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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

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)

0804

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $100,000 and total assets less than $250,000 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

OMB No 1545-1150

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 5/01/07 , and ending 4/30/08

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization Inte
Anderson FireFighters Local 1262, AFL-CIO, Inc.

Number and street (or P O box, if mail is not delivered to street address) P. O. Box 1098

Room/suite

City or town, state or country, and ZIP + 4 Anderson IN 46015-1098

D Employer identification number 35-6053678

E Telephone number 765-648-6606

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 Other (specify) ▶

Website: ▶

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

I Organization type (check only one)— ☒ 501(c) (05) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A return is not required, but if the organization chooses to file a return, be sure to file 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 ▶ $ 70,373

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments See Statement 1		3	60,130
	4	Investment income		4	1,627
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory Subtract line 5b from line 5a (attach schedule)		5c	
	6	Special events and activities (attach schedule) If any amount is from **gaming**, check here ▶ ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a		
	b	Less direct expenses other than fundraising expenses	6b		
	c	Net income or (loss) from special events and activities Subtract line 6b from line 6a		6c	
	7a	Gross sales of inventory, less returns and allowances	7a 8,614		
	b	Less cost of goods sold	7b 8,279		
	c	Gross profit or (loss) from sales of inventory Subtract line 7b from line 7a		7c	335
	8	Other revenue (describe ▶ See Statement 2)		8	2
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	62,094
Expenses	10	Grants and similar amounts paid (attach schedule)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	11,877
	13	Professional fees and other payments to independent contractors		13	400
	14	Occupancy, rent, utilities, and maintenance		14	593
	15	Printing, publications, postage, and shipping		15	604
	16	Other expenses (describe ▶ See Statement 3)		16	30,174
	17	**Total expenses.** Add lines 10 through 16 ▶		17	43,648
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 9		18	18,446
	19	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)		19	37,741
	20	Other changes in net assets or fund balances (attach explanation)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	56,187

Part II Balance Sheets—If Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ

(See page 60 of the instructions)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	37,894	22	56,329
23	Land and buildings		23	
24	Other assets (describe ▶)		24	
25	**Total assets**	37,894	25	56,329
26	**Total liabilities** (describe ▶ See Statement 4)	153	26	142
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	37,741	27	56,187

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2007)

JAA

Part III Statement of Program Service Accomplishments (See page 60 of the instructions.)

What is the organization's primary exempt purpose?

See Statement 5

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

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 28a

29

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 29a

30

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 30a

31 Other program services (attach schedule) See Statement 6

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 31a

32 **Total program service expenses.** Add lines 28a through 31a ▶ 32 0

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See page 61 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
See Statement 7				

Part V Other Information (Note the statement requirement in General Instruction V.)

			Yes	No
33	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	33		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	34		X
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 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 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		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?	38a		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b			
39	501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			

Part V Other Information (Note the statement requirement in General Instruction V.) (Continued)

		Yes	No
40a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____ , section 4912 ▶ _____ , section 4955 ▶ _____		
b	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," attach an explanation	40b	
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e	X

41 List the states with which a copy of this return is filed ▶ None

42a The books are in care of ▶ Jaime Hensley Telephone no ▶ 765-648-6606

Located at ▶ 1031 Lancashire Lane Pendleton, IN ZIP + 4 ▶ 46064

		Yes	No
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)?	42b	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.**		
c	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c	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

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

X _____ Signature of officer — X 10-15-10 Date

Jaime Hensley Treasurer

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Donna J Powers CPA — Date 10-14-10 — Check if self-employed ▶ ☐ — Preparer's SSN or PTIN (See Gen Instr X) P00117486

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Couch & Company, CPA's, 2302 Meridian Street, Anderson, IN 46016 — EIN ▶ 35-2004721 — Phone no ▶ 765-642-1661

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	Amount
Members Dues Received	$ 59,108
Other Contributions Received	1,022
Total	$ 60,130

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
Sales Tax Collection Allowanc	$ 2
Total	$ 2

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
	$
Sale of Uniforms	
Bank Charges	240
Office Expense	9
Expenses	
New Equipment	104
Supplies	194
Travel-Lodging	1,662
Convention Expense	440
Advertising-Promotion	900
Bank Charges	25
Computer, Internet & Website	381
Dues-International Union	1,220
Entertainment-Meals	266
Flowers-Sympathy Gifts	112
Miscellaneous	50
Dues-PFFUI-Per Capita	6,206
Dues-IAFF-Per Capita	14,206
Rent-Building	2,400
Retirees Dinners & Gifts	1,141
Tax Penalties	25
Credit Card Machine & Fees	593
Total	$ 30,174

Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
Sales Tax Payable	$ 41	$ 30
Payroll Taxes Payable	112	112
Total	$ 153	$ 142

Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description
Our mission is to negotiate employment contracts and employment benefits for our members and to represent or provide representation for our members in employment disputes. We also exist to negotiate for safe working conditions.

Statement 6 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description
We negotiate employment contracts and employment issues for 125 members.

Statement 7 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Jerry R. Bilyeu 5074 Stonespring Way Anderson IN 46012-9717	2nd V. Pres.	10	1,680	0	0
Thomas J. Brantlinger 1261 Locust Street Middletown IN 47356	Treasurer	10	2,400	0	0
T. Matthew Cole 5150 North - 200 West Middletown IN 47356	President	10	2,640	0	0
Stephen Buck 4607 East - 150 North Anderson IN 46012-9736	Past Pres.	10	690	0	0
Jon L. Smith 3003 E 5th Street Anderson IN 46012	Secretary	10	1,400	0	0
James Stewart 2675 West - 600 South Anderson IN 46013-9402	Formr 1st VP	10	1,400	0	0
Brad Corbin 2708 W 11th Street Anderson IN 46011	1st V. Pres.	10	280	0	0