

COMMITTEE ON NATURAL RESOURCES
Disclosure Form
As required by and provided for in House Rule XI, clause 2(g) and
the Rules of the Committee on Natural Resources

Subcommittee on National Parks, Forests and Public Lands
Legislative Hearing on H.R. 2578 and H.R. 1581

For Individuals:

1. Name:
2. Address:
3. Email Address:
4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

1. Name: Dan Kleen
2. Name of Organization(s) You are Representing at the Hearing: NOHVCC (National Off-Highway Vehicle Conservation Council)
3. Business Address: 427 Central Ave West, Great Falls, MT. 59404
4. Business Email Address: [Information redacted for privacy]
5. Business Phone Number: 712-358-1870 or 800-348-6487

Name/Organization: Dan Kleen / NOHVCC_ (National Off-Highway Vehicle Conservation Council)
Title/Date of Hearing: The Subcommittee on National Parks, Forests and Public Lands (H.R. 1581)
July 26, 2011

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and/or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Injured in a diving accident in 1987. I have been a wheelchair user for the last 24 years. I have helped many other people with disabilities to get back into the outdoors or introduce them to new forms of outdoor recreation like Off-Highway Vehicles.

Name/Organization: Dan Kleen / NOHVCC (National Off-Highway Vehicle Conservation Council)
Title/Date of Hearing: The Subcommittee on National Parks, Forests and Public Lands (H.R. 1581)
July, 26, 2011

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying. I served as a member of the NOHVCC Board of Directors for the past 13 years, holding the office of President for the past 10 years.

h. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and /or other agencies invited) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

Bureau of Land Management (FY 06-07) Cooperative agreement to provide OHV recreation management, education and safety training and materials (\$7,000)

Bureau of Land Management (FY 07-08) Cooperative agreement to provide OHV recreation management, education and safety training and materials (\$7,000)

Bureau of Land Management (FY 08-09) Cooperative agreement to provide OHV recreation management, education and safety training and materials (\$17,000)

Bureau of Land Management (FY 10-11) Cooperative agreement to provide OHV recreation management, education and safety training and materials (\$20,000)

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

N/A

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

N/A

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

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

COPY

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning and ending

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

C Name of organization
NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
213 4TH ST SW
 City or town, state or country, and ZIP + 4
GREAT FALLS, MT 59404

D Employer identification number
39-1978220

E Telephone number
406-454-9190

G Gross receipts \$ **586324.**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

F Name and address of principal officer: **RUSS EHNES**
213 4TH ST SW, GREAT FALLS, MT 59404

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

J Website: ▶ **WWW.NOHVCC.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1998** **M** State of legal domicile: **MT**

Part I Summary

1 Briefly describe the organization's mission or most significant activities: EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES		
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3 Number of voting members of the governing body (Part VI, line 1a)	3 12	
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 12	
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5 0	
6 Total number of volunteers (estimate if necessary)	6 0	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
7b Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 0. Current Year 0.
	9 Program service revenue (Part VIII, line 2g)	549627. 583297.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-933. 774.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-2027. 2253.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	546667. 586324.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	316772. 274928.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	0. 0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	237108. 243166.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	553880. 518094.	
19 Revenue less expenses. Subtract line 18 from line 12	-7213. 68230.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 141047. End of Year 205759.
	21 Total liabilities (Part X, line 26)	24287. 20769.
	22 Net assets or fund balances. Subtract line 21 from line 20	116760. 184990.

Part II Signature Block

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

Sign Here ▶ Signature of officer
RUSS EHNES, EXECUTIVE DIRECTOR
 Date

Paid Preparer Use Only

Print/Type preparer's name **RANDAL J BOYSUN** Preparer's signature *Randal J Boysun* Date **JUN 4 2011** Check self-employed PTIN

Firm's name ▶ **DOUGLAS WILSON & COMPANY, P.C.** Firm's EIN ▶

Firm's address ▶ **1000 FIRST AVENUE SOUTH GREAT FALLS, MT 59401** Phone no. **406-761-4645**

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

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

Form 990 (2010)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 424321. including grants of \$ _____) (Revenue \$ 586324.)

EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES

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

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

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses **424321.**

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CONSERVATION COUNCIL, INC

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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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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CONSERVATION COUNCIL, INC

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Part IV Checklist of Required Schedules (continued)

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

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CONSERVATION COUNCIL, INC

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	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)?		X
	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).			
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		
1a		12
b Enter the number of voting members included in line 1a, above, who are independent		
1b		12
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **MONA EHNES - 406-454-9190**
213 4TH ST SW, GREAT FALLS, MT 59404

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CONSERVATION COUNCIL, INC

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAN KLEEN PRESIDENT	2.00	X					0.	0.	0.	
TOM UMPRESS SEC	1.00	X					0.	0.	0.	
STEVE GUNDERSON TREAS	2.00	X					0.	0.	0.	
MARK MITCHELL DIRECTOR	1.00	X					0.	0.	0.	
NANCY MINARD DIRECTOR	1.00	X					0.	0.	0.	
BOB HAMMOND DIRECTOR	1.00	X					0.	0.	0.	
JAMES BARRETT DIRECTOR	1.00	X					0.	0.	0.	
LEWIS SCHULER DIRECTOR	1.00	X					0.	0.	0.	
BRUCE BUTLER DIRECTOR	1.00	X					0.	0.	0.	
TOM NIEMELA DIRECTOR	1.00	X					0.	0.	0.	
MIKE PINKERTON DIRECTOR	1.00	X					0.	0.	0.	
RUSSELL EHNES EXECUTIVE DIRECTOR	40.00			X			64074.	0.	12160.	

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

Form 990 (2010)

39-1978220 Page 9

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f						
Program Service Revenue	2 a	DIRECT SUPPORT	Business Code 611600	464523.	464523.			
	b	ANNUAL CONFERENCE	611600	87794.	87794.			
	c	ADVENTURE TRAIL PROGRA	611600	19000.	19000.			
	d	AGENCY CONTRACT	611600	10000.	10000.			
	e	WORKSHOP FEES	611600	1135.	1135.			
	f	All other program service revenue	611600	845.	845.			
	g	Total. Add lines 2a-2f		583297.				
	3	Investment income (including dividends, interest, and other similar amounts)		774.	774.			
4	Income from investment of tax-exempt bond proceeds							
5	Royalties							
Other Revenue	6 a	Gross Rents	(i) Real (ii) Personal					
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other					
	b	Less: cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)						
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from gaming activities						
	10 a	Gross sales of inventory, less returns and allowances	a					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code				
	11 a	SALE OF MERCHANDISE	611600	1966.	1966.			
	b	REIMBURSEMENT OF EXP	611600	287.	287.			
c								
d	All other revenue							
e	Total. Add lines 11a-11d		2253.					
12	Total revenue. See instructions.		586324.	586324.	0.	0.		

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	76234.	76234.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	147753.	147753.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6463.	6463.		
9 Other employee benefits	22012.	22012.		
10 Payroll taxes	22466.	22466.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	850.		850.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	2500.		2500.	
g Other				
12 Advertising and promotion	5750.		5750.	
13 Office expenses	2534.		2534.	
14 Information technology	2976.		2976.	
15 Royalties				
16 Occupancy	23121.		23121.	
17 Travel	2527.		2527.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	26335.		26335.	
23 Insurance	6372.		6372.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a ANNUAL CONFERENCE	65917.	65917.		
b ADVENTURE TRAIL PROJECT	28574.	28574.		
c ID VIDEO PROJECT	17583.	17583.		
d MISC SHOWS/WORKSHOPS	16540.	16540.		
e TELEPHONE	9825.		9825.	
f All other expenses	31762.	20779.	10983.	
25 Total functional expenses. Add lines 1 through 24f	518094.	424321.	93773.	0.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

Form 990 (2010)

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	12583.	1	8829.
	2 Savings and temporary cash investments	31050.	2	130745.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	5125.	4	825.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	21854.	8	19573.
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 172929.		
	b Less: accumulated depreciation	10b 137066.		
		60523.	10c	35863.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	9912.	15	9924.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	141047.	16	205759.	
Liabilities	17 Accounts payable and accrued expenses	24287.	17	20769.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	24287.	26	20769.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	116760.	27	184990.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	116760.	33	184990.	
34 Total liabilities and net assets/fund balances	141047.	34	205759.	

Form 990 (2010)

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

Form 990 (2010)

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	586324.
2	Total expenses (must equal Part IX, column (A), line 25)	2	518094.
3	Revenue less expenses. Subtract line 2 from line 1	3	68230.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	116760.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	184990.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization **NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC** Employer identification number **39-1978220**

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

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

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

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

 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
 - (ii) A family member of a person described in (i) above? _____
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____
- h Provide the following information about the supported organization(s).

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

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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"/>

NATIONAL OFF-HIGHWAY VEHICLE

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4831.	3765.	3725.			12321.
2 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	875014.	889786.	883215.			2648015.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	879845.	893551.	886940.			2660336.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						2660336.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	879845.	893551.	886940.			2660336.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4697.	8559.	1517.			14773.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	4697.	8559.	1517.			14773.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	884542.	902110.	888457.			2675109.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	99.45 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	99.51 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	.55 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	.49 %

19a 33 1/3% support tests - 2010. 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 - 2009. 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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC** Employer identification number
39-1978220

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- Yes No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1
- ▶ \$ _____
- (ii) Assets included in Form 990, Part X
- ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- ▶ \$ _____
- b Assets included in Form 990, Part X
- ▶ \$ _____

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

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

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

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

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		172929.	137066.	35863.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				35863.

NATIONAL OFF-HIGHWAY VEHICLE
 CONSERVATION COUNCIL, INC

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

NATIONAL OFF-HIGHWAY VEHICLE
 CONSERVATION COUNCIL, INC

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	586324.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	518094.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	68230.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	68230.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

ADJ ACCUMULATED DEPRECIATION TO MATCH 990

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Employer identification number
39-1978220

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S ACCOUNTANT

**PREPARED THE FORM 990. THE FORM WAS REVIEWED BY THE BOARD AT THE NEXT
SCHEDULED BOARD MEETING. THE BOARD APPROVED THE FORM 990 BEFORE IT WAS
FILED.**

**FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS CAN BE
OBTAINED FROM THE ORGANIZATION'S OFFICE UPON REQUEST.**

Asset Number	Description of property					Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	Date placed in service	Method/IRC sec.	Life or rate	Line No.					
51	AMD SP SYSTEM								
	012710	SL	3.00	19A	670.			112.	
52	AMD WINDOWS 7 SYSTEM								
	052510	SL	3.00	19A	745.			124.	
53	CANNON FS300 DIGITAL VIDEO CAMERA								
	070710	SL	5.00	19B	260.			26.	
103	SUZUKI DIRT BIKE								
	041603	SL	5.00	17	4000.		4000.	0.	
2	ADVENTURE TRAIL CART								
	040104	SL	5.00	17	638.		638.	0.	
3	MIRAGE TRAILER REGIONAL								
	062006	SL	5.00	17	8320.		5824.	1664.	
4	RAM 3500 DODGE								
	103006	SL	5.00	17	36586.		25610.	7317.	
5	GOOSENECK TRAILER								
	070507	SL	5.00	17	39260.		19630.	7852.	
6	SIGNAGE - TRUCK & TRAILER								
	080807	SL	5.00	17	2600.		1248.	520.	
7	00 HONDA RECONS								
	040101	SL	5.00	17	2230.		2230.	0.	
8	MIRAGE CARGO TRAILER								
	060908	SL	5.00	17	9000.		2700.	1800.	
	* 990 PAGE 10 TOTAL -					104309.	0.	61880.	19415.
9	MONTANA OFFICE								
	010107	SL	20.00	17	1200.		150.	60.	
10	INS OVERHEAD DOOR - WARE								
	012308	SL	20.00	17	1622.		122.	81.	
11	CONSTRUCT FOR OVRHD DR								
	040108	SL	20.00	17	2350.		177.	118.	
	* 990 PAGE 10 TOTAL -					5172.	0.	449.	259.
12	GATERFOAM POSTERS								
	010104	SL	5.00	17	780.		780.	0.	
13	DISPLAY CASES 2'								
	010104	SL	5.00	17	670.		670.	0.	
14	BANNER STANDS								
	071405	SL	5.00	17	4056.		3650.	406.	
15	DHP DESKTOP PC								
	050205	SL	5.00	17	1628.		1466.	162.	
16	DESK SET (RUSS)								
	063000	SL	10.00	17	1227.		1197.	30.	
17	HP PAVILION PC								
	010104	SL	5.00	17	1199.		1199.	0.	
18	HP PENTIUM PC								
	100505	SL	5.00	17	1400.		1260.	140.	
19	SAVIN COPIER 4018D								
	082205	SL	5.00	17	3725.		4470.	0.	
20	TREADMILL NORDIC TRACK								
	121302	SL	5.00	17	875.		875.	0.	
21	HP PC 782CD - HEIDI								
	120702	SL	5.00	17	1584.		1584.	0.	
22	ATX-IC8000 SERVER								
	111505	SL	5.00	17	894.		894.	0.	

Asset Number	Description of property					Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	Date placed in service	Method/IRC sec.	Life or rate	Line No.					
23	AUDIO VISUAL CABINET								
	053000	SL	10.00	17	827.		807.	20.	
24	CONFERENCE CHAIRS								
	053000	SL	10.00	17	1944.		1894.	50.	
25	CONFERENCE TABLE								
	061200	SL	10.00	17	551.		537.	14.	
26	DESK SET (ANN'S)								
	063000	SL	10.00	17	2000.		1950.	50.	
28	LATERAL STORAGE (18')								
	030100	SL	10.00	17	2080.		2028.	52.	
29	LATERAL STORAGE CABINET								
	053000	SL	10.00	17	1144.		1114.	30.	
30	PROJECTOR SCREEN 8 SQ								
	022704	SL	5.00	17	570.		570.	0.	
31	TREADMILL NTTL 321								
	091502	SL	5.00	17	709.		709.	0.	
32	UNBIND (BINDER)								
	110901	SL	5.00	17	893.		759.	0.	
33	SOUND EQUIP MICROPHONE								
	030304	SL	5.00	17	563.		563.	0.	
34	HP PC 782CDB								
	120702	SL	5.00	17	1584.		1346.	0.	
35	LAPTOP TOSHIBA								
	092706	SL	5.00	17	1249.		875.	250.	
36	NEW BOOTH PARTS								
	111607	SL	5.00	17	2072.		1035.	414.	
37	SERVER								
	011007	SL	5.00	17	4905.		2452.	981.	
39	HP TX 2120 LAPTOP - KAREN								
	050708	SL	5.00	17	1233.		370.	247.	
40	HP DV6917 LAPTOP - RUSS								
	071308	SL	5.00	17	747.		224.	149.	
41	SONY HDR-SR12 CAMERA								
	111108	SL	5.00	17	1922.		576.	384.	
42	HP DV5 LAPTOP - JACK								
	102308	SL	5.00	17	899.		270.	180.	
43	NEC SV8100 TELEPHONE								
	090808	SL	5.00	17	3509.		1053.	702.	
50	GREAT FALLS UPHOLSTERY								
	012109	SL	5.00	17	1390.		139.	278.	
	* 990 PAGE 10 TOTAL -								
					48829.	0.	37316.	4539.	
44	EVENT PLANNING SOFTWARE								
	071205	SL	5.00	17	5383.		4846.	537.	
45	SOFTWARE NEW DATABASE GART								
	040706	SL	5.00	17	2617.		1831.	523.	
46	SOFTWARE DATABASE GARTNER								
	091906	SL	5.00	17	5494.		3846.	1099.	
47	BW SOFTWARE								
	012207	SL	5.00	17	1125.		563.	225.	
	* 990 PAGE 10 TOTAL -								
					14619.	0.	11086.	2384.	
	* GRAND TOTAL 990 PAGE 10 DEPR								
					172929.	0.	110731.	26597.	

4562

Form

Depreciation and Amortization 990 (Including Information on Listed Property)

OMB No. 1545-0172

2010

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Attachment Sequence No. 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number

NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

FORM 990 PAGE 10

39-1978220

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Form section for Part I with lines 1-13. Line 1: 500000. Line 3: 2000000. Line 7: [blank]. Line 13: [blank].

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Form section for Part II with lines 14-16. Line 14: [blank]. Line 15: [blank]. Line 16: [blank].

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

Section A

Form section for Section A with lines 17-18. Line 17: 26335. Line 18: [blank].

Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year property, Residential rental property, and Nonresidential real property.

Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

Table with 6 columns: (a) Class life, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 12-year and 40-year class life.

Part IV Summary (See instructions.)

Form section for Part IV with lines 21-23. Line 21: [blank]. Line 22: 26597. Line 23: [blank].

016251 12-21-10

LHA For Paperwork Reduction Act Notice, see separate instructions.

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No		24b If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No										
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2010 tax year:					
43 Amortization of costs that began before your 2010 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

2010 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - NATIONAL OFF-HIGHWAY VEHICLE
 CONSERVATION COUNCIL, INC

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
51	AMD SP SYSTEM	012710SL		3.00	19A	670.			670.			112.
	AMD WINDOWS 7	052510SL		3.00	19A	745.			745.			124.
52	SYSTEM											
	CANNON FS300	070710SL		5.00	19B	260.			260.			26.
53	DIGITAL VIDEO CAMER	041603SL		5.00	17	4000.			4000.	4000.		0.
1	103 SUZUKI DIRT BIKE											
2	ADVENTURE TRAIL	040104SL		5.00	17	638.			638.	638.		0.
	CART											
	MIRAGE TRAILER	062006SL		5.00	17	8320.			8320.	5824.		1664.
3	REGIONAL											
4	RAM 3500 DODGE	103006SL		5.00	17	36586.			36586.	25610.		7317.
5	GOOSENECK TRAILER	070507SL		5.00	17	39260.			39260.	19630.		7852.
6	SIGNAGE - TRUCK & TRAILER	080807SL		5.00	17	2600.			2600.	1248.		520.
7	HONDA RECONS	040101SL		5.00	17	2230.			2230.	2230.		0.
	MIRAGE CARGO											
8	TRAILER	060908SL		5.00	17	9000.			9000.	2700.		1800.
	* 990 PAGE 10 TOTAL					104309.		0.	104309.	61880.	0.	19415.
9	MONTANA OFFICE	010107SL		20.00	17	1200.			1200.	150.		60.
	INS OVERHEAD DOOR -											
10	WARE	012308SL		20.00	17	1622.			1622.	122.		81.
	CONSTRUCT FOR OVRHD											
11	DR	040108SL		20.00	17	2350.			2350.	177.		118.
	* 990 PAGE 10 TOTAL					5172.		0.	5172.	449.	0.	259.
12	GATERFOAM POSTERS	010104SL		5.00	17	780.			780.	780.		0.
13	DISPLAY CASES 2'	010104SL		5.00	17	670.			670.	670.		0.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

(D) - Asset disposed

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
14	BANNER STANDS	071405SL		5.00	17	4056.			4056.	3650.		406.
15	DHP DESKTOP PC	050205SL		5.00	17	1628.			1628.	1466.		162.
16	DESK SET (RUSS)	063000SL		10.00	17	1227.			1227.	1197.		30.
17	HP PAVILLION PC	010104SL		5.00	17	1199.			1199.	1199.		0.
18	HP PENTIUM PC	100505SL		5.00	17	1400.			1400.	1260.		140.
19	SAVIN COPIER 4018D TREADMILL NORDIC	082205SL		5.00	17	3725.			3725.	4470.		0.
20	TRACK	121302SL		5.00	17	875.			875.	875.		0.
21	HP PC 782CD - HEIDI	120702SL		5.00	17	1584.			1584.	1584.		0.
22	ATX-IC8000 SERVER AUDIO VISUAL	111505SL		5.00	17	894.			894.	894.		0.
23	CABINET	053000SL		10.00	17	827.			827.	807.		20.
24	CONFERENCE CHAIRS	053000SL		10.00	17	1944.			1944.	1894.		50.
25	CONFERENCE TABLE	061200SL		10.00	17	551.			551.	537.		14.
26	DESK SET (ANN'S)	063000SL		10.00	17	2000.			2000.	1950.		50.
28	LATERAL STORAGE (18')	030100SL		10.00	17	2080.			2080.	2028.		52.
29	LATERAL STORAGE CABINET	053000SL		10.00	17	1144.			1144.	1114.		30.
30	PROJECTOR SCREEN 8 SQ	022704SL		5.00	17	570.			570.	570.		0.
31	TREADMILL NTTL 321	091502SL		5.00	17	709.			709.	709.		0.
32	UNBIND (BINDER)	110901SL		5.00	17	893.			893.	759.		0.

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
33	SOUND EQUIP MICROPHONE	030304SL		5.00	17	563.			563.	563.		0.
34	HP PC 782CDB	120702SL		5.00	17	1584.			1584.	1346.		0.
35	LAPTOP TOSHIBA	092706SL		5.00	17	1249.			1249.	875.		250.
36	NEW BOOTH PARTS	111607SL		5.00	17	2072.			2072.	1035.		414.
37	SERVER	011007SL		5.00	17	4905.			4905.	2452.		981.
39	HP TX 2120 LAPTOP - KAREN	050708SL		5.00	17	1233.			1233.	370.		247.
40	HP DV6917 LAPTOP - RUSS	071308SL		5.00	17	747.			747.	224.		149.
41	SONY HDR-SR12 CAMERA	111108SL		5.00	17	1922.			1922.	576.		384.
42	HP DV5 LAPTOP - JACK	102308SL		5.00	17	899.			899.	270.		180.
43	NEC SV8100 TELEPHONE	090808SL		5.00	17	3509.			3509.	1053.		702.
50	GREAT FALLS UPHOLSTERY	012109SL		5.00	17	1390.			1390.	139.		278.
	* 990 PAGE 10 TOTAL					48829.		0.	48829.	37316.	0.	4539.
44	EVENT PLANNING SOFTWARE	071205SL		5.00	17	5383.			5383.	4846.		537.
45	SOFTWARE NEW DATABASE GART	040706SL		5.00	17	2617.			2617.	1831.		523.
46	SOFTWARE DATABASE GARTNER	091906SL		5.00	17	5494.			5494.	3846.		1099.
47	SOFTWARE	012207SL		5.00	17	1125.			1125.	563.		225.
	* 990 PAGE 10 TOTAL					14619.		0.	14619.	11086.	0.	2384.
	* GRAND TOTAL 990 PAGE 10 DEPR					172929.		0.	172929.	110731.	0.	26597.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

(D) - Asset disposed

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
51	AMD SP SYSTEM	012710SL		3.00	670.		670.	112.	223.
52	AMD WINDOWS 7 SYSTEM	052510SL		3.00	745.		745.	124.	248.
53	CANNON FS300 DIGITAL VIDEO CAMERA	070710SL		5.00	260.		260.	26.	52.
1	103 SUZUKI DIRT BIKE	041603SL		5.00	4000.		4000.	4000.	0.
2	ADVENTURE TRAIL CART	040104SL		5.00	638.		638.	638.	0.
3	MIRAGE TRAILER REGIONAL	062006SL		5.00	8320.		8320.	7488.	832.
4	RAM 3500 DODGE	103006SL		5.00	36586.		36586.	32927.	3659.
5	GOOSENECK TRAILER	070507SL		5.00	39260.		39260.	27482.	7852.
6	SIGNANGE - TRUCK & TRAILER	080807SL		5.00	2600.		2600.	1768.	520.
7	HONDA RECONS	040101SL		5.00	2230.		2230.	2230.	0.
8	MIRAGE CARGO TRAILER	060908SL		5.00	9000.		9000.	4500.	1800.
	* 990 PAGE 10 TOTAL -				104309.		104309.	81295.	15186.
9	MONTANA OFFICE	010107SL		20.00	1200.		1200.	210.	60.
10	INS OVERHEAD DOOR - WARE	012308SL		20.00	1622.		1622.	203.	81.
11	CONSTRUCT FOR OVRHD DR	040108SL		20.00	2350.		2350.	295.	118.
	* 990 PAGE 10 TOTAL -				5172.		5172.	708.	259.
12	GATERFOAM POSTERS	010104SL		5.00	780.		780.	780.	0.
13	DISPLAY CASES 2'	010104SL		5.00	670.		670.	670.	0.
14	BANNER STANDS	071405SL		5.00	4056.		4056.	4056.	0.
15	DHP DESKTOP PC	050205SL		5.00	1628.		1628.	1628.	0.
16	DESK SET (RUSS)	063000SL		10.00	1227.		1227.	1227.	0.
17	HP PAVILION PC	010104SL		5.00	1199.		1199.	1199.	0.
18	HP PENTIUM PC	100505SL		5.00	1400.		1400.	1400.	0.
19	SAVIN COPIER 4018D	082205SL		5.00	3725.		3725.	4470.	0.
20	TREADMILL NORDIC TRACK	121302SL		5.00	875.		875.	875.	0.
21	HP PC 782CD - HEIDI	120702SL		5.00	1584.		1584.	1584.	0.
22	ATX-IC8000 SERVER	111505SL		5.00	894.		894.	894.	0.
23	AUDIO VISUAL CABINET	053000SL		10.00	827.		827.	827.	0.
24	CONFERENCE CHAIRS	053000SL		10.00	1944.		1944.	1944.	0.
25	CONFERENCE TABLE	061200SL		10.00	551.		551.	551.	0.
26	DESK SET (ANN'S)	063000SL		10.00	2000.		2000.	2000.	0.
28	LATERAL STORAGE (18')	030100SL		10.00	2080.		2080.	2080.	0.
29	LATERAL STORAGE CABINET	053000SL		10.00	1144.		1144.	1144.	0.
30	PROJECTOR SCREEN 8 SO	022704SL		5.00	570.		570.	570.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
31	TREADMILL NTTL 321	091502SL		5.00	709.		709.	709.	0.
32	UNBIND (BINDER)	110901SL		5.00	893.		893.	759.	0.
33	SOUND EQUIP MICROPHONE	030304SL		5.00	563.		563.	563.	0.
34	HP PC 782CDB	120702SL		5.00	1584.		1584.	1346.	0.
35	LAPTOP TOSHIBA	092706SL		5.00	1249.		1249.	1125.	124.
36	NEW BOOTH PARTS	111607SL		5.00	2072.		2072.	1449.	414.
37	SERVER	011007SL		5.00	4905.		4905.	3433.	981.
39	HP TX 2120 LAPTOP - KAREN	050708SL		5.00	1233.		1233.	617.	247.
40	HP DV6917 LAPTOP - RUSS	071308SL		5.00	747.		747.	373.	149.
41	SONY HDR-SR12 CAMERA	111108SL		5.00	1922.		1922.	960.	384.
42	HP DV5 LAPTOP - JACK	102308SL		5.00	899.		899.	450.	180.
43	NEC SV8100 TELEPHONE	090808SL		5.00	3509.		3509.	1755.	702.
50	GREAT FALLS UPHOLSTERY	012109SL		5.00	1390.		1390.	417.	278.
	* 990 PAGE 10 TOTAL -				48829.		48829.	41855.	3459.
44	EVENT PLANNING SOFTWARE	071205SL		5.00	5383.		5383.	5383.	0.
45	SOFTWARE NEW DATABASE GART	040706SL		5.00	2617.		2617.	2354.	263.
46	SOFTWARE DATABASE GARTNER	091906SL		5.00	5494.		5494.	4945.	549.
47	BW SOFTWARE	012207SL		5.00	1125.		1125.	788.	225.
	* 990 PAGE 10 TOTAL -				14619.		14619.	13470.	1037.
	* GRAND TOTAL 990 PAGE 10 DEPR				172929.		172929.	137328.	19941.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

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

COPY
 OMB 1545-0047
2009

Department of the Treasury
 Internal Revenue Service

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

Open to Public Inspection

A For the **2009** calendar year, or tax year beginning and ending

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

C Name of organization
NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
213 4TH ST SW
 City or town, state or country, and ZIP + 4
GREAT FALLS, MT 59404

D Employer identification number
39-1978220

E Telephone number
406-454-9190

G Gross receipts \$ **548372.**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

F Name and address of principal officer: **RUSS EHNES**
213 4TH ST SW, GREAT FALLS, MT 59404

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

J Website: ▶ **WWW.NOHVCC.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1998** **M** State of legal domicile: **MT**

Part I Summary

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities: EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES							
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.							
3	Number of voting members of the governing body (Part VI, line 1a)	3		12			
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		12			
5	Total number of employees (Part V, line 2a)	5		5			
6	Total number of volunteers (estimate if necessary)	6		96			
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a		0.			
7b	Net unrelated business taxable income from Form 990-T, line 34	7b		0.			
		Prior Year		Current Year			
8	Contributions and grants (Part VIII, line 1h)	3725.					
9	Program service revenue (Part VIII, line 2g)	883215.		549627.			
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1517.		-933.			
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12881.		-2027.			
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	901338.		546667.			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)						
14	Benefits paid to or for members (Part IX, column (A), line 4)						
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	425027.		316772.			
16a	Professional fundraising fees (Part IX, column (A), line 11e)						
16b	Total fundraising expenses (Part IX, column (D), line 25)						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	487287.		237108.			
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	912314.		553880.			
19	Revenue less expenses. Subtract line 18 from line 12	-10976.		-7213.			
		Beginning of Current Year		End of Year			
20	Total assets (Part X, line 16)	157224.		141047.			
21	Total liabilities (Part X, line 26)	31019.		24287.			
22	Net assets or fund balances. Subtract line 21 from line 20	126205.		116760.			

Part II Signature Block

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

Sign Here
 Signature of officer: **RUSS EHNES, EXECUTIVE DIRECTOR**
 Date: _____
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature: *[Signature]* Date: **FEB 13 2010**
 Check if self-employed Preparer's identifying number (see instructions)
 Firm's name (or yours if self-employed), address, and ZIP + 4: **DOUGLAS WILSON & COMPANY, P.C.**
1000 FIRST AVENUE SOUTH
GREAT FALLS, MT 59401
 EIN: _____
 Phone no.: **406-761-4645**

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 353910. including grants of \$) (Revenue \$ 549627.)
EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES

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

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

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

4e Total program service expenses \$ 353910.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount of other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Parts X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain a separate, independent audited financial statement for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		X
12A	Was the organization included in a consolidated, independent audited financial statement for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Form 990 (2009)

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Part IV Checklist of Required Schedules (continued)

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

Form 990 (2009)

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

Form 990 (2009)

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a			0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b			0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
1c			
2a	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		
2a			5
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3a			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
4a	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)?		X
4a			
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
4b			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5b			
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5c			
6a	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?		X
6a			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		X
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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CONSERVATION COUNCIL, INC**

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body		
1a		12
b Enter the number of voting members that are independent		
1b		12
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
2		
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
3		
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
4		
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
5		
6 Does the organization have members or stockholders?		X
6		
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7a		
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
7b		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
8a		
b Each committee with authority to act on behalf of the governing body?	X	
8b		
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X
9		

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **MONA EHNES - 406-454-9190**
213 4TH ST SW, GREAT FALLS, MT 59404

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

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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAN KLEEN PRESIDENT	2.00	X					0.	0.	0.	
TOM UMPRESS SEC	1.00	X					0.	0.	0.	
STEVE GUNDERSON TREAS	2.00	X					0.	0.	0.	
MARK MITCHELL DIRECTOR	1.00	X					0.	0.	0.	
NANCY MINARD DIRECTOR	1.00	X					0.	0.	0.	
BOB HAMMOND DIRECTOR	1.00	X					0.	0.	0.	
JAMES BARRETT DIRECTOR	1.00	X					0.	0.	0.	
LEWIS SCHULER DIRECTOR	1.00	X					0.	0.	0.	
BRUCE BUTLER DIRECTOR	1.00	X					0.	0.	0.	
TOM NIEMELA DIRECTOR	1.00	X					0.	0.	0.	
RUSSELL EHNES EXECUTIVE DIRECTOR	40.00			X			65260.	0.	10015.	
MIKE PINKERTON DIRECTOR	1.00	X					0.	0.	0.	

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Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f					
	Program Service Revenue	2 a	DIRECT SUPPORT	Business Code 611600	490765.	490765.	
		b	ANNUAL CONFERENCE	611600	46119.	46119.	
c		FEDERAL CONTRACT	611600	7000.	7000.		
d		ALASKA TRAIL CONFERENC	611600	5155.	5155.		
e		SCHOLARSHIP FUND	611600	588.	588.		
f		All other program service revenue					
g		Total. Add lines 2a-2f		549627.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		772.	772.		
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real	(ii) Personal			
		Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		Less: cost or other basis and sales expenses			1705.		
		Gain or (loss)			-1705.		
		Net gain or (loss)			-1705.	-1705.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		Less: direct expenses	b				
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
Less: direct expenses		b					
Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	a					
	Less: cost of goods sold	b					
	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a	SALE OF MERCHANDISE	611600		-2027.	-2027.		
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d			-2027.			
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			546667.	546667.	0.	

NATIONAL OFF-HIGHWAY VEHICLE
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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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	86311.		86311.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	174715.	174715.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4760.	4760.		
9 Other employee benefits				
10 Payroll taxes	50986.	50986.		
11 Fees for services (non-employees):				
a Management				
b Legal	998.		998.	
c Accounting	5376.		5376.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	2751.		2751.	
12 Advertising and promotion				
13 Office expenses	2900.		2900.	
14 Information technology	670.		670.	
15 Royalties				
16 Occupancy	23410.		23410.	
17 Travel	8284.		8284.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	28827.		28827.	
23 Insurance	7666.		7666.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a ANNUAL CONFERENCE	83905.	83905.		
b TECH PROJECT	25298.	25298.		
c TELEPHONE	10621.		10621.	
d ID VIDEO PROJECT	10023.	10023.		
e EQUIPMENT EXPENSES / R&	9681.		9681.	
f All other expenses	16698.	4223.	12475.	
25 Total functional expenses. Add lines 1 through 24f	553880.	353910.	199970.	0.
26 Joint Costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

NATIONAL OFF-HIGHWAY VEHICLE
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Part X Balance Sheet

		(A) Beginning of year		(B) End of year		
Assets	1	Cash - non-interest-bearing	25483.	1	12583.	
	2	Savings and temporary cash investments		2	31050.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	3991.	4	5125.	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use	25648.	8	21854.	
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	171254.		
	b	Less: accumulated depreciation	10b	110731.		
	11	Investments - publicly traded securities	91897.	10c	60523.	
	12	Investments - other securities. See Part IV, line 11		11		
	13	Investments - program-related. See Part IV, line 11		12		
	14	Intangible assets		13		
	15	Other assets. See Part IV, line 11	10205.	14		
16	Total assets. Add lines 1 through 15 (must equal line 34)	157224.	15	9912.		
Liabilities	17	Accounts payable and accrued expenses	31019.	16	141047.	
	18	Grants payable		17	24287.	
	19	Deferred revenue		18		
	20	Tax-exempt bond liabilities		19		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20		
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21		
	23	Secured mortgages and notes payable to unrelated third parties		22		
	24	Unsecured notes and loans payable to unrelated third parties		23		
	25	Other liabilities. Complete Part X of Schedule D		24		
	26	Total liabilities. Add lines 17 through 25	31019.	25		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			26	24287.	
	27	Unrestricted net assets	126205.	27	116760.	
	28	Temporarily restricted net assets		28		
	29	Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances	126205.	33	116760.		
34	Total liabilities and net assets/fund balances	157224.	34	141047.		

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 CONSERVATION COUNCIL, INC

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Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
2b	Were the organization's financial statements audited by an independent accountant?		X
2c	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?		X
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:		
<input type="checkbox"/> separate basis <input type="checkbox"/> consolidated basis <input type="checkbox"/> both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits?		

Form 990 (2009)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. 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"/>	

NATIONAL OFF-HIGHWAY VEHICLE

Schedule A (Form 990 or 990-EZ) 2009 CONSERVATION COUNCIL, INC

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6994.	4831.	3765.	3725.		19315.
2 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	802224.	875014.	889786.	883215.		3450239.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	809218.	879845.	893551.	886940.		3469554.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						3469554.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	809218.	879845.	893551.	886940.		3469554.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2256.	4697.	8559.	1517.		17029.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2256.	4697.	8559.	1517.		17029.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	811474.	884542.	902110.	888457.		3486583.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.51 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.58 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	.49 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.42 %

19a **33 1/3% support tests - 2009.** 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 - 2008.** 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

Schedule D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC** Employer identification number **39-1978220**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, reporting of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

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

NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC

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

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

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

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

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 Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

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

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

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		171254.	110731.	60523.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				60523.

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	546667.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	553880.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-7213.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2232.
9	Total adjustments (net). Add lines 4-8	9	-2232.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-9445.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIV Supplemental Information

Complete this part to 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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

ADJ ACCUMULATED DEPRECIATION TO MATCH 990: -2232.

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

Name of the organization	NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC	Employer identification number 39-1978220
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FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S ACCOUNTANT
 PREPARED THE FORM 990. THE FORM WAS REVIEWED BY THE BOARD AT THE NEXT
 SCHEDULED BOARD MEETING. THE BOARD APPROVED THE FORM 990 BEFORE IT WAS
 FILED.

FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS CAN BE
 OBTAINED FROM THE ORGANIZATION'S OFFICE UPON REQUEST.

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
103	SUZUKI DIRT BIKE							
	041603	SL	5.00	17	4000.		4000.	0.
2	ADVENTURE TRAIL CART							
	040104	SL	5.00	17	638.		575.	63.
3	MIRAGE TRAILER REGIONAL							
	062006	SL	5.00	17	8320.		4160.	1664.
4	RAM 3500 DODGE							
	103006	SL	5.00	17	36586.		18293.	7317.
5	GOOSENECK TRAILER							
	070507	SL	5.00	17	39260.		11778.	7852.
6	SIGNANGE - TRUCK & TRAILER							
	080807	SL	5.00	17	2600.		728.	520.
7	00 HONDA RECONS							
	040101	SL	5.00	17	2230.		2230.	0.
8	MIRAGE CARGO TRAILER							
	060908	SL	5.00	17	9000.		900.	1800.
	* 990 PAGE 10 TOTAL -							
					102634.	0.	42664.	19216.
9	MONTANA OFFICE							
	010107	SL	20.00	17	1200.		90.	60.
10	INS OVERHEAD DOOR - WARE							
	012308	SL	20.00	17	1622.		41.	81.
11	CONSTRUCT FOR OVRHD DR							
	040108	SL	20.00	17	2350.		59.	118.
	* 990 PAGE 10 TOTAL -							
					5172.	0.	190.	259.
12	GATERFOAM POSTERS							
	010104	SL	5.00	17	780.		702.	78.
13	DISPLAY CASES 2'							
	010104	SL	5.00	17	670.		603.	67.
14	BANNER STANDS							
	071405	SL	5.00	17	4056.		2839.	811.
15	DHP DESKTOP PC							
	050205	SL	5.00	17	1628.		1140.	326.
16	DESK SET (RUSS)							
	063000	SL	10.00	17	1227.		1074.	123.
17	HP PAVILION PC							
	010104	SL	5.00	17	1199.		1199.	0.
18	HP PENTIUM PC							
	100505	SL	5.00	17	1400.		980.	280.
19	SAVIN COPIER 4018D							
	082205	SL	5.00	17	3725.		4470.	0.
20	TREADMILL NORDIC TRACK							
	121302	SL	5.00	17	875.		875.	0.
21	HP PC 782CD - HEIDI							
	120702	SL	5.00	17	1584.		1584.	0.
22	ATX-IC8000 SERVER							
	111505	SL	5.00	17	894.		748.	146.
23	AUDIO VISUAL CABINET							
	053000	SL	10.00	17	827.		724.	83.
24	CONFERENCE CHAIRS							
	053000	SL	10.00	17	1944.		1700.	194.
25	CONFERENCE TABLE							
	061200	SL	10.00	17	551.		482.	55.

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
26	DESK SET (ANN'S)							
	063000	SL	10.00	17	2000.		1750.	200.
27	(D)HP PAVILION PCA 25C							
	111503	SL	5.00	17	1298.		1201.	0.
28	LATERAL STORAGE (18')							
	030100	SL	10.00	17	2080.		1820.	208.
29	LATERAL STORAGE CABINET							
	053000	SL	10.00	17	1144.		1000.	114.
30	PROJECTOR SCREEN 8 SQ							
	022704	SL	5.00	17	570.		513.	57.
31	TREADMILL NTTL 321							
	091502	SL	5.00	17	709.		709.	0.
32	UNBIND (BINDER)							
	110901	SL	5.00	17	893.		759.	0.
33	SOUND EQUIP MICROPHONE							
	030304	SL	5.00	17	563.		508.	55.
34	HP PC 782CDB							
	120702	SL	5.00	17	1584.		1346.	0.
35	LAPTOP TOSHIBA							
	092706	SL	5.00	17	1249.		625.	250.
36	NEW BOOTH PARTS							
	111607	SL	5.00	17	2072.		621.	414.
37	SERVER							
	011007	SL	5.00	17	4905.		1471.	981.
38	(D)HP DV9700 LAPTOP - STEVE							
	022708	SL	5.00	17	1853.		185.	185.
39	HP TX 2120 LAPTOP - KAREN							
	050708	SL	5.00	17	1233.		123.	247.
40	HP DV6917 LAPTOP - RUSS							
	071308	SL	5.00	17	747.		75.	149.
41	SONY HDR-SR12 CAMERA							
	111108	SL	5.00	17	1922.		192.	384.
42	HP DV5 LAPTOP - JACK							
	102308	SL	5.00	17	899.		90.	180.
43	NEC SV8100 TELEPHONE							
	090808	SL	5.00	17	3509.		351.	702.
48	(D)BW ACCOUNTING SOFTWARE							
	063000	SL	5.00	17	1000.		875.	0.
49	(D)BW ACCOUNTING SOFTWARE UPGRADE							
	071703	SL	5.00	17	834.		834.	0.
50	GREAT FALLS UPHOLSTERY							
	012109	SL	5.00	19B	1390.			139.
	* 990 PAGE 10 TOTAL -							
					53814.	0.	34168.	6428.
44	EVENT PLANNING SOFTWARE							
	071205	SL	5.00	17	5383.		3769.	1077.
45	SOFTWARE NEW DATABASE GART							
	040706	SL	5.00	17	2617.		1308.	523.
46	SOFTWARE DATABASE GARTNER							
	091906	SL	5.00	17	5494.		2747.	1099.
47	BW SOFTWARE							
	012207	SL	5.00	17	1125.		338.	225.
	* 990 PAGE 10 TOTAL -							
					14619.	0.	8162.	2924.

Depreciation and Amortization 990 (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

FORM 990 PAGE 10

39-1978220

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 columns: Line number, Description, Amount, and sub-headers (a) Description of property, (b) Cost, (c) Elected cost. Includes lines 1-13.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 14-16.

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

Section A

Table with 3 columns: Line number, Description, and Amount. Includes lines 17-18.

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes lines 19a-i.

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Line number, Description, (b) Month and year placed in service, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes lines 20a-c.

Part IV Summary (See instructions.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 21-23.

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Form 4562 (2009)

39-1978220 Page 2

Part V Listed Property (include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No										
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year:					
43 Amortization of costs that began before your 2009 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Short Form Return of Organization Exempt From Income Tax

2008

Form 990-EZ

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form. The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC. D Employer identification number: 39-1978220. E Telephone number: 406-454-9190. F Group Exemption Number.

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting method: Cash, Accrual. H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: WWW.NOHVCC.ORG. J Organization type (check only one): 501(c)(3). K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. \$ 919422.

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

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 901338. Expenses total: 912314. Net Assets total: 126205.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

Table with 27 rows for Balance Sheets. Columns: (A) Beginning of year, (B) End of year. Total assets: 157224. Total liabilities: 31019. Net assets: 126205.

**NATIONAL OFF-HIGHWAY VEHICLE
CONSERVATION COUNCIL, INC**

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a 0.		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a N/A		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 0. ; section 4912 0. ; section 4955 0.		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter amount of tax on line 40c reimbursed by the organization 0.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. NONE		
42a	The books are in care of MONA EHNES Telephone no. 406-454-9190 Located at 213 4TH ST SW, GREAT FALLS, MT ZIP + 4 59404		
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)?		X
	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		X
	If "Yes," enter the name of the foreign country: _____		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here [] and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

NATIONAL OFF-HIGHWAY VEHICLE CONSERVATION COUNCIL, INC

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 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
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization(s) a section 527 organization?
50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances. Content: NONE

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation. Content: NONE

Total number of other independent contractors each receiving over \$100,000

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

Paid Preparer's Use Only Preparer's signature: [Signature], Date, Check if self-employed, Preparer's Identifying Number (See instr.), Firm's name (or yours if self-employed): DOUGLAS WILSON & COMPANY, P.C., 1000 FIRST AVENUE SOUTH, GREAT FALLS, MT 59401, EIN, Phone no.: 406-761-4645

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) **14** %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f **15** %

16a 33 1/3% support test - 2008. 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 ▶

b 33 1/3% support test - 2007. 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 ▶

17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

NATIONAL OFF-HIGHWAY VEHICLE

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4243.	6994.	4831.	3765.	3725.	23558.
2 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	694622.	802224.	875014.	889786.	883215.	4144861.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5	698865.	809218.	879845.	893551.	886940.	4168419.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						4168419.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	698865.	809218.	879845.	893551.	886940.	4168419.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	379.	2256.	4697.	8559.	1517.	17408.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	379.	2256.	4697.	8559.	1517.	17408.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						4185827.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	99.58 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99.70 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	.42 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	.30 %

19a 33 1/3% support tests - 2008. 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 - 2007. 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 ▶

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
DESCRIPTION		AMOUNT	
CONFERENCES & EVENTS		266771.	
DEPRECIATION		28672.	
INTERNET		3751.	
TELEPHONE		16886.	
INSURANCE		7162.	
DUES		1898.	
BANK CHARGES AND FEES		2415.	
FILING FEE		50.	
VEHICLE MAINTENANCE & EXPENSE		12935.	
ADVENTURE TRAIL EXPENSE		17139.	
TECHNOLOGY PROJECT		23368.	
MARKETING		4575.	
TRAVEL		1138.	
COMPUTER		3551.	
OTHER		2555.	
TOTAL TO FORM 990-EZ, LINE 16		392866.	

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS RECEIVABLE	21725.	3991.	
INVENTORY	7549.	25648.	
PREPAID EXPENSES	10062.	4281.	
UNEMPLOYMENT FUND	5924.	5924.	
OTHER DEPRECIABLE ASSETS	105037.	91897.	
TOTAL TO FORM 990-EZ, LINE 24	150297.	131741.	

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS PAYABLE	30410.	3047.	
OTHER LIABILITIES	29808.	27972.	
TOTAL TO FORM 990-EZ, LINE 26	60218.	31019.	

FORM 990-EZ GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 4

DESCRIPTION	DATE		METHOD ACQUIRED	NET GAIN OR (LOSS)	
	ACQUIRED	SOLD		DEPREC	OR (LOSS)
			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	44798.	0.	37198.	-7600.
TO FORM 990-EZ, LINE 5		44798.	0.	37198.	-7600.

FORM 990-EZ

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 7A

STATEMENT 5

INCOME

1. GROSS RECEIPTS	30965	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		30965
4. COST OF GOODS SOLD (LINE 13)	10484	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		20481

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	7549	
7. MERCHANDISE PURCHASED	28583	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		36132
12. INVENTORY AT END OF YEAR	25648	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		10484

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 6

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

EDUCATION REGARDING THE SAFE USE OF OFF-HIGHWAY VEHICLES