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POSSIBLE DUPLICATE

Form **990**

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)

OMB No 1545-0047

2004

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning 06/01/2004, and ending 05/31/2005

B Check if applicable

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions	C Name of organization INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS LOCAL #1339		D Employer identification number 06-6069176
	Number and street (or P O box if mail is not delivered to street address) 30 WEST MAIN STREET		Room/suite
	City or town WATERBURY	State or county CT	ZIP + 4 06702
			F Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Website: ► **WWW.WATERBURYFIRE.ORG**

J Organization type (check only one) ► **501(c) (5)** ◀ (insert no) **4947(a)(1) or** **527**

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► **310,375**

H and I are not applicable to section 527 organizations	
H(a)	Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
H(b)	If "Yes," enter number of affiliates ►
H(c)	Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list. See instructions.)
H(d)	Is this a separate return filed by an organization covered by a group ruling? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
I	Group Exemption Number ► 0610
M	Check ► <input type="checkbox"/> If the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions)

1	Contributions, gifts, grants, and similar amounts received	1a	2,715
a	Direct public support	1b	
b	Indirect public support	1c	
c	Government contributions (grants)		
d	Total (add lines 1a through 1c) (cash \$ noncash \$)	1d	2,715
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	0
3	Membership dues and assessments	3	258,158
4	Interest on savings and temporary investments	4	3,507
5	Dividends and interest from securities	5	0
6 a	Gross rents	6a	
b	Less rental expenses	6b	
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	0
7	Other investment income (loss)	7	0
8 a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
b	Less cost or other basis and sales expenses	8a	0
c	Gain or (loss) (attach schedule)	8b	0
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	0
9	Special events and activities (attach schedule) If any amount is from gaming, check here ► <input type="checkbox"/>	8d	
a	Gross revenue (not including \$ 2,715 of contributions reported on line 1a)	9a	45,995
b	Less direct expenses other than fundraising expenses	9b	0
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	45,995
10 a	Gross sales of inventory, less returns and allowances	10a	
b	Less cost of goods sold	10b	
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	0
11	Other revenue (from Part VII, line 103)	11	0
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	310,375
13	Program services (from line 44, column (B))	13	130,311
14	Management and general (from line 44, column (C))	14	98,192
15	Fundraising (from line 44, column (D))	15	17,142
16	Payments to affiliates (attach schedule)	16	67,304
17	Total expenses (add lines 16 and 44, column (A))	17	312,949
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-2,574
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	319,599
20	Other changes in net assets or fund balances (attach explanation)	20	0
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	317,025

Part II Statement of Functional Expenses		All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions)			
<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0)	22	0	0	
23	Specific assistance to individuals (attach schedule)	23	2,000	2,000	
24	Benefits paid to or for members (attach schedule)	24	0		
25	Compensation of officers, directors, etc	25	24,500	24,500	
26	Other salaries and wages	26	0		
27	Pension plan contributions	27	0		
28	Other employee benefits	28	0		
29	Payroll taxes	29	2,679	2,679	
30	Professional fundraising fees	30	17,142		17,142
31	Accounting fees	31	2,500	2,500	
32	Legal fees	32	57,843	57,843	
33	Supplies & OFFICE EXPENSE	33	5,249	5,249	
34	Telephone	34	7,017	7,017	
35	Postage and shipping	35	0		
36	Occupancy	36	7,333	7,333	
37	Equipment rental and maintenance	37	3,666	3,666	
38	Printing and publications	38	0		
39	Travel	39	18,252	18,252	
40	Conferences, conventions, and meetings	40	21,605	21,605	
41	Interest	41	4,734	4,734	
42	Depreciation, depletion, etc (attach schedule)	42	7,125	7,125	
43	Other expenses not covered above (itemize) a	43a	0		
b	PAYMENT TO MDA	43b	33,100	33,100	
c	SEE STATEMENT 3	43c	30,900	15,763	15,137
d		43d	0		
e		43e	0		
f		43f	0		
44	Total functional expenses (add lines 22 through 43). <i>Organizations completing columns (B)-(D), carry these totals to lines 13—15</i>	44	245,645	130,311	98,192 17,142

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

► Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 0, (ii) the amount allocated to Program services \$, (iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See page 25 of the instructions)

What is the organization's primary exempt purpose? ► LABOR ASSOCIATION

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

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

a	STATEMENT 7	
b		(Grants and allocations \$) 117,613
c		(Grants and allocations \$)
d		(Grants and allocations \$)
e	Other program services (attach schedule)	(Grants and allocations \$) 12,698
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	► 130,311

Part IV Balance Sheets (See page 25 of the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year	(B) End of year	
Assets	45 Cash—non-interest-bearing	4,414	45	4,399
	46 Savings and temporary cash investments	293,912	46	282,841
	47 a Accounts receivable	47a 0		
	b Less allowance for doubtful accounts	47b 0	0 47c	0
	48 a Pledges receivable	48a 0		
	b Less allowance for doubtful accounts	48b 0	0 48c	0
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		0 50	0
	51 a Other notes and loans receivable (attach schedule)	51a 800		
	b Less allowance for doubtful accounts	51b 0	800 51c	800
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments—securities (attach schedule)	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0 54	0
	55 a Investments—land, buildings, and equipment basis	55a 0		
	b Less accumulated depreciation (attach schedule)	55b 0	0 55c	0
	56 Investments—other (attach schedule)		0 56	0
	57 a Land, buildings, and equipment basis	57a 291,616		
	b Less accumulated depreciation (attach schedule)	57b 18,520	85,485 57c	273,096
	58 Other assets (describe ► _____)		0 58	0
	59 Total assets (add lines 45 through 58) (must equal line 74)		384,611 59	561,136
Liabilities	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		0 63	0
	64 a Tax-exempt bond liabilities (attach schedule)		0 64a	0
	b Mortgages and other notes payable (attach schedule)		65,012 64b	244,062
	65 Other liabilities (describe ► _____)		0 65	0
	66 Total liabilities (add lines 60 through 65)		65,012 66	244,062
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	319,599	67	317,074
Net Assets or Fund Balances	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	319,599	73	317,074
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	384,611	74	561,136

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions)		Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return	
a Total revenue, gains, and other support per audited financial statements	► a 310,375	a Total expenses and losses per audited financial statements	► a 312,949
b Amounts included on line a but not on line 12, Form 990		b Amounts included on line a but not on line 17, Form 990	
(1) Net unrealized gains on investments	\$ _____	(1) Donated services and use of facilities	\$ _____
(2) Donated services and use of facilities	\$ _____	(2) Prior year adjustments reported on line 20, Form 990	\$ _____
(3) Recoveries of prior year grants	\$ _____	(3) Losses reported on line 20, Form 990	\$ _____
(4) Other (specify)	\$ _____	(4) Other (specify)	\$ _____
	\$ _____		\$ _____
Add amounts on lines (1) through (4)	► b 0	Add amounts on lines (1) through (4)	► b 0
c Line a minus line b	► c 310,375	c Line a minus line b	► c 312,949
d Amounts included on line 12, Form 990 but not on line a:		d Amounts included on line 17, Form 990 but not on line a:	
(1) Investment expenses not included on line 6b, Form 990	\$ _____	(1) Investment expenses not included on line 6b, Form 990	\$ _____
(2) Other (specify)	\$ _____	(2) Other (specify)	\$ _____
	\$ _____		\$ _____
Add amounts on lines (1) and (2)	► d 0	Add amounts on lines (1) and (2)	► d 0
e Total revenue per line 12, Form 990 (line c plus line d)	► e 310,375	e Total expenses per line 17, Form 990 (line c plus line d)	► e 312,949

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name SEE STATEMENT Str _____ City ST ZIP _____	Title Hr/WK	0	0	0
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			
Name Str _____ City ST ZIP _____	Title Hr/WK			

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ► Yes No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization ► and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct and indirect political expenditures See line 81 instructions	81a	
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	X
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85g	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____; section 4955 ► _____	89b	X
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		
90 a	List the states with which a copy of this return is filed ► _____	90b	4
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions)	90b	4
91	The books are in care of ► Name JAMES SANTA LUCIA Telephone no ► (203) 574-5668 Located at ► 30 WEST MAIN STREET, WA1 City ST ZIP + 4 ► 06702		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					258,158
95 Interest on savings and temporary cash investments			14	3,507	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			1	45,995	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		49,502	258,158
105 Total (add line 104, columns (B), (D), and (E))					► 307,660

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
94	SEE STATEMENT 8

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please 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 ► <i>Patrick Crimmins</i> Date 12/22/2011			
Type or print name and title ► <i>Patrick Crimmins</i> PATRICK CRIMMINS vice president				

Paid Preparer's Use Only	Preparer's signature ► <i>John J. Mulhall, CPA</i>	Date 12/22/2011	Check if self- employed ► <input checked="" type="checkbox"/> P01477389	Preparer's SSN or PTIN (See Gen. Inst. W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► JOHN J. MULHALL, CPA P O BOX 9454, NEW HAVEN, CT 06534		EIN ► 06-1295165	Phone no ► (203) 729-6233

Statement 1

Waterbury Fire Fighters Local #1339
06-6069176
Year Ended May 31, 2005

Part I, Line 16 - Payments to Affiliates

International Association of Fire Fighters 1750 New York Avenue, NW Washington, DC 2006	28,915
Connecticut AFL-CIO 56 Town Line Road Rocky Hill, CT 06067	6,182
Uniformed Fire Fighters Association of Connecticut 30 Sherman Street West Hartford, CT 06110-1915	<u>32,207</u>
	<u><u>67,304</u></u>

Purpose of Payments:

*The above payments represent membership dues paid to national
and state affiliates, respectively.*

Statement 2

Waterbury Fire Fighters Local #1339
06-6069176
Year Ended May 31, 2005

Part II, Line 22 - Grants & Allocations

Taylor Stankus	500
Paul Elmendorf, Jr.	500
Dora Sambuco	500
Kyrie Spellman	500
	<hr/>
	<u>2,000</u>

Note: The above amounts represent scholarships paid to children of members of Local #1339.

Statement 3

Waterbury Fire Fighters Local #1339
06-6069176
Year Ended May 31, 2005

Part II, Line 43c - Other Expenses

	<u>Total</u>	<u>Program</u>	<u>Management</u>
Advertising	3,342	3,342	
Contributions & Goodwill	3,065	3,065	
Insurance	4,840		4,840
Dues	784	784	
Public Relations	675	675	
Awards	800	800	
Monument	5,797	5,797	
Committee Expenses	1,300	1,300	
Heat	3,053		3,053
Property Tax	7,244	0	7,244
	<hr/>	<hr/>	<hr/>
	30,900	15,763	15,137

Statement 9

Waterbury Fire Fighters Local #1339

06-6069176

Year Ended May 31, 2005

Part IV, Line 64B - Notes Payable

	<u>05/31/04</u>	<u>05/31/05</u>
Due To Waterbury Fire Fighters Credit Union	65,012	244,108
<hr/>	<hr/>	<hr/>
Total Notes Payable	<u>65,012</u>	<u>244,108</u>

Statement 5

Waterbury Fire Fighters Local #1339
06-6069176
Year Ended May 31, 2005

Part V - Officer, Directors & Trustees

<u>Officer</u>	<u>Title</u>	<u>Salary</u>
Daniel French	President	8,000
Francis Walsh	VP	6,000
Albert Valeriotti	Secretary	6,000
James Santa Lucia	Treasurer	4,500
		<hr/> <u>24,500</u>

Statement 6

Waterbury Fire Fighters Local #1339

06-6069176

Year Ended May 31, 2005

Part I - Line 9 Special Fundraising Events

	(A)	(B)	Total
GROSS RECEIPTS - Cash Collected	33,100	12,895	45,995
EXPENSES - Payment to MDA	<u>(33,100)</u>	0	<u>(33,100)</u>
NET INCOME (LOSS)	<u>0</u>	<u>12,895</u>	<u>12,895</u>

(A) The fire fighters donate their time to collect contributions for the Muscular Dystrophy Association (MDA). Cash is collected and is then forwarded directly to MDA.

(B) The Association contracted with a professional fund raising group to produce a program booklet for the awards ceremony banquet. The professional fundraisers deducted their fee of \$12,409 and remitted the balance of \$7,581 to Local #1339.

Statement 7

Waterbury Fire Fighters Local #1339

06-6069176

Year Ended May 31, 2005

Part III - Statement of Program Service Accomplishments

a. **Scholarships - \$2,000**

The Union provided scholarships of \$500 to 4 children of Union members.

b. **Conferences & Conventions - \$21,605**

Members attended national and state conferences and seminars for purposes of expanding knowledge related to job issues.

c. **Contributions & Goodwill - \$3,065**

The Union provided contributions to civic and social organizations in the Greater Waterbury area.

d. **MDA - \$33,100**

Participated in the "Fill The Boot" campaign and collected funds for the Muscular Dystrophy Association.

e. **Legal Fees - \$57,843**

The Union represented its members in a lawsuit against the members' employer, the City of Waterbury, concerning unfair labor practices.

Statement 8

Waterbury Fire Fighters Local #1339
06-6069176
Year Ended May 31, 2005

Part VII Relationship of Activities To The Accomplishment of Exempt Purposes

94 Membership Dues Dues Collected To Provide The Financial Support
To File Grievances on Behalf of The Membership, Negotiate
Labor Contract With The Memberships' Employer, Organize
New Members, Promote Safety In The Workplace, and
Maintain Affiliation in State, Local and National Labor Organizations.