See a Social Security Number? Say Something!
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### Short Form

**Return of Organization Exempt From Income Tax**

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

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

#### A For the 2001 calendar year, or tax year beginning .2001, and ending .20, (insert number)

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

- **C** Name of organization
  - UPPER WEST SIDE RECYCLING CENTER
  - INC.

- **D** Employer identification number
  - 13-3116064

- **E** Telephone number
  - (212) 865.4595

- **F** Enter 4-digit (GEN)

#### G Accounting method
- □ Cash □ Accrual
  - Other (specify) □

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

#### I Web site □

#### J Organization type (check only one)
- □ 501(c) (3) ( )
  - (insert no.) □ 4947(a)(1) or □ 527

#### K Check □ if the organization’s gross receipts are normally not more than $250,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return

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

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Contributions, gifts, grants, and similar amounts received</td>
</tr>
<tr>
<td>2</td>
<td>Program service revenue including government fees and contracts</td>
</tr>
<tr>
<td>3</td>
<td>Membership dues and assessments</td>
</tr>
<tr>
<td>4</td>
<td>Investment income</td>
</tr>
<tr>
<td>5a</td>
<td>Gross amount from sale of assets other than inventory</td>
</tr>
<tr>
<td>5b</td>
<td>Less cost or other basis and sales expenses</td>
</tr>
<tr>
<td>5c</td>
<td>Gain or (loss) from sale of assets other than inventory</td>
</tr>
<tr>
<td>6a</td>
<td>Special events and activities (attach schedule) Street Four</td>
</tr>
<tr>
<td>6b</td>
<td>Gross revenue (not including $ 3831.67 of contributions reported on line 1)</td>
</tr>
<tr>
<td>6c</td>
<td>Less direct expenses other than fundraising expenses</td>
</tr>
<tr>
<td>7a</td>
<td>Net income or (loss) from special events and activities</td>
</tr>
<tr>
<td>7b</td>
<td>Gross sales of inventory, less returns and allowances</td>
</tr>
<tr>
<td>7c</td>
<td>Less cost of goods sold</td>
</tr>
<tr>
<td>8</td>
<td>Gross profit or (loss) from sales of inventory</td>
</tr>
<tr>
<td>9</td>
<td>Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)</td>
</tr>
</tbody>
</table>

#### Expenses

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Grants and similar amounts paid (attach schedule)</td>
</tr>
<tr>
<td>11</td>
<td>Benefits paid to or for members</td>
</tr>
<tr>
<td>12</td>
<td>Salaries, other compensation and employee benefits</td>
</tr>
<tr>
<td>13</td>
<td>Professional fees and other payments to independent contractors</td>
</tr>
<tr>
<td>14</td>
<td>Occupancy, rent, utilities, and maintenance</td>
</tr>
<tr>
<td>15</td>
<td>Printing, publications, postage, and shipping</td>
</tr>
<tr>
<td>16</td>
<td>Other expenses (describe) Transportation, supplies</td>
</tr>
<tr>
<td>17</td>
<td>Total expenses (add lines 10 through 16)</td>
</tr>
<tr>
<td>18</td>
<td>Excess or (deficit) for the year (line 9 less line 17)</td>
</tr>
<tr>
<td>19</td>
<td>Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year’s return)</td>
</tr>
<tr>
<td>20</td>
<td>Other changes in net assets or fund balances (attach explanation)</td>
</tr>
<tr>
<td>21</td>
<td>Total assets</td>
</tr>
<tr>
<td>22</td>
<td>Total liabilities (describe)</td>
</tr>
<tr>
<td>23</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the separate instructions

Cat No 108421 Form 990-EZ (2001)
Part III Statement of Program Service Accomplishments (See Specific Instructions on page 40)

What is the organization's primary exempt purpose? Recycling, education, outreach

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28. UWSEC started working with an organization that refurbishes and sells computers for use in schools. The new profit organization will use the proceeds to support their mission.

29. Program: Assisted in setting up office in a new location for a new nonprofit organization.

30. (Grants $)

31. Other program services (attach schedule)

32. Total program service expenses (add lines 28a through 31a)

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Specific Instructions on page 40)

(A) Name and address

JEFFREY M. TWEEN
35 Riverside Dr., New York, NY 10025

WENDY PASTER
404 South St., New York, NY 10017

SCOTT TWEEN
71 Riverside Dr., New York, NY 10025

(B) Title and average hours per week devoted to organization

PRESIDENT

VICE PRESIDENT

TREASURER

(C) Compensation

100/week

(D) Contributions to employee benefit plans & deferred compensation

(E) Expense account and other allowances

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

33. Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

34. Were there any changes made to the governing documents that were not reported to the IRS? If "Yes," attach a copy of the changes.

35. If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining why not reporting the income on Form 990-T.

a. Did the organization have unrelated business gross income of $1,000 or more of $603(e) notice, reporting, and proxy tax requirements?

b. If "Yes," has it filed a tax return on Form 990-T for this year?

36. Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.

37a. Enter amount of political expenditures, direct or indirect, as described in the instructions.

37b. Did the organization file Form 1120-POL for this year?

38a. Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR are any such loans made in a prior year and still unpaid at the start of the period covered by this return?

38b. Did the organization file Form 1120-POL for this year?

39. 501(c)(3) organizations Enter a dollar amount of capital contributions included on line 9.

40a. 501(c)(3) organizations Enter the amount of tax imposed on the organization under section 4911, section 4912, section 4914, section 4955.

40b. 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess business transaction during the year? If "Yes," attach an explanation.

41. List the states with which a copy of this return is filed.

42. The books are in care of.

43. Section 4947(a)(1) nonprofits charitable trusts filing Form 990-EZ in lieu of Form 1041—Check 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

MARIE SCOTT TWEEN, TREASURER

Type of print name and title

Paid Preparer's Use Only

Preparer's signature

Date

Check if self-employed

Preparer's SSN or ITIN (See Gen. Instr. W)

EIN

Phone no.

Form 990-EZ (2001)