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SCANNED JAN 04 2010

Form	990	ENV

VELOPE Return of Organization Exempt From Income Tax DEC 0 & 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 2008

Depa .nter	ertment of nei Rever	the Treasury	PQ51W	KK UALEcrean zation may have to use a copy	of this return to satisfy s	tate reporting	g requiren on	ts	nego	to Public Inspection
	For the	e 2008 calend		or tax year beginning		nd ending			,	
В	Chook if	ראָפן כרש'י		C Name of organization				D Employe	r Identific	ation Number
	Add	ress carres	Picase use IRS label	FRATERNAL ORDER OF POLICE	CE GRAND CANY	ON LOD	GE #32	23 7	1661	91
	Nan	no chango	or print or type.	Number and street (or P O box if mails not	do vered to street oddr)	,Posm'su	te	E Totophon	פ חעד בפי	
	inst	al return	See specific	PO BOX 1310				(623	3) 93	7-3636
	_== Ten	minaton :	Instruc- tions.	C by, town or country	State 2	₫P coda + 4			·	
	;	ended return		PHOENIX	AZ	85001		G Cross re	cents &	320,371.
		olicaton pending	Finamez	and address of principal officer			K(a) is this a	group return		
	۰۰۰۰			• •	enix AZ	85001		officates includ		Yes No
	Tax-	exempt status		(c) (8) (nsart no.)	4947(a)(1) or	527	ត ខេត	ettach a i st. (s	ee instruct	t ons) — —
J		site: ▷ N/				•	Kich Group 6	יים בים באר אור יים בית הבאני	iter >	
ĸ		of organization	X Corpora	otion Trust Association Other	⊳ L Ye	ar of Formato			zte of lega	demicilo AZ
	ort I	Summa		Addit Trust Cassociation Outer	, =	5. C 1 0////2C	JN 150	7 111 0.	zic or rege	1 223
				anization's mission or most significant	activities: SEF	ATTA	CHED S	TATEME	NT	
_	' '	J 1011, 4500115	0 ti.0 0 gt	anication of macion of most orginioant	<u></u>	2			<u> </u>	
Activities & Governance	-		-							
Ë] -									
940	2	Check this bo:	x > []	if the organization discontinued its op-	erations or disposed	of more t	han 25%	of its asset	s	
Ŏ	3 1	Number of vot		pers of the governing body (Part VI, lin				1	3 1	
98				t voting members of the governing bod	iy (Part VI, line 1b)			1	4 1	
VIE K	!			rees (Part V, line 2a) .	• • •				5 0	
ţ	1			eers (estimate if necessary) .		• •		}	6 0	
•	1	•		usiness revenue from Part VIII, line 12 taxable income from Form 990-T, line		•	- •		7a 7b	0.
		ivet unrelated	DUSHIESS	taxable income from Form 550-1, fine	34		·		7.5	
		04-1-4		- (D) (III) I 15)			P	rior Year		Current Year
3	•		-	rs (Part VIII, I're 1h)	•	•	<u> </u>	257,0		97,646.
Revonuo	1	_		ie (Part VIII, line 2g) rt VII., column (A), lines 3, 4, and 7d)		•		12,8 65,2		100,760. 1,795.
ē	•		-	I, column (A), lines 5, 6d, 8c, 9c, 10c,	ard 1'e)		-		43.	-5,061.
				nes 8 through 11 (must equal Part VIII,		· · ·		334,3		195,140.
				unts paid (Part IX, co'umn (A), lines 1		<i>,</i>	 	331/3	0.	6,174.
	1			nembers (Part IX, column (A), line 4)		•		192,6		116,081.
	1			sation, employee benefits (Part IX, col			<u> </u>	132,0	0.	0.
69	I		-		u.i. (ry, nes 5-10)	,				
Expenses				g fees (Part IX, column (A), line 11e)	• •		ļ			
윩	b	Total fundrais	ing expen	ises (Part IX, column (D), line 25) ▷		0.			,	
_	17	Other expense	es (Part I)	X, column (A), lines 11a-11d, 11f-24f)		•		70,8		44,731.
	1			ies 13-17 (must equal Part IX, column	(A), line 25)		ļ	263,5		166,986.
		Revenue less	expenses	s. Subtract line 18 from line 12	<u></u>	<u> </u>		70,8	41.	28,154.
Not Assess or Fund Balonces							Begir	ning of Ye	ear	End of Year
800	20	Total assets (Part X, lin	e 16)			<u> </u>	421,0	54.	381,880.
\$ B	21	Total liabilities	(Part X.	line 26)		•	· 			5,000.
		Net assets or	fund balar	nces. Subtract line 21 from line 20.		. ,		421,0	54.	376,880.
Pa	art 18		re Bloc							
		Under penaltics	of perjury 1	declaration I have eram now to s roman military Declaration prepares (other transference) is booking	pocompany na sehopuns a	nd statement	s and to the	gost of my line	wicdgn er	rd be' of this
		the concat al	to escapisate	Despute of prepared (effect files effect) is asset	יבורש נס רכבו יהים ווו ויפיס פ	n presarer no	s any lumba c	1 53		
Sig	วูก	102	1551	TO CORRECTIVE	ED		_ `1	1/13/0	9	
Нe		S Juro	र्ज औं दश	THE SELV			Dat	te		
		TOM F	BREEN	(O) (A) (A)	nnn		TREAS	SURER		
			nt name and	tie. 7 4 2	009 <u>E</u>					
		1		-	· 47 5cm	to	C	ecit	Prepa	aren's identifying number
Pa		Preparers		· FRESHÓ	icari-		, co	rplayed >		171 110
Pro		s gnature	⊳ _{Ann}	e M. Stine	11	1/13/0	ľ		pic	1-16-4942
	rer's	F m's name (o		ha Omega Business Syst				ارا	4	
Us On		yours it so f- employed)		0 W Irma Lane			E	N - 14	5-0	671485
U II	A	addrars, and ZP + 4		ndale	AZ 85308	:			(623)	937-3636
Ma	the IR			ith the preparer shown above? (see in						X Yos No
				work Reduction Act Notice, see the se				TEEACICI	04/22/09	Form 990 (2005)
					,					

Form		RDER OF POLICE GRAND CANYON		23-71661	91	Page 2
Par	rt III Statement of Proc	ram Service Accomplishments	s (see instructions)			
1	Briefly describe the organization					
	SEE ATTACHED STATE	MENT			·	
					. 	
					 .	
						
2	Did the organization undertake a	any significant program services during t	he year which were not listed o	in the prior		
	Form 990 or 990-EZ?	-		- <u> </u>	Yes X	No
	If 'Yes,' describe these new serv					
3		lucting, or make significant changes in h	ow it conducts, any program se	ervices?	Yes X	No
	19 Mes I describe those changes					
4 3	and SUT(C)(4) organizations and	thievements for each of the organization is section 4-4 ((5)(1) trusts are required to each program service reported.				
42	a (Code) (Expende:	\$\$111,500. including gra	enteros S O	.) Tevenue S	91.4	
		dues gives members a le				, , , , , , , , , , , , , , , , , , ,
		vices to the approx 1,0				
		for more detail.			,400	
		for membership in Stat	e & Nat'l Lodge fo			
		titling #32 members to				
		stance with disciplinar	- <i></i>			
		icers memorials, and mo		20	.100	
		·				
41		\$ 23,315. mcluding gra		. i =-verae \$	- 10.01	<u>0.</u>)
		neetings and State & Nat:			13,31	<u>.</u> 0
		ce provided to approx 1,0			3866	
		ade_to_police_and_commu				361 <u>9</u>
		rs_killed or injured in		<u> </u>	!	805_
	4) Awards & sponso	rships of outstanding o	IIIcers			715
			- – – – – – – – – – – – – – – –		-	
						
				.nmennnes.		പധായ ജോ
			. ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
			· · · - · · · · · · · · - · ·			
å(c (Chife \ \(Fypenses	\$ 7,399. including co	ants of \$0	Tevenije \$		0.
		for Lodge Building to				
		s. The ofc supplies to			- -	
		ns Firm sets up intervi				
		in accurate information				
	reference t	o important police issu	es and critical			
	incidents			200)	
		ounting fees to track 1	naama C aunand			
	for Lodge p			2078		
		onal FOP Conference to	represent Lodge	864		
						
4,	d Other program services (Descri	pe in Schedole ())			-	
		1,329 including grants of \$) (Revenu	e \$)	
46		ıs ⊳ \$ 153,543. (Mu		ın (B))		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
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? If Yes complete Schedule C. Fan III	۲٦		
6	Dia the organization institution any owner advised funds or any accounts where denote have the right to provide advice on the distribution or investment or amounts in such thinds or accounts? If it res," complete Schedule D. Part I	5		Х
7	Did the organization receive or fixed a conservation ease nant, including easements to preserve open space, the environment, historic land areas or historic structures? If Mes," complete Schedule D. Part II.			_X
8	Did the ordalization maintain collections of works of art, historical treasures, or other similar assets? If Mes, complete Schedule Di Pert III	(2)		X
	Did the organization record an amount in Part X. Line 21 is serve as a custodian for announts not listed in Part X or provide creat counseling, dear management, credit repair or debt negotiation services. If thes complete screen $e E $ Part E	63		X
16	Did the organization and assects in term, permanent, or quasi-enanouments? if Yes, complete Scriedule C. Fart /	7.0		Х
77	Did the organization report an amount in Part x, lines 10, 12, 13, 15, or 257 if ives, complete Schedule D, Parts VI, 1, 1, VIII, 1, x, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
13	is the ofganization a school described in section 170(b), i) (Antily) of thes 'complete Schedule ${\mathbb Z}$	73		<u>X</u>
عَدُرُ	Bud the organization maintain an office, embloyees, or agents outside or the US 1	14a		_X
ķ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F. Part I.	ı٨b		<u>X</u>
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? If 'Yes,' complete Schedule F, Part II	15		х
15	Did the organization report on Pert IM, column (A), this 3, more than \$5,000 of aggregate grants or assistance to it sixuduals located outside the United States? If "Yes" complete Ochedule F. Part III	76		_X
	Did the organization report more than \$15 000 on Part IX, column (A) line 11e? If 'Yes' complete Schedule G Part I	17		<u>X</u>
	Did foe organization senort agget than \$15,000 foration Part Viro, lines it is a political if the specified decided de Part II.	18		<u>X</u>
	ີບາງ ກ່າງ ລະງາລອນຂອງດູດ renord ກາວເຂົ້າກອດ ຊື່ວ່າວີ ຄົດຕົ້ວ ການ ການ ກ່າວ ອີລາ ໄດ້ Yes,' complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospitals? If Yes complete Schedule H	20		<u>X</u>
<u>27</u>	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	<i>Z</i> ?		<u>X</u>
	Die the erganization report more than \$5,000 on Part IV, column (AN) line 1/1 if (Yeal complete Schodule I Parto) and ill	22		X
23	Did the organization enswer. Yes to Part VII. Secoun Aliquestions 3, 4, or 57 if Yes, complete. Schedule J.	23		X
7 4 a	t Cut the organization have a tax-exempt bond issue with an obstancing proof amount of none than \$155,555 as of the fast day of the year. The mai was issued after December 31,720727 of fres for swer questions 245-345 and complete Schedule and Two, go to question 25.	24a		X
•	Ele the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<u>/</u> áŋ		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to detease any tax-exempt behas?	24c		
ರ	Did the organization act as an ion behalf of issuer for bonds outstanding at any time during the year?	24d		
2 5 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disdualined derson during the year? If "γ'es" complete Schedule L. Part I	25a	_	
İ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or termer 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	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substant al contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L. Part III	27		X

Form 990 (2008)
Part IV Ch

			_ves	MO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
ē	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
i	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		<u>x</u>
Ċ	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) deing business with the organization? If 'Yes' complete Schedule L. Fart IV	28c		Х
29	Dig the organization receive more than \$25,000 in non-cash contributions? In these complete Schedule M	<u>29</u>		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	27		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? if 'Yes, complete Schedule P, Parts II, III, IV, and v, fine 1	34	Х	
35	is any related organization a controlled entity within the meaning of section 512(5)(13)? If 'Yes,' complete Schedule R, Part V, time 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Tes.' complete Schedule R. Part V. line 2	36		
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	37		X

BAA

³art V	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
lnt.	tter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. ormation Returns. Enter -0- if not applicable			
b En	iter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ĺ
c Did (ga	d the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming ambling) winnings to prize winners?	1c		Х
2a Ente	er the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the endar year ending with or within the year covered by this return.			
26 If a	at least one is reported on line 2a, did the organization file all required federal employment tay returns?	2b		
	ite. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this refund. (see in short ems)			
Sa Dir. the	of the organization risve unrelated business gross income of \$1,000 or more ouring the year covered by sireturn?	3a		Х
Pit.	Yes' has it filed a Form 990-T for this year? If 'No ' provide an explanation in Schedule O	3b		
4ិន A មែន	any trike fariny hie calonda lyber did the Liganization have an interest in, or a aignature or other authority by a janical account on a foreign country (such as a bank account securities account, or other financial account?	4a		х
	Yes,' enter the name of the foreign country: ►			
Se	e the instructions for exceptions and filing requirements for Form TD F 30-22.1. Peport of Foreign Bank and hand all 4 occurrs.			į
5a Wa	as the organization a party to a prohibited tax sholler transaction at any time during the tax year?	5a		Х
5 Did	diany taxable party netry the organization that it was ones a party to a prohibited tax shelter transaction? .	5b		Х
g # Fr;	Yes 1 to grest on 5a or 6b, dig the organization (se Point 8886-Y) Sist ips ire by Yay-Exempt Entity Regarding chibited Tax Shelter Transaction?	5 c		
6a Dia	1 the organization actical any contributions that were not tax deductible?	6a		Х
<u>р</u> п Се	res, bid the organization include with every solicitation an express statement that such contributions or gifts were not duotible?	6b		
7 Or	ganizations that may receive deductible contributions under section 170(c).			
a Dia	I the organization provide goods or services in exchange for any guid proique contribution of more than \$75?	7 a		Х
をは	Yes, the the organization notify the abnor of the value of the goods or solvices provided?	7b		<u> </u>
For	d the organization self exchange, or otherwise dispose of tangible personal property for which it was required to file into 5252?	7 c		х
d it	Yes 1 Indicate the number of Forms 9292 filed during the year 7d.			İ
	i the priganization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal helit contract?	7e		Х
i Dia	I the organization iduring the year, pay premiums, directly our directly, or a personal hadeful contract?	7 f		Х
g Fo	rialt contributions of qualified intellectual gruporty, did the creanization file Form 3399 as required?	7g		Х
hfo	rah commour ons of cars, boats, amplanes, and other verrolds, did the organization file a form 1098-C as required?	7h		Х
SU	ction 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) pporting organizations. Did the supporting organization or a fund maintained by a sponsoring organization, have uses the hole had did try to a thing the year?	8		
	ction 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	rithe organization hi ake any raxable distributions under section 49007	9a		l
	a die organization make arry alstribution to a donot, donor advisor, or related parson	9b		
	ction 501 (c);77 organizations. Enter			į
a n.:	tation fees and capital contributions included on Part VIII, line 12			İ
5 (5)	oss Receipts included on Form 950, Part Vill, line 12, for public use of club facilities. 100			l
11 Se	ction 501(c)(12) organizations. Enler			ł
	oss income from other memners or shareholders [11a]	į		l
	oss recome from other sources. Do not net amounts due or baid to other sources against [116]			ĺ
772 %	crima AMA Na VIII Ann Avenno, chao abie trusis, is the prosureano, ilitro boto year of act of room of 17	12a		í

bif 'yes enter the amount of tax-exempt interest received or accrued during the year

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Form **990** (2008)

Form 990 (2008) FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32

Page 6

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A.	Governing Body and Manageme	nt					
	For each	'Yes' response to lines 2-7b below, and fo s, or changes in Schedule O. See instruct	or a 'No' respons Ions	e to linas 8 or 9b below, d	escribe the circumstances,		Yes	Мо
7 a	Finer the	number of voung members of the govern	ing hoay		1a 13	1 1		
		number of voting members that are indep			1b 13	1		
2	Did any o	fficer, director, trustee, or key employee trector, trustee or key employee?	iave a family rela	ationship or a business rak	ationship with any other	2		х
3	Did the o	ganization delegate control over managers, directors or trustees, or key employees				3		х
4		ganization make any significant changes	_		'	4		X
_		prior Form 990 was filed?	to no organi sea	and become no				
5		ganization become aware during the year	of a material de	version of the organization	's assets?	5		х
6		organization have members or stockholds		, J		ñ	Х	
78	a Does the	organization have members, stockholders i body?	s, or other person	ns who may efect one or m	ore members of the	7a	х	
Ė	~	ectaions of the governing body subject to	approvat sv mer	mpers, stockholders, or off	ner persons?	7b	Х	
		gamzat on contemporationally discurse it						
=		ruma pody ^o				8a	х	
	•	nmittee with authority to act on behalf of it	ne aovemina pod	lv?		8b		Х
		organization have local chapters, branche				9a		Х
	f 'Yes,'	oes the organization have written policies thes to ensure their operations are consis	and procedures	governing the activities of	such chapters, affiliates,	9ь		
10	Was a co	by of the Ferm 990 provided to the organi in Schedule C the process, if any, the org	zation's govern.r	ra bedy hefore it was filed?	All organizations must	10		Х
17	ls there : Družilica	ny othoer, a rector or trusted, or key emp ion's mailing adaress? <i>If 'Yes,' provide th</i>	oyee listed in Pa a names and add	ert VII. Soction A, who can Gresses in Schedule O	net be reached at the	11		х
Sec	tion B.	Policies						
			•				Ves	660
172	r Doás má	organization have a written conflict of inte	ייפֿפֿן טֿטֿ,יכֿאַ יוָ אָ	io go to line 15		12a		X
£	ان حن اثار ان حن اثار	rs, directors or trustees, and key emptoys 57	es required to di	sotose annually interests t	taticoaldigueirse	12b		
•		organization raquiarly and consistantly mi O'low this is done	gnitar and antorc	a compliance with the pale	gy? It 'Yag' nacariba in	12c		
13	Does the	organization have a written whistleblower	policy [13		X
14	มิงอร the	OrganiZation nave & written ดองแก๊ษณ์ reta	รักสิงก์ อีกัน นิจิรินิโ	ičlion poncy.		7.4		X
35	Dig the parsons,	ncess for deformining compensation of the comparability data, and confemporaneous	o tollowing nors substantiation o	ons include a teviow and a of the deliberation and dec.	paraval by indopondent SiGN			
ó	The orga	nization's CEO, Executive Director, or top	management of	īcial?		15a		X
į	a Cater off	cers of key employees of the organization	-			15Ь		X
	Деѕсире	tne process in 3chenule O. (see instruction	insj					
162		ganization invest in contribute assets to, ing the year?	ចំរ	a joint venture or similar a	urangement with a taxable	16a		Х
t	iu lorut a	as the organization adonted a written poli- inture arrangements under applicable redd h respect to specifications arrangements				16b		
Sec	tion C.	Dischause						
17	List the s	ates with which a copy of this Form 990 is	s required to be t	wed ► <u>Arizona</u>	- 		<u> </u>	
10	inentylin	ndicate unit supur mater tea palable.	Chris all that a	nnlv	יאנו נעינה כ שתהיושבה ו עבש נ	41°4217N2 .	ഗ്ഗങ്	nic.
		website I Another's website		on request				
147	spajomen	in outbourn to making rains it are more in a available to the million		•				-1 ü 1
		namo nhysical addrass and tolonhono n			· · · · · · · · · · · · · · · · · · ·			7715
	<u> ANNE</u>	6130 W I	RMA LANE _	GLENDALE A	<u>z _ 85308 (6</u>	<u> </u>	 	1/15
RAA						Form	con a	LZUUZI

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

Section A	 186	P1 / 1 D/	- 13:	melman	Transf	tone	150	. F.	la		Later Line	 		 	 	• •	-	 	
Section w	 -711		3, D:	rectors,	, (143)	12.72	بالأوا	A r	" [FT] T	ووشات	, amain	 	:	 	 	l			

1a Complete this table for all persons required to be listed luse. Schedule 3-2 if additional space is needed The control of the c LE MER SERBEIGERE The state of the s - -. . ± 1. ± - ---- - - offices
and fusional fusion Fix nei High wit o impenisiated employ we idividi el frust**e**e Orther - -- -- -- -. -------- _- _ - = o uomento , ij luistosi organiamiono JOHN ORTOLANO <u>15.</u>00 0<u>.</u> President Х 0. 7,200. LYNN IDEUS 0. Vice President 10.00 Х 0. RON BUTTERS 10.00 2ND VICE PRESIDENT Х 0. 0. COE MITCHELL 10.00 0. Х 0. 0. Secretary TOM BREEN Х 0. Treasurer 10.00 0. 0. Bob Mitchell 0. Chaplain 5.00 Х 0. 0. SEE ATTACHED LIST 5.00 X Various 0. 0.

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Form 990 (2008)

Part VII Section A. Officers, Directors, Trust	ees, K	ey l	<u>Em</u>	plo	ye€	es, a	and	Highest Com	pensated Empl	oyees	(cont	<u>.)</u>
(A)	(B)			(0	:)			(D)	(E)		(F)	
Name and Title	Average hours per week			check Officer		Highest compensated employee		Reportable compensation from the organization (VI-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-W'SC)	arros com f org as	stimated unt of eth ipensatio rom the ganization id related anization	her An I
			"			ě						
											·	
1 b Total							Α	0.	7,200.	<u></u>		0.
2 Total number of individuals (including those in 1a) w	ho recei	vcd	moi	re th	an :	\$100	0,000	0 in reportable coi	mpensation from th	1C		
organization > 0											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste dividual	e, k	еу є	mpl	oye	e, or	r hig	hest compensated	d employee	3	,,,,	x
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual	ortable	com	pen 0? I	satı f 'Ye	on a	and o	othe lete	r compensation fr Schedule J for su	om ich	4		х
D.d any person listed on line 1a receive or accrue correndered to the organization? If 'Yes' complete Sch	mpensa edule I	ation	fro	m ai	iy u	nrel	ated	organization for	services	5		x
Section 2 Independent Contractors											<u></u>	
Complete this table for your five highest compensate compensation from the organization.	ra indep	end	ent	cont	ract	ors	inat	received more that	n \$100,000 of			
(A) Name and business addres	5							(B Description o	of Services	Comps	C) ensatio	<u> </u>
					_							
	· <u>-</u>											
2 Total number of independent contractors (including to compression from the organization > 0	hose in	1) w	ert.	rece	Nec	i mo	ne ti	han \$100,000 m				

Form \$30 (2008) FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32

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Page 8

L a:	rt 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
STS	1 a Federated campaigns 1 a				
NA N	b Membership dues 1b 97,626	.]			
A S	c Fundraising events . 1c 0	4	<u> </u>		}
동	d Related organizations	4			
S S	e Government grants (contributions) 1 e 0	-1			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 20	_			
A S	g Noncash contribns included in lns 1a-1f \$	97 646			
8 -	h Total. Add lines 1a-1f Business Code	97,646.	}		<u> </u>
PROGRAM SERVICE REVENUE	2a PUBLIC CHAR GOLF TRNY 900099	9,360.	9,360.	0.	0.
<u> </u>	b ALC MEMBERSHIP DUES 900099	91,400.	91,400.	0.	0.
<u> </u>	C South State of the state of t	32,3001	52,1001		
SE)	d				
AM.	e				
8	f All other program service revenue				
- 8	g Total. Add lines 2a-2f	<u> 100,760.</u>			
- 1	3 Investment income (including dividends, interest and	▶ 18 623		•	10 603
	other similar amounts)	<u>18,623.</u>	0.	0.	18,623.
	- Weerle from Westeren of the exempt born proceeds	<u> </u>			
	(i) Real (ii) Personal	-			
	6a Gross Renis	7	1		İ
	b Less: rental expenses				
	c Rental income or (loss)	7			
	d Net rental income or (loss)	A			<u> </u>
ŀ	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory 99,817.				!
	b Less: cost or other pasis				
	and sales expenses 116,645.	_			
l	c Gain or (loss)			_	_
	d Net gain or (loss)	<u>-16,828.</u>	-16,828.	0.	0.
OTHER REVENUE	8a Gross income from fundraising events (not including \$0.				
Ě	of contributions reported on line 1c)				
8	See Part IV, line 18 a 0	− 1			
Ę	b Less: direct expenses b 0			•	
	c Net income or (loss) from fundraising events	▶ 0.	0.	0.	0.
	9a Gross income from gaming activities See Part IV, line 19				
ı	b Less: direct expenses b 0	∸ }			
ı	c Net income or (loss) from gaming activities	<u>.</u> 0.	0.	0.	0.
	10a Gross sales of inventory, less returns	1			
i	and allowances a 3,525	.]			
	b Less: cost of goods sold b 8,586		i		
l	c Net income or (loss) from sales of inventory	► -5,061.	-5,061.	0.	0.
	Miscellaneous Revenue Business Code				
- 1	11a				
	b		<u> </u>		
	c	 	 		
- 1	d All other revenue		ļ-		
	e Total. Add lines 11a-11d .	D	{		
	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	► 195,140.	78,871.	0.	18,623.

Page 10

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 (S), (C), and (D).

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,369.	4,369.	•	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,805.	1,805.		
3	Grants and other assistance to governments, organizations, and individuals outside the	1,000.	170001		
	U.S See Part IV, lines 15 and 16	0.	0.		, , , , , , , , , , , , , , , , , , ,
4	Benefits paid to or for members	116,081.	116,081.		
5	Compensation of current officers, directors, trustees, and key employees	0.	0.		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	0.	0.	0.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.	0.	0.	0.
9	Other employee benefits	0.	0.	0.	0.
10	Payroll taxes	0.	0.	0.	0.
	Fees for services (non-employees)				
	Management .	0.	0.	0.	0.
	Legal .				
	Accounting	4,155.	2,078.	2,077.	
	Lobbying .	0.	0.	0.	0.
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees Other	0.	0.	0.	0.
	Advertising and promotion	2,000.	2,000.	0.	0.
13	Office expenses	5,047.	774.	4,273.	<u> </u>
14	Information technology	2,262.		2,262.	
15	Royalties	4,2021		2,2021	
16	Occupancy	1,684.	1,684.		
17	Travel	864.	864.	·	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0.	0.	0.
19	Conferences, conventions, and meetings	13,310.	13,310.		
20	Interest .				
	Payments to affiliates .				
	Depreciation, depletion, and amortization	1,020.		1,020.	
24	Insurance 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)				
	Taxes, licenses, fees	60.		60.	
	Progrm Post & Print	2,436.	2,436.		
	Associate Lodge Exp	1,643.	1,643.		
	Recruitment Classes	499.	499.		
1	All other expenses	9,751.	9,751.		· · · · · · · · · · · · · · · · · · ·
	Total functional expenses. Add lines 1 through 24f	166,986.	157,294.	9,692.	0.
26	Joint Costs. Check here Inf 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	230,230.		3,022.	
BAA					Form 990 (2008)

BAA

				(A) Beginning of year		(B) End of ye	ear
	1	Cash — non-interest-bearing		77,610.	7	79	,991.
	2	Savings and temporary cash investments	Ī	382.	2		,594.
	3	Pledges and grants receivable, net	[3		
	4	Accounts receivable, net .	_		4		
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, trustees, key employees,		5		
	6	Receivables from other disqualified persons (as define					
		and persons described in section 4958(c)(3)(B) Comp		_	6		
Ş	7	Notes and loans receivable, net		5,000.	7	5	,000.
ASSETS	8	Inventories for sale or use			8		
Ś	9	Prepaid experises and deferred charges	. [9		
	10a	Land, buildings, and equipment cost basis	10a 8,246.				
	b	Less, accumulated depreciation. Complete Part VI of					
		Schedule D	10b 7,146.	2,119.	10c	1	,100.
	11	Investments — publiciy-traded securities		335,943.	11	270	,195.
	12	Investments - other securities. See Part IV, tine 11			12		
	13	investments - program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV line 11			15		
	16	Total assets Add lines 1 through 15 (must equal line 3	34)	421,054.	15	381	,880.
	17	Accounts payable and accrued expenses			17		
	18	Grants payable .	- [18		
	19	Deferred revenue			19		
L	2û	Tax-exempt bond liabilities			20		
B	21	Escrow account liability. Complete Fart IV of Schedule	: Ū		21		
LIABILLITIES	Z 2	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per-	lees, key employees, sens. Complete Part II				
F		of Schedule L	<u> </u>		22		
5	23	Secured mortgages and notes payable to unrelated the	rd parties		23		
	24	Unsecured notes and loans payable	<u> </u>		24	5	,000.
	25	Other liabilities. Complete Part X of Schedule D	į.		25		
	26	Total liabilities. Add lines 17 through 25		0.	26	5	,000.
N E		Organizations that follow SFA\$ 117, check here	and complete lines				
	_	27 through 29 and lines 33 and 34.	į				
KHIN SIGN	27	Unrestricted net assets	 		27		
Ĭ	28	Temporarily restricted net assets	ļ	 	28		
S	29	Permanently restricted net assets			29		
		Organizations that do not follow SFAS 117, check her	e ► X and complete				
DZC		lines 30 through 34.				•	
Ď	30	Capital stock or trust principal, or current funds			30		
国ベルベアの山の	31	Paid-in or capital surplus, or land, building, and equipr	- F	401 054	31	226	
Ā	32	Retained earnings, endowment, accumulated income,	or other funds	421,054.	32		,880.
Ę	33	Total net assets or fund balances.	-	421,054.	33		,880.
	34	Total liabilities and net assets/fund balances.		421,054.	34	381	,880.
تح شا	re II	Financial Statements and Reporting				- 1	
		counting method used to prepare the Form 990 X C		Other		Ye	
		re the organization's financial statements compiled or r		countant?		2a X	
		re the organization's financial statements audited by an	•	, , , , , ,		2b >	<u> </u>
	۲e۶	Yes' to 2a or 2h, does the organization have a committee, or compilation of its financial statements and selections.	tion of an independent accour	ntant?	-	2c	x
3	a As Au	a result of a federal award, was the organization requir fit Act and OMB Circular A-133?	ed to undergo an audit or audi	its as set forth in the S	ingic	3a	X
		res, aid the organization undergo the required audit or	auoits?			3b	
BA.				- · · · 	• • •	Form 95	30 (2008

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 930, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

FR	ATERNAL ORDER OF POLICE GRAN	D CANYON LODGE #32		23-7166191
Pa	nt i Organizations Maintaining Dono	r Advised Funds or Othe	er Similar Funds or Acco	
	the organization answered "Yes"	to Form 990. Part IV, IIn-	e 6	
		123222		u nna nin larhay ngany <u>rta.</u>
1	Total number at end of year		l	
Ξ	Aggregate bont routroits to (builing year)		•	
3	Aggregate grants from (dunon year)		ļ	
	Aggregate value at erablices		***************************************	
5	Did the organization in form all dolors and do funds are the organization's property, subject	of earlieuts it, a sting that the to the organization's exclusive	assets held in Jordin advised in logal control?	Yes No
6	Did the organizar on imports all grantees, con- used only for charitable purposes and not for imports soble private benof to?	rrs, and donor advisors in wol the bunefit of the densit of der	ng that grant runds may be not advisor or other	∏Yes ∏No
Pa	Conservation Easements Compl	lete if the organization ar	aswered 'Yes' to Form 99	
_	Purpose(s) of conservation easements held b			o, rare rv, mic).
_	Presenter of and for put in use (e.g.		The second of the second	s , congress and size
	T Protection of natural habitat		TiPreservation of certified by	•
	Corosonuation o open space			
?	Complete I nes 2a-2d if the organization neight that year	a qualified conservation cont	button in the form of a conserva	ation easement on the last da,
				Held at the End of the Year
á	a Total number of conservation easements		2a	
ż	e Total acleage restricted by conservation ease	en.ents	2b	
(c Number of conservation easements on a cert	ifiea nistoric structure incluaed	ın (a) 2c	
•	d Number of conservation easements included	ın (c) acquired after 8/17/06	2d	
ŝ	Yumber of conservation easements realified year ►	transferred, refeased lextingu	ished, or terminated by the org	anzation during the tarable
4	Number of states where property subject to c	onservation easement is locate	ed ►	
5	Does the organization have a written policy re enforcement of the conservation easement it	egarding the penouic monitorin holds?	ig, inspection, violations, and	. Yes No
â	Staff or volumeer hours devoted to monatoring	g, inspecting land enforcing ea	isements duung toe year 🦮 🔝	
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing ease	ments during the year > \$	
5	Dues each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ni mie 2(u) above satisfy die re	equirements of section	☐ Yes ☐ No
ģ	th Part XVV describe his with a cannestion re- include, if applicable, the text of the footnote conservation easements	politic posserum an ensement to the organization's financial	ia its revenue and express sto- statements that disculars the o	timen, and bounce in all and egenization's accounting for
	Grganizations Gaintaining Collection Complete if the organization and			iar Assets
1 į	allf the organization elected as permitted under treasures, or other similar assets held for pub- ture from of the footnote to its financial statem.	dic exhibition, education, or re-	scarch in furtherance of public	a stroi worth of ait historical scrvice, provide, in Part XIV,
ļ	b If the organization elected, as permitted under treasures, or other similar assets held for pur amounts relating to these items	er SEAS 116, not to report in de otic exhibition, education or re-	s revenue statement and balance earch in furtherance of public :	ce sheet works of art, historical service, provide the following
	 Revenues included in Force 990, Part Vin 	hme i		= \$
	(ii) Assets included in Form 990, Part X			^ \$ > \$
2	If the organization received or held works of a amounts required to be reported under SFAS	ert historical froactives or othe 116 relating to these items.	er similar assets for financial ga	
ä	a Revenues monaed in Form 330 Part VIII inn	a i		- \$
ì	Assets included in Form 990, Part X			⊳\$

	D (Form 990) 2008 FRAT				23-716	
Part III	Organizations Mainta	aining Colle	ctions of Art, Histo	rical Treasures, or	Other Similar Asse	ts (continued)
	ng the organization's accessing the coessing	or, and other r	coords, check any of th	c following that are a sig	inflicant use of its collec	tion items (check all
ρ	Public exhibition		d Loan	or exchange programs		
ь <u>П</u>	Scholarly research		e Other			
с 📙	Preservation for future gene	erations	 1		· · · · · · · · · · · · · · · · · · ·	
4 ⊃.∪. Pari	vide a description of the organization	arrzation's coll	ections and explain how	v they forther the organiz	eaching philipse spropes	11.
5 Dur	ing the year, did the organizates to be sold to raise funds	ation solicit or rather than to l	receive donations of ar be maintained as part of	t, historical treasures, or of the organization's colle	other similar ection?	Yes No
Parl IV	JTrust, Fscrow and Ci Ⅳ, iine 9, or reported	ust od ial Arr I an amount	angements Comp ⁱ on Form 990, Par	ete if organization a t X, line 21.	nswered 'Yes' to Fo	orm 990, Part
lais th	ne organization un agent, tru uded on Form 990, Part X?	stee, custodiar	i, or other intermediary	for contributions or other	er assets net	Yes No
5 fi 'Y	'es,' explain the arrangemen	l in Parl XIV a	nd complete the tollow	ng table		
					<u> </u>	Amount
c Beg	inning balance				. 1c	
ಢ ∆ರ್ಥ	filions during the year			•	10	** ***
e Dist	inbutions during the year				1 e	
f Enc	eng balance				. [1f]	
2a Did	the organization include an	amount on For	m 990, Part X, line 21?		·	Yes No
blf Y	es, explain the arrangemen	l in Parl XIV				
Pari V	Endowment Funds Co	implete if or	ganization answer	ed 'Yes' to Form 990	0, Part IV, line 10.	
		(a) Current	year (b) Prior yea	ar (c) Two years back	(d) Three years back	(e) Four years back
1a Beg	inning of year balance					
b Con	itributions					
c Inve	estment earnings or iosses					
	nts or scholarships					
	er expenditures for facilities programs					
f Aan	ninistrative expenses					
g End	of year balance					
	vide the estimated percentag	ge of the year o	end balance held as			
	ard designated or quasi-endo	•	â			
	manent endowment >					
	m endowment =	£				
	there endowment funds not anization by:	in the possess	ion of the organization	mat are held and admin	istered for the	Yes No
(3)	unirelated organizations					3a(i)
	related organizations					3a(ii)
b If 'Y	res' to 3a(ii), are the related	organizations	isted as required on So	chedule R?		. 3b
4 Des	scribe in Part XIV the intende	ed uses of the o	organization's endowme	ent funds.		
Part VI	Investments-Land, I	Buildings, a	nd Equipment. See	Form 990, Part X,	line 10.	
	Description of investmen		(a) Cost or other basis (investment)		(c) Depreciation	(d) Book Value
1 a Lan	d					 -
b Buil	ldings					
	sehold improvements		, ,			
	upment			8,246.	7,146.	1,100.
e Oth	•					
	d lines 1a-1e (Column (d) sh	ouid equal For	m 990, Part X, column	(B), line 10(c))	•	1,100.
BAA					Schoo	dulc D (Form 990) 2008

Schedule **D** (Form 990) 2008

		POLICE GRAND CANYON LOF Form 990, Part X, line 12	DDGE #32 23-7166191 Page
(Description of security or category (including name of security)	(b) Book value	(c) Method of valuation
Financial de	rivatives and other financial products		Cost or end-of-year market value
	equity interests		· · · · · · · · · · · · · · · · · · ·
Total (Columi	(b) should equal Form 990 Part X, col (B) line 12.) >		
Part VIII	Investments-Program Related (See	e Form 990, Part X, line 1	3)
	(a) Description of investment type	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
	3/10-10-10-10-10-10-10-10-10-10-10-10-10-1	>	
Part IX	Other Assets (See Form 990, Part)	· · · · · · · · · · · · · · · · · · ·	
		Description	(b) Book value
	(a)	Be - March	(d) Gook varile
	(a)	D.C. 1 1 1 1 1 1 1 1 1 1	(b) cook varie
	(a)		(b) Grow varia-
	(a)		(B) OBOK VAIDE
	(a)		(b) (Block Value
	(a)		(b) carek varia-
	(a)		(b) carek varia-
	(a)		(b) carek varia-
	(a)		(b) carek variation
	(a)		(b) carek varia-
	n (b) Total (should equal Form 990 Part X o	col (B), line 15)	(D) CROCK VARIED
	ın (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	col (B), line 15)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	
Part X	on (b) Total (should equal Form 990 Part X o Other Liabilities (See Form 990, Par (a) Description of Liability	cal (B), line 15) rt X, line 25)	

Schedule D (Form 990) 2008 FRATERNAL ORDER OF POLICE		-/166191 Page 4
Part XI Reconciliation of Change in Net Assets from	om Form 990 to Financial Statements	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		195,140.
2 Total expenses (Form 990, Part IX, column (A), line 25)		166,986.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		28,154.
4 Net unrealized gains (losses) on investments .	•	•
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments8 Other (Describe in Part XIV)		•
9 Total adjustments (net) Add lines 4-8		
• • • •	mbine lines 2 and 0	20 154
10 Excess or (deficit) for the year per financial statements. Con Part XII Reconciliation of Revenue per Audited Fire		28,154.
Total revenue, gains, and other support per audited financial		1 1
2 Amounts included on line 1 but not on Form 990 Part VIII		
a Net unrealized gains on investments		
b Donated services and use of facilities	25	† [
c Recoveries of prior year grants .	. 26	1 1
d Other (Describe in Part XIV)	20	{
e Add lines 2a through 2d	1 - 31	2e
3 Subtract line Ze from line 1		3
4 Amounts included on Form 390, Part Vill, line 12, but not be	c line !	
a rivestments expenses not included on Form 990, Part VIII,	i i	
b Other (Describe in Part XIV)	4b	1
c Acd lines 4a and 4b	1_40[4c
5 Total revenue Add times 3 and 4c. (This should equal Form	1990 Part I line 12)	5
Part XIII Reconciliation of Expenses per Audited F		
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, but	•	
a Donated services and use of facilities	2a	
b Prior year adjustments .	25	
c Losses reported on Form 990 Part IX, line 25	26	1 1
d Other (Describe in Part XIV)	20	
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 Investments expenses not included on Form 990. Part VIII.	: i	1
b Other (Describe in Part XIV)	45	1
c Add lines 4a and 4b	<u> </u>	4c
5 Total expenses Add tines 3 and 4c (This should equal Form	n 990, Part I, line 18 \	5
Part XIV Supplemental Information		
Complete fors part to provide the descriptions required for Part in line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part	All, lines 2d and 4b.	INPS ID ANG ZN, FAIT V,
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
BAA	EEA3304 12/23/08	Schedule D (Form 990) 2008

Schedule D	(Form 990) 2008	FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32 Information (continued)	23-7166191	Page 5
Part XIV	Supplemental	Information (continued)		
-				
		P = M = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0		
				
		· · · · · · · · · · · · · · · · · · ·		

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008

Open to Public

Employer identification number

FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32 23-7166191 Pt_VI-C, Line 19 All financial statements, including 990 tax returns are available upon request from the Treasurer _____or Alpha Omega Business Systems. Treasurer and _____ <u>Preparer are available to answer questions about</u> any documents. Pt_VI-A, Line 6 FOP Lodge #32 does have approximately 1000 members. They all have voting rights. Pt VI-A, Line 7a FOP Lodge #32 has approximately 1000 members who may vote to elect officers and directors. Pt_VI-A, Line 7b Any item that directly affects general membership is voted on at a monthly meeting or by written ballot. Pt_VI-A, Line 8 Minutes are taken electronically during the monthly meeting and sent out to members. Pt_XI, Line_2c The Financial Statements and the 990 are both presented general membership at the monthly meetings. Pt VI-A, Line 8 There are no committees authorized to act on behalf of the Lodge. Pt_VI-B, Line 15 There is no compensation paid to anyone. Pt VI-A, Line 10 The 990 is not presented to general membership before filing. Preparer presents the 990 to the Treasurer and answers any questions. The Treasurer then presents the 990 to the general membership at the next monthly meeting. No_line number We are enclosing a second extension which was denied because it was postmarked after the appropriate We spent much time collecting information

Name of the organization		Employer identification number	Page 2
	F POLICE GRAND CANYON LODGE #32	23-7166191	
	for the revised 990 that we had not	needed in the	
	past. Some of the members with this	information	
	are retired and ill or traveling for	months. There	
	are no paid employees to assist in	signing or mailing	
	or collecting all the required infor	mation. Then	-
	when the extension needed to be sign	ed the National	
	Fraternal Order of Police was holding	q it's meeting	
	out of state. The authorized signer	was at this	
	meeting and returned to AZ the date	of the postmark	
	and the preparer does not receive in	formation as to	
	the date of out of state conferences	or meetings.	
	As the preparer, I am taking steps t	o correct this	
	problem. This is a statewide police	e organization that	
	has officers stationed throughout the	e state who are	
	full time employees of a police agen	cy_or_retired	
	and many have other full time busi	nesses or work. We	
	therefore ask that you approve the e	xtension for	.
	cause.		
-			
		·	
		·	
			- -
			

SCHEDULE R (Form 990)

(F)
Direct controlling
entity Open to Public Inspection OMB No 1545-0047 2008 Employer Identification number 23-7166191 (E) End-of-year assets Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions. **(D)** Total income Related Organizations and Unrelated Partnerships (C)
Legal domicile (state or foreign country) (B) Primary activity FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32 Part [1] Identification of Related Tax-Exempt Organizations (A) Name, address, and EiN of disregarded entity Part I Identification of Disregarded Entities Department of the Treasury Internal Revenue Service Name of the organization

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
AZ STATE FOP 86-0211010 8628 WEST CAVALIER DR, GLENDALE AZ 85305	Fraternal org	AZ	501(C)(8)		NONE
NATINAL FOP 23-1283161 701 MARRIOTT DR, NASHVILLE TN 37214	Fraternal org	NL	501(C)(8)		NONE
BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990	tructions for Form 990.	<u> TE</u>	TEEA5001 12/23/08	Schedi	Schedule R (Form 990) (2008)

Schedule R (Form 990) 2008 FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32

Part III Identification of Related Organizations Taxable as a Partnership	f Related Organ	izations	Taxable as a Pa	artnership							'
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or	(C) (D) Legal Direct domicile controlling entity faste or foreign	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	Share of total income Share of end-of-year assets	(H) Disproportionate allocations?	opor- ate	Code V-UBI amount in Box 20 of Schedule K-1	(J Gener mana partr	(J) General or managing , partner?
		country)					Yes	Š	(Form 1065)	Yes	ટ્ટ
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-										
1 1 1 1 1											
; ; ; ; ; ;											

Part IV Identification of Related Organizations Taxable	axable as a Cor _l	as a Corporation or Trust	ıst				
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(B) (C) (D) (D) (E) Type of entity (C corp, S corp. country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(G) Share of end-of-year assets	(H) Percentage ownership
							!

Schedule R (Form 990) (2008)

TEEA5002 12/23/08

BAA

Page 3

23-7166191

Schedule R (Form 990) 2008 FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32

23-7166191

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment bartherships.

(A) Name, address, and EIN of entity Primary activity Section (C) Are all part Section Section (State or Foreign 50(10)(3)	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	Are all partners section 501(c)(3)	(E) Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in Box 20 of Schedule K-1	(H) General or managing partner?	ral or aging
	,		Yes No		Yes No	rorm (1065)	Yes	No
			•		_			
			1					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
			+					
								
								İ
ВАА		TEEA5004 01/21/09				Schedule R (Form 990) (2008)	(066 m	(2008)

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service Name(s) shown on return

► See separate instructions.

► Attach to your tax return.

FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32 23-7166191 Business or activity to which this form relates Form 990 / Form 990EZ 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. \$250,000. Maximum amount. See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 \$800,000. Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing 5 separately, see instructions 6 (a) Description of property (c) Elected cost (b) Cost (business use only) 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the lax year (see instluctions) :4 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) Section A MACRS deductions for assets placed in service in lax years puginning before 2008 17 1,020. 18. If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Pasis for depreciation (a) (D) Month and (d) **(f)** (g) Depresiation (e) Class fication of property year placed in service การระบางคราชคณาแน Convention onty - see instructions) 19a 3-vear property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs S/L g 25-year property h Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L i Nonresidential real 39 <u>yrs</u> MM S/L property MM S/L Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs b 12-year S/L c 40-year 40 yrs MM S/L Summary (See instructions) Part IV 21 Listed property Enter amount from line 28 21 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions 22 1,020.

For assets shown above and placed in service during the current year, enter

Form	4 562 (20	ກດຄຳ	FRATERNAL	. ORDER O	F POL	TCE GR	AND	CANYO	ON 1	LODGE #	32		23-71	166191		Page 2
Par	t V	isted	Property (incoment, recreation	lude automob	iles, certa							mpute				
	N	ote: Fo	r anv vehicle fo	r which you a	re usina t	he standa	ard mile	eage rat	e or	deductina l	ease exi	ense.	complete	only 24	a, 24b,	
	C	olumns	(a) through (c)	of Section A,	all of Se	ction B, ai	nd Sec	tion C ıf	appl	licable						
28 :			n A — Deprecia te to support the but				tion: S	ee the ii Yes		Rio 28b If				mobiles	Yes	No
200	(a)	C CAINCIIC	(b)	(c)	(d			(e)	┷┪	(f)	-i	g)	T	<u>}</u> [h)		<u>[[™0</u> [i)
Ту	pe of proper vehicles fin	ty (list st)	Date placed in service	Business/ investment use percentage	Cost other	or	(busine	or deprecia ss/investm se onty)	tion ent	Recovery period	Me	thod/ ention	Depri	eciation uction	Ele secti	ected on 179 ost
25	used mo	re than	ation allowance 50% in a quali	fied business	use (see	ınstructio	ed in s ns)	ervice d	lurınç	g the tax ye	ar and	25				
26	Property	used r	nore than 50%	in a qualified	business	use	· · · · · · -				ī		ī		т —	
													1		┼-	··
				l					<u>أ</u>		1		1		1	
27	Property	used 5	0% or less in a	qualified bus	ness use											
															_	
											+-		 		-	
20	Add amo	unto in	<u>(</u> column (h), lin	oc 25 through	27 Ente	r bere an	d on lu	a 21 o				28			┪	
			column (i), line	-				ι ς 21, μο	iye i			2.0	J	29	 	
			35,6 (7)	2 2 2 2 1 1 2		B – Infor		on Use	of V	ehicles					<u> </u>	
Com to yo	plete this ur emplo	section yees, fi	n for vehicles us ist answer the	sed by a sole questions in S	proprieto ection C	r, partner, to see if y	or oth	er 'more et an ex	than cept	n 5% owne	r, or rela oleting th	ated po us sect	rson. If y ion for th	ou provi ose vehi	ded vet cles.	iicles
30	Total bu	emoce!	ovactment mile	e driven	1	a)		D)		(c)	(0	•	1 '	2)	(1	•
30	Total business/investment miles driven during the year (do not include commuting miles)				Vehicle 1		Vehi	cle 2	2 Vehicle 3		Vehicle 4		Vehicle 5		Vehi	cle 6
31	Total com	ររក្សាបបី ឃ	iles driven during ti	he year							<u> </u>		<u> </u>			
32	Total off miles dr		sonal (noncomin	nuling) 												
33	Total mi lines 30		ren during the y n 32	ear. Add	-			·			ļ					
34	Was the	veh:cle	e available for p	ersonal use	Yes	No	Yes	No	Υe	s No	Yes	No	Yes	No	Yes	No
35	ជុកាមសិ ក	ff-duly			•-							<u>.</u>	 			
36	than 5%	owner	or related personal p	on?		╂			-				 			
				<u> </u>									<u></u>			
Ansv	ver these	question relater	Section ons to determing the persons (see a	C - Question c if you meet instructions)							•			no are no	t more	than
37	Do you r		n a written polic	cy statement ti	hat prohit	oits all per	rsonal	use of v	ehick	es, ıncludir	g comm	uting,			Yes	No
38	Do you r	naintaii es? Se	n a written polic e the instruction	cy statement to	nat prohits used by	oits persoi corporate	nal use	of vehicles	cles,	except cor , or 1% or r	nmuting, nore owi	by you ners	Jr			
39	Do you t	reat all	use of vehicles	by employee	s as pers	onal use?	•	-						[
	vehicles	, and re	more than five	ation received	7				-				e use of	the		
41	Do you r Note: If	neet th your ar	e requirements iswer to 37, 38,	concerning qu 39, 40, cr 41	ualified a	utomobile do not co	demor <i>mplete</i>	nstration Section	use B fo	? (See inst or the cover	ructions. ed vehic) les.				
Pa	A W	morti	zation													
		Des	(a) cription of costs		Date a	(b) mortization egins		(c) Amortizab amount	le	C	d) ode ction	l pe	(e) ortization eriod or centage		(f) mortizatio or this yea	
42	Amortiza	ation of	costs that begi	ns during you	r 2008 ta	x vear (se	e instri	uctions):				_ <u>.</u>		L		

43

44

43 Amortization of costs that began before your 2008 tax year . . .

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code:	Description:	24c) FOP#32 Associate Lodge Expenditures to	
Expenses _	11,329.	enhance their programs to support Lodge	1643
Grants Of		24f) Charity Golf Tournament expenditures	
Revenue .		75% of net proceeds to to West Valley	
		Child Crisis Center	6751
		24b) Printing & Postage for programs	2436
		24d) Recruitment classes expenditures	499

Supporting Statement of:

Form 990 p 9/Membership Dues

Description	Amount
DUES FROM FOP #32 MEMBERS	95,895.
DUES FROM FOP #32 ASSOCIATE MEMBERS	1,731.
Total	97,626.

Supporting Statement of:

Form 990 p 9/Line 3 Column D

Description	Amount
WADDELL REED DIVIDENDS CHASE SAVINGS & AZ STATE CREDIT UNION	18,410.
Total	18,623.

Supporting Statement of:

Form 990 p 9/Sales of Securities

Description	Amount
WADDELL REED ASSET STRATEGY A #684	4,847.
WADDELL REED HIGH INCOME A #628	62,838.
WADDELL REED HIGH INCOME A #628	20,946.
W/REED ASSET STRATEGY #684 LONG TM CAP GAIN	7,934.
W/REED ASSET STRATEGY #684 SHORT TM CAP GAIN	3,252.

Supporting Statement of:

Form 990 p 9/Gross Basis Amount

Description	Amount
WADDELL REED ASSET STRATEGY A #684	6,748.
WADDELL REED HIGH INCOME A #628	82,423.
WADDELL REED HIGH INCOME A #628	27,474.

Total _____116,645.

Supporting Statement of:

Form 990 p 9/Gross sales of inventory

Amount
3,525.

Supporting Statement of:

Form 990 p 9/Cost of Goods Sold

Description	Amount
PURCHASE OF MERCHANDISE SUCH AS BADGES,	
FALLEN OFFICERS PINS, ID PINS, SHIRTS,	
CAPS, ETC. GIVEN/SOLD TO OFFICERS FREE	
OR AT REDUCED COST	8,586.

Supporting Statement of:

Form 990 p 10/Line 1 col (B)

Description	Amount
100 CLUB MEMBERSHIP	2,000.
SPECIAL OLYMPICS 2008	325.
08 LAW ENFORCEMENT TORCH RUN	1,000.
AZ PEACE OFC MEM GOLF TOURNEY	250.
PEACE OFFICERS MEMORIAL	44.
FOOD FOR AZ DPS PLANE FOR GOVERNOR	250.
AZ HOMICIDE INVESTIGATORS	500.
Total	4,369.

Supporting Statement of:

Form 990 p 10/Line 2 col (B)

Description	Amount
ASSISTANCE TO MEMBERS IN DISTRESS	680.
CHAPLAIN EXPENSES, CARDS, FLOWERS	

Continued

_			
Sun	nortina	Statemo	ent ot:

Form 990 p 10/Line 2 col (B)

Description	Amount
CONNIE HINSON GIFT BRUCE HARROLLEE TRUST ACCT KILLED ON DUTY	125.
Total	1,805.

Supporting Statement of:

Form 990 p 10/Line 4 col (B)

Description	Amount
ALC DUES FOR LEGAL DEFENSE PACKAGE	
SEE ATTACHMENT FOR ACTIVITIES	91,400.
SPONSORSHIP OF NATIONAL POLICE SHOOT CHAMP	496.
AWARDS & PLAQUES I.E. OFFICER OF THE YEAR	219.
ACCIDENT INSURANCE FOR MEMBERS	3,866.
PER CAPITA DUES TO STATE & NATIONAL FOP	20,100.

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
1/2 COST OF 2 CELL PHONES FOR OFFICERS	774.
Total	774.

Supporting Statement of:

Form 990 p 10/Line 13 col (C)

Description	Amount
OFFICE SUPPLIES & EXPENSES	1,037.
ADMIN POSTAGE	671.
ADMIN PRINTING	86.
ADMINISTRATIVE MILEAGE REIMBURSEMENTS	1,706.
TELEPHONE FOR OFFICERS	773.

Total

4,273.

Supporting Statement of:

Form 990 p 10/Line 14 col (C)

Description	Amount
Computer, Warranties, Tech Support,	
Back Up, Software for Lodge Recording	
Secretary	2,012.
Web Site	250.

Supporting Statement of:

Form 990 p 10/Line 19 col (B)

Description	Amount
Monthly Lodge Meetings Lunches & Mileage	3,599.
State Conference Lunches	414.
State Conference Shirts	76.
State Conference Registration	1,920.
State Conference Rooms	3,171.
State Conference Rooms, Registrat, Lunches	1,650.
State Conference Mileage	1,484.
Misc reimbursements for meeting expend	996.
Total	13,310.

Form 990 p 1: Pt I, Ln 1, Mission

THE PURPOSE OF THE STATE OF ARIZONA FRATERNAL ORDER OF POLICE LODGE #32 IS TO PROMOTE AND FOSTER THE ENFORCEMENT OF LAW AND ORDER. IN ADDITION, WE SEEK TO IMPROVE INDIVIDUAL PROFICIENCY OF OUR MEMBERS IN THE PERFORMANCE OF THEIR DUTIES. TO THIS END, WE SEND VARIOUS MEMBERS TO TRAINING CLASSES. THE FOP ENCOURAGES SOCIAL, CHARITABLE AND EDUCATIONAL ACTIVITIES AMONG POLICE OFFICERS. WE HOLD FRATERNAL EVENTS AND SUPPORT OTHER POLICE ORGANIZATIONS WITH TIME AND FINANCIAL SUPPORT. WE ALSO PROVIDE OUR MEMBERS WITH A LEGAL DEFENSE FUND, WHICH AMONG OTHER THINGS, HELPS OFFICERS WITH LAW SUITS RELATING TO ON DUTY PROBLEMS.

Form 990 p 2: Organization Mission-1

THE PURPOSE OF THE STATE OF ARIZONA FRATERNAL ORDER OF POLICE IS TO PROMOTE AND FOSTER THE ENFORCEMENT OF LAW AND ORDER. IN ADDITION, WE SEEK TO IMPROVE INDIVIDUAL PROFICIENCY OF OUR MEMBERS IN THE PERFORMANCE OF THEIR DUTIES. THE LODGE ALSO PROVIDES POLICE ELATED BENEFITS TO ITS MEMBERS. THE FOP ENCOURAGES SOCIAL, CHARITABLE AND EDUCATIONAL ACTIVITIES AMONG POLICE OFFICERS.

Form 990 p 5: Line 1c No

There were no such payments.

Form 990 p 6: Line 8b No

THERE ARE NO COMMITTEES WITH AUTHORIZATION TO ACT ON BEHALF OF THE ORGANIZAITON.

Form 990 p 6: Line 15a No

THERE IS NO CEO, EXEC DIRECTOR, OR ANY PAID MANAGEMENT

Form 990 p 6: Line 15b No

THERE IS NO COMPENSATION FOR ANY OFFICER OR EMPLOYEE. EVERYTHING IS ON A VOLUNTEER BASIS. EXPENSES INCURRED

Additional Information For Tax Return

FRATERNAL ORDER OF POLICE GRAND CANYON LODGE #32	23-7166191
Form 990 p 6: Line 15b No (Continued)	
ON BEHALF OF THE ORGANIZATION	
ARE REIMBURSED WHEN RECEIPTS	
ARE TURNED IN.	

Executive Board Grand Canyon State Lodge #32

Position	Name
President	John Ortolano
Vice President	Lynn Ideus
Secretary	Coe Mitchell
Treasurer	Tom Breen
Chaplain	Bob Mitchell
2nd Vice President	Ron Butters
Sergeant-at- Arms	Keith Anderson
Senior Trustee	Don Fellows
Mid Term Trustee	Hector Castillo
Junior Trustee	Carri Stubblefield
State Trustee	Lee Stepherson
ALC Chairman	John Ortolano
FOPA #32 President	Sandy Othon

SUMMARY OF AZ LABOR COUNCIL BENEFITS

Some benefits furnished to members of ALC.

- 1 Trial Defense for job-related matters, criminal and civil.
- 2. Disciplinary Hearing Representation for job-related matters.
- 3. IRS Audit Representation hours limitation set.
- 4 Wills for member and spouse.
- 5. Motor Vehicle Representation within the State of AZ some limitations.
- 6 Unlimited free phone consultation on personal legal matters.
- 7. Estate Representation.
- 8. Discounted rate for other legal services not otherwise provided under ALC package
- 9 There are some exclusions under the Agreement.