach materials produced through this project will be sent to NHDES.

Task 15. Plan and implement a yearly conference with Town boards and committees to discuss the Newfound Watershed and collaboratively work on water quality protection. Other partners, community members, and the public will also be invited to attend.

**Objective 5:** Continue water quality monitoring of lake and tributaries.

*Measures of Success:* Conduct annual lake and tributary monitoring with volunteers and sends samples to the University of New Hampshire (UNH) Lay Lakes Monitoring Program (LLMP).

**Deliverable 5:** Annual water quality monitoring results and analysis are compiled and presented on the NLRA website.

Task 16. Conduct water quality monitoring.

Task 17. Submit water quality samples to the UNH LLMP where they are analyzed and reported. Update NLRA website with results.

**Objective 6:** Conduct project management and submit all required reports to NHDES.

Measures of Success: Project management activities are conducted, and reports are submitted to NHDES.

**Deliverable 6:** Financial documentation, semi-annual progress reports, pollutants controlled reports, and final report are submitted to NHDES.

Task 18. Conduct project management including submittal of financial documents such as payment requests, match, and procurement documentation; communicate with NHDES and other project partners as needed; and conduct other activities required for grant management.

Task 19. Complete other work as needed to implement elements of the Newfound Lake Watershed Management Plan.

Task 20. Submit electronic semi-annual reports documenting all work performed during the project periods as follows:

- Work completed April 1 – September 30, report is due by October 31
- Work completed October 1 – March 31, report is due by April 30

If the grantee has not completed a timely submittal of the progress reports, all further payments will be suspended until the overdue reports are submitted and approved by NHDES.

Task 21. Submit a comprehensive final report to NHDES on or before the project completion date. The final report shall include documentation of procurement of construction services, photo-documentation of constructed project components, proof that the project was constructed according to permits and conditions (photos, as-built plans, and other documentation required by the permit and grant agreement) additionally, the final report will comply with NHDES and USEPA requirements found in the final report guidance document, including ADA compliance as specified on the NHDES Watershed Assistance Section webpage.

### **Additional Requirements of the Agreement**

#### **Quality Assurance**

All project activities which are to be guided by a quality assurance (QA) document such as a Quality Assurance Project Plan (QAPP) or Site Specific Project Plan (SSPP) must not begin prior to NHDES/EPA approval of that QA document. In the event that sampling, modeling or other such activities precede QA document approval, the data will not be considered valid, and the grantee will forfeit the ability to receive payment for those activities.

### **Outreach Materials**

All materials produced for public distribution shall be reviewed and approved by NHDES prior to distribution and shall include the NHDES logo and the following citation: "Funding for this project was provided in part by a Watershed Assistance Grant from the NH Department of Environmental Services with Clean Water Act Section 319 funds from the U.S. Environmental Protection Agency". All final work products must meet the applicable Americans with Disabilities Act (ADA) Title II Regulations to the extent practicable and shall be guided by best practices outlined in the Revised Section 508 Standards of the Rehabilitation Act and the Web Content Accessibility Guidelines (WCAG). At minimum, final work products shall include sans-serif fonts, underlined and descriptive text links, color best practices, captions for audio and video content, headers in tables, images with alt text, gender-neutral text and consideration of the Plain Writing Act. Examples of final work products and outreach materials include, but are not limited to, project reports, press releases, newsletter articles, websites, videos and signage.

### **Operations and Maintenance**

Management practices implemented as agreed upon in the scope of services of this grant agreement and with grant funds or matching funds under a Section 319 Watershed Assistance Grant, shall be properly operated and maintained for the intended purposes during the life span of the project. The life span of a project shall be determined by the Grantee, tailored to the types of practices expected to be funded in this project, and agreed upon by NHDES. The Grantee shall provide NHDES with an engineering estimate of the design life of the stormwater control measure(s) (SCMs) and best management practice(s) (BMPs), or in the case of small-scale SCMs/BMPs which do not have a design life estimation completed by an engineer, the design life of that practice shall be estimated to be ten years.

Operation includes the administration, management, and performance of non-maintenance actions needed to keep the completed practice safe and functioning as intended. Maintenance includes work to prevent deterioration of the practice, repairing damage, or replacement of the practice to its original condition if one or more components fail. The Grantee shall assure that any sub-award of Section 319 funds similarly include the same condition in the sub-award. Additionally, both EPA and NHDES reserve the right to periodically inspect a practice during the life span of the project to ensure that operation and maintenance are occurring. If it is determined that the participants are not operating and maintaining these practices in an appropriate manner, NHDES may request a refund for that practice supported by the grant.

**Exhibit C**  
**Method of Payment and Contract Price**

Procurements of goods or services made with grant funds, or those credited as match, shall comply with the terms of this agreement, and must be reported to NHDES. Documentation of match credit shall be provided with each payment request. The cumulative match value for the project shall meet or exceed the amount of grant funds received multiplied by 0.667 (e.g. \$100,000 grant X 0.667 = \$66,700 minimum match required). The grantee shall submit payment requests, procurement reports, and match documentation on the forms provided by NHDES. Payment shall be made in accordance with the following schedule based upon satisfactory completion of specific tasks, and receipt of deliverables as described in Exhibit B:

Upon completion and NHDES approval of Tasks	1 - 4	\$200
Upon completion and NHDES approval of Tasks	5 - 8	\$200
Upon completion and NHDES approval of Task	9	\$1,000
Upon completion and NHDES approval of Task	10	\$600
Upon completion and NHDES approval of Task	11	\$4,200
Upon completion and NHDES approval of Task	12	\$25,000
Upon completion and NHDES approval of Task	13	\$64,000
Upon completion and NHDES approval of Task	14	\$2,000
Upon completion and NHDES approval of Task	15	\$200
Upon completion and NHDES approval of Tasks	16 & 17	\$200
Upon completion and NHDES approval of Task	18	\$1,150
Upon completion and NHDES approval of Task	19	\$500
Upon completion and NHDES approval of Task	20	\$500
Upon completion and NHDES approval of Task	21	\$250
	<b>Total</b>	<b>\$100,000</b>

Funding is provided through a Watershed Assistance Grant from the NH Department of Environmental Services with Clean Water Act Section 319 funds from the U.S. Environmental Protection Agency.

*Rit*

*11/17/23*

# State of New Hampshire

## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that NEWFOUND LAKE REGION ASSOCIATION is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on December 03, 1971. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned; and the attached is a true copy of the list of documents on file in this office.

Business ID: **66365**

Certificate Number: **0007341153**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 8th day of December A.D. 2025.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan  
Secretary of State

## Filing History

 [Back to Home \(/online\)](#)

### Business Name

NEWFOUND LAKE REGION ASSOCIATION

### Business ID

66365

Filing#	Filing Date	Effective Date	Filing Type	Annual Report Year
0007289240	08/18/2025	08/18/2025	Nonprofit Report	2025
0004977767	08/07/2020	08/07/2020	Nonprofit Report	2020
0004774233	01/16/2020	01/16/2020	Annual Report Reminder	N/A
0003190010	12/02/2015	12/02/2015	Nonprofit Report	2015
0000670630	12/14/2010	12/14/2010	Annual Report	2010
0000670629	10/08/2010	10/08/2010	Reminder Letter	N/A
0000670628	01/03/2006	01/03/2006	Annual Report	2005
0000670627	12/22/2000	12/22/2000	Annual Report	2000
0000670626	12/29/1995	12/29/1995	Annual Report	1995
0000670625	03/06/1990	03/06/1990	Annual Report	1990
0000670624	12/14/1988	12/14/1988	Amendment	N/A
0000670623	01/26/1976	01/26/1976	Annual Fee	N/A
0000670622	12/03/1971	12/03/1971	Business Formation	N/A

Page 1 of 1, records 1 to 13 of 13

[Back](#)

NH Department of State, 107 North Main St. Room 204, Concord, NH 03301 — [Contact Us](#)

[\(/online/Home/ContactUS\)](#)

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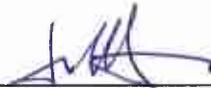
**CERTIFICATE OF AUTHORITY**

I, Jim Fitts, Treasurer of the Newfound Lake Region Association, do hereby certify that:

- (1) I am the duly elected Office <sup>Treasurer</sup>
- (2) at the meeting held on 11/14/2025, the Newfound Lake Region Association voted to accept NHDES funds and to enter into a contract with the Department of Environmental Services;
- (3) the Newfound Lake Region Association further authorized the Rebecca Hanson, NLRA Executive Director to execute any documents which may be necessary for this contract;
- (4) this authorization has not been revoked, annulled, or amended in any manner whatsoever, and remains in full force and effect as of the date of the grant to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this certificate hereof; and
- (5) the following person has been appointed to and now occupies the office indicated in (3) above:

Rebecca Hanson, NLRA Executive Director

IN WITNESS WHEREOF, I have hereunto set my hand as the Treasurer of the Newfound Lake Region Association, this 17<sup>th</sup> day of November, 2025.



Jim Fitts, NLRA Treasurer



**Karen A Sanborn**  
Notary Public, State of New Hampshire  
My Commission Expires March 13, 2029



**Attachment A  
Budget Estimate**

<b>Budget Item</b>	<b>s319 Grant Funding</b>	<b>Non-Federal Matching Funds</b>	<b>Totals</b>
Salaries & Wages	\$4,800	\$14,961	\$19,761
Travel and Training	\$0	\$0	\$0
Contractual	\$30,200	\$4,555	\$34,755
Equipment and Supplies	\$0	\$1,640	\$1,640
Construction	\$65,000	\$45,545	\$110,545
<b>Total Project Cost</b>	<b>\$100,000</b>	<b>\$66,700</b>	<b>\$166,700</b>

## Attachment B

### 2025 Watershed Assistance Grant Ranking

Organization	Project Name	Reviewer A	Reviewer B	Reviewer C	Reviewer D	Reviewer E	AVG.	RANK by AVG.
Country Pond Lake Association	Country Pond Watershed Management Plan Implementation Phase 1: Direct Drainage Area – Newton Boat Ramp BMPs**	87	90	95	91	89	90.4	1
Halfmoon Lake Association	Halfmoon Lake Watershed Plan Implementation Phase 1: North Barnstead Road, Dalton Beach, and Rt 28 Boat Ramp BMPs	86	86	95	83	95	89	2
NH Coastal Program	Cochecho River Restoration / Gonic Dams Removal Project, Phase 2: Dam Removal and River Restoration	89	85	85	92	92	88.6	3
Wentworth Watershed Association	Lake Wentworth-Crescent Lake Watershed Management Plan Implementation Phase 5: Red Brook Circle stormwater mitigation plan**	89	89.5	90	87	87	88.5	4
Rockingham County Conservation District	Exeter River, South of Little John Drive, Phase I, bank stabilization	88	85	87	88	94	88.4	5
Lake Sunapee Protective Association	Lake Sunapee Watershed Plan Implementation Phase 4: Shoreline Stabilization BMPs at Georges Mills Beach and Along Little Lake Sunapee Shoreline **	84	91	86	86	93	88	6
Newfound Lake Region Association	Newfound Watershed Management Plan Implementation Phase 5: Streambank Restoration in Atwell Brook	87	84.5	85	92	87	87.1	7
Acton Wakefield Watersheds Alliance	Salmon Falls Headwater Lakes Watershed Management Plan (SFHLWMP), Province Lake Watershed Management Plan (PLWMP), and Pine River Pond Watershed Management Plan (PRPWMP) Private Road and Residential	86	85	85	81	86	84.6	8

Organization	Project Name	Reviewer A	Reviewer B	Reviewer C	Reviewer D	Reviewer E	AVG.	RANK by AVG.
	Stormwater BMPs, Septic Cost-Share, and Land Conservation**							
Town of Alton, NH	Mill Pond, Mill Pond Supplement to the Merrymeeting River Watershed Management Plan implementation, Phase 2: Route 140 (Alton) BMP's for drainage areas MP1, MP10, the Parking Lot and Letter S Road included in MP12**	78	76	84	85	83	81.2	9
Big Pea Porridge Watershed Preservation Association	Big Pea Porridge Pond Watershed Management Plan Implementation Phase One	79	73	87	84	80	80.6	10
Town of Wolfeboro	Rust Pond – North Inlet Subwatershed Implementation Phase 3: Dredging	84	66.5	85	87	80	80.5	11

**\*\*Project proposal was rescinded.**

#### Review Team Members

Name	Qualifications
Andrea Bejtlich	6 years experience, Watershed Specialist. Surface and drinking water sampling, grant management expertise.
Steve Landry	32 years experience, Watershed Assistance Section Supervisor. Project management, Merrimack watershed and fluvial geomorphology expertise.
Jeff Marcoux	21 years experience, Watershed Coordinator. Project management, grant and contract expertise.
Sally Soule	26 years experience, Coastal Watershed Coordinator. Project management, coastal watershed expertise.
Katie Zink	14 years experience, Watershed Grant Coordinator. Surface and drinking water sampling, microbial expertise.

# NONPROFIT COVER SHEET

**A. Entity Name: Newfound Lake Region Association**

**Mission statement:** We protect Newfound Lake and its watershed. Through education, programs, and collaboration, we promote conservation and preservation of the region's natural, social, and economic resources.

**B. Entity's Contact Information:**

**For Records Requests (e.g., resumes of key personnel; audited financial statements):**

Name / Phone / Email: Rebecca Hanson/603-744-8689/rebecca@newfoundlake.org

**Person responsible for Accuracy and Completeness of information provided:**

Name: Rebecca Hanson

Title: Executive Director

Signature: \_\_\_\_\_



**C. List Board of Directors and Affiliations**

Name (Identify any additional role(s) in parentheses) E.g., John Doe (President)	Affiliations
<b>Ed McNierney (President)</b>	Oneiro
<b>Jim Fitts (Treasurer)</b>	Retired
<b>Val Scarborough (Secretary)</b>	Retired
<b>Jen Berry</b>	Retired
<b>Karen Boyd</b>	Retired
<b>Bill Brady</b>	Kula Bio
<b>Parker Griffin</b>	Retired
<b>Bob Martens</b>	Retired
<b>Rob Moore</b>	Retired
<b>Rob Pinsonneault</b>	Bishop Guertin High School
<b>Carole Tremonti</b>	ConcertAI
<b>Martha Twombly</b>	Retired
<b>Greg Wagner</b>	West Shore Marine
<b>Ken Weidman</b>	Retired

**D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached):**

Name	Role	Annual Salary	Amount Paid From This Contract
<b>Rebecca Hanson</b>	Executive Director	\$98,924	\$4800

**DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER  
GOVERNMENT ENTITY**

**E. Check one of the following:**

- The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**
- The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding. (Attached extra sheet if necessary.)

Docket # 24-01 WC. We are part of an appeal of a Dam Bureau decision on management of the levels of Newfound Lake. The appeal has gone before the Water Council. Our position is the current lake level management is not adequately protecting the water quality of the lake.

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**CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION**

**F. Check one of the following:**

- is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (\*\* see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**
- is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**
- is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

\*\* Note: Attached screenshot from the [DOJ Registered Charities List found online:](#)

18755	Newbury Elderly Housing, Inc.	PO Box 1016	Concord	NH	03302-1016	G	7/15/2026
2647	Newbury Fire Department	PO Box 373	Newbury	NH	03255	G	5/15/2027
14195	Newbury Historical Society, Inc.	PO Box 176	Newbury	NH	03255-0176	X	10/15/2020
16629	Newbury NH Police Department Benevolent Association	PO Box 168	Newbury	NH	03255	X	5/15/2023
32139	Newbury Public Library Foundation of New Hampshire	PO Box 622	Newbury	NH	03255	G	5/15/2026
35409	Newfields Garden Club	32 Runaway Rd	Newfields	NH	03856	G	10/15/2026
5778	Newfields Parent Teacher Organization	9 Piscassic Road	Newfields	NH	03856	G	11/15/2026
3134	Newfields Youth Athletic Association	PO Box 314	Newfields	NH	03856	G	11/15/2025
15034	Newfound Area Charitable Fund	1777 Lake Street	Bristol	NH	03222	X	5/15/2025
2655	Newfound Area Nursing Association	214 Lake Street	Bristol	NH	03222	X	5/15/2021
16313	Newfound Educational Endowment Foundation, Inc.	20 North Main Street	Bristol	NH	03222	G	11/15/2025
14196	Newfound Lake Region Association	10 North Main Street, Unit 1	Bristol	NH	03222-4507	G	5/15/2026
10850	Newfound Pathways	PO Box 112	Hebron	NH	03241	G	5/15/2026
14153	Newfoundland Pony Conservancy Center	PO Box 441	Fitzwilliam	NH	03447	X	5/15/2025
14198	Newington Historical Society	339 LITTLE BAY RDNEWINGTON, NH 03801-2734	NEWINGTON	NH	03801-2734	G	5/15/2026
13687	Newington School Supporters	133 Nimble Hill Road	Newington	NH	03801	G	11/15/2025
10123	Newman Connection, Inc.	902 West Main Street	Teutopolis	IL	62467	G	5/15/2026
34768	Newman's Own Foundation	One Morningside Drive NorthWestport, CT 06880	Westport	CT	06880	G	5/15/2026
35294	NewMarket 300	186 Main Street	New Market	NH	03857	G	5/15/2026
13571	Newmarket Business Association, Inc.	186 Main StreetNewmarket, NH 03857	Newmarket	NH	03857	X	5/15/2023
2695	Newmarket Community Development Corp.	PO Box 313	Newmarket	NH	03857-0313	X	5/15/2025
15850	Newmarket Community Education Partnership	PO Box 536	Newmarket	NH	03857	G	5/15/2026
12122	Newmarket Elementary PTA	243 South Main Street	Newmarket	NH	03857	G	11/15/2026
10705	Newmarket Firefighters Association	4 Young Lane	Newmarket	NH	03857	X	5/15/2021
2697	Newmarket Historical Society	PO Box 534	Newmarket	NH	03857	G	5/15/2026
14199	Newmarket Main Street Corporation	186 Main Street	Newmarket	NH	03857-1838	G	5/15/2026
35359	Newmarket Music Boosters	365 Grant Road	Newmarket	NH	03857	G	11/15/2026
15600	Newmarket Police Relief Association	70 Exeter Street	Newmarket	NH	03857	X	8/15/2024
14200	Newmarket Youth Athletic Association	PO Box 453Newmarket, NH 03857	Newmarket	NH	03857	G	11/14/2026
1373	Newport Alumni Fund	142 Springfield Road	Newport	NH	03773	X	10/15/2021
17884	Newport Cal Ripken League	PO Box 164	Newport	NH	03773	X	5/15/2021

## FINANCIAL DISCLOSURES

**G. Check one the following:**

- The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**
- The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**
- If neither of the above apply**, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

### 1. INCOME STATEMENT

	Revenue		\$
		<i>Interest &amp; Dividends</i>	\$
<i>Grants</i>	\$	<i>All other Revenue</i>	\$
<i>Donations</i>	\$	<b>Total Revenue</b>	\$
<i>Program Services Revenue</i>	\$		

**Expenses**

<i>Compensation of officers, directors, and key personnel</i>	\$
<i>Other salaries &amp; wages</i>	\$
<i>Payroll taxes &amp; employee benefits</i>	\$
<i>Occupancy, rent, utilities, and insurance</i>	\$
<i>Printing, publications, postage, office supplies, and IT</i>	\$
<i>All other expenses</i>	\$
<b>Total Expenses</b>	\$

## 2. BALANCE SHEET

Assets		Liabilities	
<i>Cash &amp; Equivalents</i>	\$	<i>Accounts Payable</i>	\$
<i>Investments</i>	\$	<i>Loans Payable</i>	\$
<i>Real Estate (less any depreciation)</i>	\$	<i>All other liabilities</i>	\$
<i>Other Property &amp; Equipment (less any depreciation)</i>	\$	<b>Total Liabilities</b>	\$
<i>Pledges, grants, accounts receivable</i>	\$		
<i>All other assets</i>	\$		
<b>Total Assets</b>	<b>\$</b>		

Return of Organization Exempt From Income Tax

2024

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Form 990 header section including: A For the 2024 calendar year, or tax year beginning, and ending; B Check if applicable; C Name of organization NEWFOUND LAKE REGION ASSOCIATION; D Employer identification number 02-0398396; E Telephone number (603)744-8699; F Name and address of principal officer: JIM FITTS 10 NORTH MAIN STREET NO UNIT 1, BRISTOL, NH 03222; G Gross receipts 1,930,840; H(a) Is this a group return for labor organizations? Yes No; H(b) Are all subsidiaries included? Yes No; I Tax-exempt status: X 501(c)(3); J Website: WWW.NEWFOUNDLAKE.ORG; K Form of organization: X Corporation; L Year of formation: 1971; M State of legal domicile: NH

Part I Summary

Table with 3 main sections: Activities & Governance (lines 1-7b), Revenue (lines 8-12), Expenses (lines 13-19), and Net Assets or Fund Balances (lines 20-22). Includes columns for Prior Year and Current Year.

Part II Signature Block

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

Signature block section including: Sign Here (Signature of officer JIM FITTS, Title TREASURER); Preparer's name Eric C Rowley, Signature, Date 5/13/2025, PTIN XXXXXXXXX; Firm's name Rowley & Associates, PC, Firm's EIN XX-XXX2619, Firm's address 46 N. State Street, Concord, NH 03301, Phone no. (603) 228-5400

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

TO PROTECT NEWFOUND LAKE AND ITS WATERSHED. THE ASSOCIATION, THROUGH EDUCATION, PROGRAMS AND COLLABORATION, PROMOTES CONSERVATION AND PRESERVATION OF THE REGION'S NATURAL, SOCIAL, AND ECONOMIC RESOURCES.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

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

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

**4a** (Code: ) (Expenses \$ 246,245 including grants of \$ ) (Revenue \$ 11,484 )

MONITOR LAKE AND TRIBUTARY WATER QUALITY, PROTECT AGAINST INVASIVE SPECIES, DEVELOP AND IMPLEMENT WATERSHED MANAGEMENT PLAN, IMPLEMENT ACTIONS THAT PROTECT WATER QUALITY, INCREASE LAND CONSERVATION EFFORTS IN WATERSHED, EDUCATE PUBLIC AND PROVIDE EDUCATIONAL RESOURCES AT PUBLIC MEETINGS, FAIRS, SCHOOLS, CAMPS, AND OTHER EVENTS.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

**4d** Other program services (Describe on Schedule O.)  
(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

**4e** Total program service expenses 246,245

**Part IV Checklist of Required Schedules**

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, bond issues, and organizational structure.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, W-2G forms, and backup withholding rules.

<b>Part V</b> <b>Statements Regarding Other IRS Filings and Tax Compliance</b> <i>(continued)</i>		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	<b>2a</b>	7
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	X
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand . . . . .	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . . If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . . If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . . If "Yes," complete Form 6069.	<b>17</b>	

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	14		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent . . . . .		
	14		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?	X	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

**Section C. Disclosure**

<b>17</b>	List the states with which a copy of this Form 990 is required to be filed . . . . .	NH
<b>18</b>	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)	
<b>19</b>	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
<b>20</b>	State the name, address, and telephone number of the person who possesses the organization's books and records NEWFOUND LAKE REGION ASSOCIATION 10 NORTH MAIN STREET NO UNIT 1, BRISTOL, NH 03222 (603)744-8689	

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) REBECCA HANSON EXECUTIVE DIRECTOR	40.00 0.00			X				102,785	13,148	
(2) ED MCNIERNEY PRESIDENT	3.00 0.00	X		X						
(3) JIM FITTS TREASURER	3.00 0.00	X		X						
(4) VAL SCARBOROUGH SECRETARY	2.00 0.00	X		X						
(5) JEN BERRY TRUSTEE	0.50 0.00	X								
(6) KAREN BOYD TRUSTEE	0.50 0.00	X								
(7) BILL BRADY TRUSTEE	0.50 0.00	X								
(8) PARKER GRIFFIN TRUSTEE	1.50 0.00	X								
(9) BOB MARTENS TRUSTEE	1.00 0.00	X								
(10) ROB MOORE TRUSTEE	1.00 0.00	X								
(11) ROB PINSONNEAULT TRUSTEE	0.50 0.00	X								
(12) CAROLE TREMONTI TRUSTEE	0.50 0.00	X								
(13) MARTHA TWOMBLY TRUSTEE	1.50 0.00	X								
(14) GREG WAGNER TRUSTEE	0.50 0.00	X								

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) KEN WEIDMAN TRUSTEE	3.00 0.00	X								
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Subtotal</b>							102,785	0	13,148	
<b>c Total from continuation sheets to Part VII, Section A</b>							0	0	0	
<b>d Total (add lines 1b and 1c)</b>							102,785	0	13,148	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0

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

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b>	Federated campaigns	<b>1a</b> 0				
	<b>1b</b>	Membership dues	<b>1b</b> 189,979				
	<b>1c</b>	Fundraising events	<b>1c</b> 0				
	<b>1d</b>	Related organizations	<b>1d</b> 0				
	<b>1e</b>	Government grants (contributions)	<b>1e</b> 16,415				
	<b>1f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 1,449,053				
	<b>1g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b> \$ 12,889				
	<b>1h</b>	<b>Total.</b> Add lines 1a-1f		1,655,447			
	Program Service Revenue			Business Code			
<b>2a</b>		ECOTOURS	561520	11,484	11,484		
<b>b</b>				0			
<b>c</b>				0			
<b>d</b>				0			
<b>e</b>				0			
<b>2g</b>		<b>Total.</b> Add lines 2a-2f		11,484			
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)		62,537		62,537	
	<b>4</b>	Income from investment of tax-exempt bond proceeds		0			
	<b>5</b>	Royalties		0			
	<b>6a</b>	Gross rents	(i) Real				
			(ii) Personal				
			<b>6a</b>				
	<b>6b</b>	Less: rental expenses					
	<b>6c</b>	Rental income or (loss)	0	0			
	<b>6d</b>	Net rental income or (loss)		0			
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			<b>7a</b>	0	183,867		
	<b>7b</b>	Less: cost or other basis and sales expenses	0	4,858			
	<b>7c</b>	Gain or (loss)	0	179,009			
	<b>7d</b>	Net gain or (loss)		179,009		179,009	
<b>8a</b>	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18.	<b>8a</b> 13,178					
<b>8b</b>	Less: direct expenses	<b>8b</b> 12,889					
<b>8c</b>	Net income or (loss) from fundraising events		289		289		
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19.	<b>9a</b> 0					
<b>9b</b>	Less: direct expenses	<b>9b</b> 0					
<b>9c</b>	Net income or (loss) from gaming activities		0				
<b>10a</b>	Gross sales of inventory, less returns and allowances						
		<b>10a</b>	0				
		<b>10b</b>	0				
<b>10c</b>	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
	<b>11a</b>	MISCELLANEOUS	900099	4,327	4,327		
	<b>b</b>			0			
	<b>c</b>			0			
	<b>d</b>	All other revenue		0			
<b>11e</b>	<b>Total.</b> Add lines 11a-11d		4,327				
<b>12</b>	<b>Total revenue.</b> See instructions.		1,913,093	15,811	0	241,835	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	95,362	18,119	74,382	2,861
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	188,406	118,090	22,099	48,217
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	25,288	12,138	8,598	4,552
9	Other employee benefits	35,082	0	35,082	0
10	Payroll taxes	23,192	11,132	7,885	4,175
11	Fees for services (nonemployees):				
a	Management	0			
b	Legal	0			
c	Accounting	16,216	0	16,216	0
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	36,805	34,930	0	1,875
12	Advertising and promotion	64	0	64	0
13	Office expenses	1,108	0	1,108	0
14	Information technology	2,999	0	2,999	0
15	Royalties	0			
16	Occupancy	12,000	4,560	4,320	3,120
17	Travel	3,344	2,801	405	138
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,449	1,109	640	700
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,444	0	1,444	0
23	Insurance	8,950	2,673	6,277	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	DUES AND SUBSCRIPTIONS	7,428	1,757	5,671	0
b	ARCHITECTURE	29,128	18,257	10,871	0
c	SUPPLIES	5,577	4,111	1,309	157
d	PRINTING, POSTAGE AND SHIPPING	27,267	11,041	3,626	12,600
e	All other expenses	15,560	5,527	4,284	5,749
25	<b>Total functional expenses.</b> Add lines 1 through 24e	537,669	246,245	207,280	84,144
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	186,903	<b>1</b>	193,270
	<b>2</b> Savings and temporary cash investments	668,355	<b>2</b>	1,422,123
	<b>3</b> Pledges and grants receivable, net	842,035	<b>3</b>	266,110
	<b>4</b> Accounts receivable, net	0	<b>4</b>	0
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	<b>6</b>	
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	0	<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges	1,521	<b>9</b>	1,571
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 1,449,291		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 29,762	278,167	<b>10c</b> 1,419,529
	<b>11</b> Investments—publicly traded securities	1,502,355	<b>11</b>	1,672,596
	<b>12</b> Investments—other securities. See Part IV, line 11	0	<b>12</b>	0
	<b>13</b> Investments—program-related. See Part IV, line 11	0	<b>13</b>	0
	<b>14</b> Intangible assets	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	2	<b>15</b>	2
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	3,479,338	<b>16</b>	4,975,201	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	8,833	<b>17</b>	9,619
	<b>18</b> Grants payable	0	<b>18</b>	
	<b>19</b> Deferred revenue	0	<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities	0	<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	0	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	0	<b>25</b>	0
	<b>26 Total liabilities.</b> Add lines 17 through 25	8,833	<b>26</b>	9,619
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions	2,734,508	<b>27</b>	3,779,255
	<b>28</b> Net assets with donor restrictions	735,997	<b>28</b>	1,186,327
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds	0	<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund	0	<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds	0	<b>31</b>	
<b>32</b> Total net assets or fund balances	3,470,505	<b>32</b>	4,965,582	
<b>33</b> Total liabilities and net assets/fund balances	3,479,338	<b>33</b>	4,975,201	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,913,093
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	537,669
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,375,424
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	3,470,505
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	106,758
<b>6</b>	Donated services and use of facilities	<b>6</b>	12,895
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	4,965,582

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		

**SCHEDULE A**  
**(Form 990)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2024**

**Open to Public Inspection**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

<b>Name of the organization</b> NEWFOUND LAKE REGION ASSOCIATION	<b>Employer identification number</b> 02-0398396
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

- The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)
- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
  - 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
  - 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
  - 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
  - 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
  - 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
  - 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
  - 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
  - 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
  - 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
  - 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
  - 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
    - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
    - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
    - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
    - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
    - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
    - f Enter the number of supported organizations: ..... 0
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>					0	0

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	458,819	676,725	226,861	1,749,302	1,655,447	4,767,154
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>4 Total.</b> Add lines 1 through 3	458,819	676,725	226,861	1,749,302	1,655,447	4,767,154
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						537,880
<b>6 Public support.</b> Subtract line 5 from line 4						4,229,274

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4	458,819	676,725	226,861	1,749,302	1,655,447	4,767,154
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	20,660	35,207	19,241	30,442	62,537	169,087
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						0
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	11,960	7,366	149	4,892	4,327	28,694
<b>11 Total support.</b> Add lines 7 through 10						4,964,935
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	24,662
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

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

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	<b>14</b>	85.18%
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14	<b>15</b>	94.29%
<b>16a 33 1/3% support test—2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test—2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>6 Total.</b> Add lines 1 through 5	0	0	0	0	0	0
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
<b>c</b> Add lines 7a and 7b	0	0	0	0	0	0
<b>8 Public support</b> (Subtract line 7c from line 6.)						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>9</b> Amounts from line 6	0	0	0	0	0	0
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
<b>c</b> Add lines 10a and 10b	0	0	0	0	0	0
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

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

<b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	0.00%
<b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15	<b>16</b>	0.00%

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

<b>17</b> Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	0.00%
<b>18</b> Investment income percentage from 2023 Schedule A, Part III, line 17	<b>18</b>	0.00%

**19a 33 1/3% support tests—2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
4c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
5b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
9b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
9c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
10b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described on line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3.	0	0
5	Depreciation and depletion		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7	Other expenses (see instructions)		
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	<b>Total</b> (add lines 1a, 1b, and 1c)	0	0
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets		
3	Subtract line 2 from line 1d.	0	0
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	0	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	0	0
6	Multiply line 5 by 0.035.	0	0
7	Recoveries of prior-year distributions	0	0
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	0	0
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		0
2	Enter 0.85 of line 1.		0
3	Minimum asset amount for prior year (from Section B, line 8, column A)		0
4	Enter greater of line 2 or line 3.		0
5	Income tax imposed in prior year		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		0
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019	0	
b	From 2020	0	
c	From 2021	0	
d	From 2022	0	
e	From 2023	0	
f	<b>Total</b> of lines 3a through 3e	0	
g	Applied to underdistributions of prior years		0
h	Applied to 2024 distributable amount		0
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f	0	
4	Distributions for 2024 from Section D, line 7: \$	0	
a	Applied to underdistributions of prior years		0
b	Applied to 2024 distributable amount		0
c	Remainder. Subtract lines 4a and 4b from line 4	0	
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		0
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		0
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.	0	
8	Breakdown of line 7:		
a	Excess from 2020	0	
b	Excess from 2021	0	
c	Excess from 2022	0	
d	Excess from 2023	0	
e	Excess from 2024	0	

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II Section B Line 10 MICALLANEOUS - 2017 AMOUNT: \$10,764. 2018 AMOUNT: \$2,078. 2019 AMOUNT: \$2,500. 2020 AMOUNT: \$ 11,960. 2021 AMOUNT: \$7,366. 2022 AMOUNT: \$149. 2023 AMOUNT: \$4,892. 2023 AMOUNT: \$4,327.

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SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: NEWFOUND LAKE REGION ASSOCIATION; Employer identification number: 02-0398396

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements

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

Form with multiple rows for questions 1-9 regarding conservation easements, including a table for 'Held at the End of the Tax Year'.

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

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

Form with rows 1a, 1b, 2, 2a, 2b for questions regarding art and historical treasures.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange program
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

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

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table.
- |   | Amount |
|---|--------|
| <b>1c</b> Beginning balance             | 0      |
| <b>1d</b> Additions during the year     |        |
| <b>1e</b> Distributions during the year |        |
| <b>1f</b> Ending balance                | 0      |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	1,502,355	1,205,921	1,097,409	1,046,043	789,792
<b>b</b> Contributions	63,483	115,442	46,800	300,044	74,913
<b>c</b> Net investment earnings, gains, and losses	106,755	180,992	61,712	-248,678	181,338
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	1,672,596	1,502,355	1,205,921	1,097,409	1,046,043

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 60%
  - b** Permanent endowment 23%
  - c** Term endowment 17%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| <b>(i)</b> Unrelated organizations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>(ii)</b> Related organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>3b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land	0	220,000	0	220,000
<b>b</b> Buildings	0	0	0	0
<b>c</b> Leasehold improvements	0	0	0	0
<b>d</b> Equipment	0	36,642	29,762	6,880
<b>e</b> Other	0	1,192,649	0	1,192,649

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 1,419,529

**Part VII Investments—Other Securities**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, col. (B))	0	

**Part VIII Investments—Program Related**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, col. (B))	0	

**Part IX Other Assets**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	0

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	0

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	2,032,746
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	106,758
<b>b</b>	Donated services and use of facilities	<b>2b</b>	12,895
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	119,653
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	1,913,093
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	0
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<b>5</b>	1,913,093

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	537,669
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	0
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	537,669
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	0
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<b>5</b>	537,669

**Part XIII Supplemental Information**

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

Part II Line 9 NEWFOUND LAKE REGION ASSOCIATION HOLDS TITLE TO TWO DONATED CONSERVATION EASEMENTS ON LAND LOCATED IN ALEXANDRIA, NEW HAMPSHIRE. IT HAS BEEN DETERMINED BY MANAGEMENT TO FOLLOW THE PRACTICE IN CONFORMITY WITH MANY LAND TRUSTS. CONSERVATION EASEMENTS PURCHASED OR DONATED ARE RECORDED AS ASSETS AT THE NOMINAL VALUE OF \$1 ON THE STATEMENT OF FINANCIAL POSITION. ALL EASEMENTS ACQUIRED BY PURCHASE ARE RECORDED AS CONSERVATION ACTIVITES EXPENSE IN THE STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS. IN ADDITION, COSTS INCURRED IN OBTAINING THE EASEMENTS ARE RECORDED AS CURRENT YEAR EXPENSES.

Part V Line 4 NEWFOUND LAKE REGION ASSOCIATION USES ENDOWMENT FUNDS TO SUPPORT THE MISSION OF THE ASSOCIATION. THE ASSOCIATION ON OCCASION USES UP TO 4% OF 13 QUARTER ROLLING AVERAGE OF THEIR FAIR MARKET VALUE OF THE ASSETS FOR OPERATIONS.

Part X Line 2 THE ASSOCIATION HAS BEEN NOTIFIED BY THE INTERNAL REVENUE SERVICE THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE. THE ASSOCIATION IS FURTHER CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(3) OF THE CODE. THE MOST SIGNIFICANT TAX POSITIONS OF THE ASSOCIATION ARE ITS ASSERTION THAT IT IS EXEMPT FROM INCOME TAXES AND ITS DETERMINATION OF WHETHER ANY AMOUNTS ARE SUBJECT TO UNRELATED BUSINESS TAX (UBIT). THE ASSOCIATION FOLLOWS THE GUIDANCE OF ACCOUNTING STANDARDS CODIFICATION (ASC) 740, ACCOUNTING FOR INCOME TAXES, RELATED TO UNCERTAIN INCOME TAXES, WHICH PRESCRIBES A THRESHOLD OF MORE LIKELY THAN NOT FOR RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.

**Part XIII** Supplemental Information *(continued)*

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**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

Employer identification number

NEWFOUND LAKE REGION ASSOCIATION

02-0398396

Form 990, Part VI, Section A, Line 6: NEWFOUND LAKE REGION ASSOCIATION MEMBERS IN GOOD  
STANDING HAVE THE RIGHT TO VOTE FOR OFFICERS AT THE ANNUAL MEETING.

Form 990, Part VI, Section A, Line 7A: THE BOARD OF TRUSTEES APPOINTS NEW MEMBERS AND THE  
MEMBERSHIP CONFIRMS THE APPOINTMENT AT THE ANNUAL MEETING.

Form 990, Part VI, Section B, Line 11B: THE EXECUTIVE DIRECTOR, TREASURER AND FINANCE  
COMMITTEE REVIEW THE IRS FORM 990 PRIOR TO ITS DISTRIBUTION TO THE FULL BOARD AND  
FINALIZATION.

Form 990, Part VI, Section B, Line 12C: BOARD OF TRUSTEES OVERSIGHT, ANNUAL RENEWAL AND  
SIGNING OF STATEMENTS BY EACH TRUSTEE.

Form 990, Part VI, Section B, Line 15A: THE EXECUTIVE COMMITTEE EVALUATES THE PERFORMANCE OF  
THE EXECUTIVE DIRECTOR AND FORWARDS ITS COMPENSATION RECOMMENDATION, USING DATA GATHERED FROM  
COMPARATIVE ORGANIZATIONS, TO THE FULL BOARD OF TRUSTEES. THE BOARD OF TRUSTEES REVIEWS THE  
PACKAGE DURING A REGULAR MEETING. THE PACKAGE MUST BE APPROVED BY A MAJORITY VOTE.

Form 990, Part VI, Section C, Line 19: UPON REQUEST AT THE ASSOCIATION OFFICE DURING NORMAL  
BUSINESS HOURS.

Form 990, Part XII, Line 2C: THE BOARD OF TRUSTEES ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE  
AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR.

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# REBECCA K. HANSON

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## **Education**

### **Plymouth State University**

MS: Environmental Science and Policy

Thesis: Modeling Water Quality in the Squam Watershed

### **University of New Hampshire**

BS: Environmental Conservation with a concentration in Environmental Science, Minor in Water Resource Management

UNH-EcoQuest New Zealand Study Abroad Program

**Honors and Awards:** Magna Cum Laude, Golden Key National Honor Society, Xi Sigma Pi (UNH Forestry Honor Society)

### **Holderness School**

## **Professional Experience**

### **Executive Director, Newfound Lake Region Association, Hebron, NH**

*2019-Present*

- General—Direct and oversee all aspects of this watershed-based conservation nonprofit organization including:
- Financial management
- Staff management
- Fundraising, including any capital campaigns and grant writing
- Community connections and donor stewardship
- Watershed Management plan implementation

### **Director of Conservation, Squam Lakes Association, Holderness, NH**

*2011-2019*

**General**—Direct all conservation programs. Coordinate and recruit conservation volunteers. Plan and run events and programs. Maintain the budget for conservation programs.

**Lakes Region Conservation Corps AmeriCorps Program**—Supervise this regional program based on the structure created by a competitive internship for college students in 2012.

**Communications and Outreach**—Design and provide content for the Squam Watershed Report (first edition published in 2013), an annual document that brings together decades of conservation work on Squam into one easily accessible document. Planned, developed and published The Loon Flyer, the Association's newsletter from 2011 to 2014.

**Invasive Species Management**—Direct program that removes and monitors invasive species, both aquatic and terrestrial. Plan and implement education strategies for students, local government, property owners and lake users.

**Water Quality Monitoring**—Plan and implement a water quality monitoring program. Recruit, train and manage volunteers and staff to sample sites in the Squam Lakes.

**Education and Programming**—Plan curriculum for and lead conservation education programming for youth and adults.

**Grant Writing**—Search for grants and apply for funding from foundation, government and other sources.

### **Plymouth Planning Board Member, Town of Plymouth, NH**

*2014-2024, Chair 2017-2023*

Review development applications and zoning ordinance amendments. Update town Master Plan and Zoning Ordinance.

### **Plymouth Conservation Commission Member, Town of Plymouth, NH**

*2014-2016*

Review wetlands permit applications. Manage town conservation property and associated trail network.

### **Teacher, Waterville Valley Academy, Waterville, NH**

*November 2010-March 2011*

Instructed and inspired high school students in biology, environmental science and computer classes. Coordinated student study halls in remote locations. Coordinated communication between travelling student/athletes and teachers.

### **Library Assistant, Teton County Library, Jackson, WY**

*2007-2010*

Assisted patrons with circulation of library materials, reference questions and computer use. Worked independently to purchase new material for the library. Maintained a budget for collection development responsibilities. Developed, recorded, and edited a monthly radio show about various book topics. Received and processed new materials acquired by the library.

**Wildlife Technician, Wyoming Wolf Project, US Fish and Wildlife Service, Jackson, WY**

*November 2005-September 2006*

Used radio telemetry and GPS equipment to track and locate wolves and wolf packs in western Wyoming. Examined carcass remains for evidence of wolf presence and wolf-caused mortality. Investigated habitat and wolf-killed carcasses in a predation study. Remote areas were accessed by foot, bicycle, cross-country skis and snowmobiles.

**Gardening Crew Leader, Rebecca's Gardening Service, Wilson, WY**

*2004-2006, summers only*

Lead gardening crews in the installation and maintenance of gardens in 50 homes in Teton County, WY. Responsible for inventory tracking and maintaining billable hours.

**Ski Instructor, Jackson Hole Nordic Center, Jackson, WY**

*2002-2005, winters only*

Instructed guests on basic through advanced skills in both cross-country and telemark skiing. Led guests on cross-country and snowshoe tours in Grand Teton National Park.

**Dogsled Trip Leader, Continental Divide Dogsledding Tours, Dubois, WY**

*2002-2005, winters only*

Safely led guests on dogsledding tours in Teton Village, WY. Responsible for dog care and safety.

**Water Quality Program Director, Green Mountain Conservation Group, Freedom, NH**

*April-December 2003*

Managed a watershed-wide water quality monitoring program. Supervised over thirty volunteers and six employees. Responsible for water quality outreach and communication through meetings, presentations and publications.

**Naturalist, Naturalists at Large, Ventura, CA**

*August-November 2002*

Led school groups in positive outdoor experiences in remote locations throughout southern California. Skills and lessons taught included ecology, conservation, environmental ethics, biology, snorkeling, sea kayaking, backpacking and general campcraft. Responsible for management of small groups of students in a backcountry setting.

**Marine Program Assistant, Southeastern Massachusetts Aquaculture Center, Cape Cod, MA**

*November 2001- August 2002*

Worked with marine farmers to measure, record and analyze growth parameters for various shellfish species. Coordinated a shellfish health survey. Provided outreach and education in local schools and public meetings.

**Research Technician, Cornell University, Hubbard Brook Experimental Forest, Thornton, NH**

*Summer 2001*

Identified and enumerated terrestrial invertebrate samples, collected soil cores, managed data, measured various soil ecology parameters, and operated underground root filming equipment.

**Limnology Intern, NH Department of Environmental Services, Limnology Center, Concord, NH**

*Summer 2000*

Collected water samples in lakes throughout New Hampshire for annual state survey and the NH Volunteer Lake Assessment Program. Identified aquatic plants. Performed laboratory analysis of water samples. Delineated watersheds using ArcView.

**Undergraduate Teaching Assistant, University of New Hampshire, Durham, NH**

*September-December 1999*

Led undergraduate students in a two-credit course: Field Identification of Trees and Shrubs. Lessons included species identification and general forest ecology.

### **Other Certifications and Skills**

- Environmental Leadership Program (2012 Senior Fellow)
- Computer skills: Microsoft Office, Adobe InDesign, Donor Perfect, Quantum GIS
- Open water scuba diver
- Weed Control Diver (specialty diver)
- NH Commercial Boat License
- NH Safe Boater Certification