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721250883 09/24/2010 11 19 AM

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2008 Open to Public Inspection

ВС			ear, or tax year b		, and endir	19				
	heck if applicable	Please use IRS	C Name of organi				5 1) Emplo	yer identification numbe
^ ك	Address change	label or		Indepen	dence Volur	iteer Fi	re Dept			1050000
□ N	lame change	print or	Doing Business	s As	- <u>-</u>				72-	1250883
一	nitial return	type.		treet (or PO box if mail is not de	livered to street address)		Room/surl	te I	•	one number
二		See Specific	P.O	Box 35					985	-878-2702
╝	emination	Instruc-	City or town,	, state or country, and ZIP	+ 4			L	Gross rece	pts \$ 434,8
A	mended return	tions.	Indep	endence	LA _	70443			- -	
٦,	Application pending F Name and address of principal officer									a group return for
<u>`</u> ر	Application pendin	" De	nnis Cr	ocker				1	affiliate	s? Yes X
			O. Box					ļ	H(b) Are all include	affiliates
		ı	depende		LA 70443	3				attach a list (see instructions)
 	Tax-exempt sta			4) ♦ (insert no)	4947(a)(1) or	527			,	,
	Website: •		1 331(0) (<u> </u>	1047 (0)(1) 01	1 1 921			H(c) Gmun	exemption number_
	Type of organizati		rporation Tru	ust Association	Other •		L Year of form		1(0) 0.000	M State of legal domicile
	maniini i			ist Association	Other 🔻		L fear of form	auon		M State of legal domicile
<u></u>		Summa		 	<u> </u>					
	-		_	n's mission or most sigr		_				
e l		-	=	Volunteer Fir						
崩	pr:	umaril	y for pro	oviding fire p	rotection and	l first re	esponse			
Governance	are	eas as	sistance	for the area	public.					
ð	2 Check	this box	♦ If the o	organization discontinue	ed its operations or dis	posed of more t	han 25% of its	assets		
	3 Numbe	er of votino		he governing body (Par		•			3	
Activities &		_	=	members of the governi		1b)			4	
Ę		•	employees (Pa	-	g 200) (, a,	,			5	18
흃				imate if necessary)					6	
٩					line 40 neliumn (C)				\rightarrow	
- 1				revenue from Part VIII,					7a	
	b Net un	related bu	siness taxable	income from Form 990	-1, line 34		· · · · · · · · · · · · · · · · · · ·	Prior Year	7b	Current Year
	0 041		d =====to (D==4)	\/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					,606	168,00
9			d grants (Part \						,886	251,20
Revenue	_		revenue (Part	· •	. –				30	
8				olumn (A), lines 3, 4, an						15 6
_				ın (A), lines 5, 6d, 8c, 9d					,260	15,62
\rightarrow				ough 11 (must equal Par		12)		547	,782	434,8
		Grants and similar amounts paid (Part-IX, cotumn (A), lines 1-3)								
	14 Benefi	ts paid to	ortormentibéis	√(Pan)IX, column (A), III	ne 4)					
S	15 Salarie	s, other c	ompensation, e	employee benefits (Part	IX, column (A), lines §	- 10)		58	,129	91,18
Expenses	16a Profes	sional fund	draising fees (F	and X column (A), line	11e)					
<u>8</u>	b Total f	undräisina	expenses (Par	Part IX (column (A), line rt IX, column (D), line 2	5) ♦					
<u>ы</u>	17 Other	expenses	(Part IX colum	n-(A) , lines il a-11d, 11	1f-24f)			476	,201	283,90
	19 Total e	vnancac	Vadalistes 13 b	(mustlequal Part IX, c	oolumn (A) line 25)				,330	375,09
					Joidfill (A), lifte 23)				, 452	59,7
ъ s o	19 Reven	ue iess-ex	penses Subura	act-line-18-from line 12			Be	ginning of		End of Year
اق ت	20 Total a	acata (Bai	rt X, line 16)						,126	366,93
왔일		•	Part X, line 16)				<u> </u>		,613	182,6
Assets Balanc		abilities (P			••					
Assets Baland	21 TOTALI		id balances Si	ubtract line 21 from line	20			124	,513	184,20
Net Assets Fund Baland	22 Net as									
Net Assets Fund Balanc	22 Net as	Signatu	re Block							
Net Assets Fund Balanc	22 Net as	Signatu ^{Under penal}	re Block	declare that I have examine						
Net Assets Fund Balanc	22 Net as	Signatu ^{Under penal}	re Block	declare that I have examine and complete Declaration of					irer has any	/ knowledge
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B S Fund Balanc	22 Net as	Signatu Under penal and belief	re Block			icer) is based on a	ill information of w		irer has any	/ knowledge
B S Fund Balanc	22 Net as	Signatu Under penal and belief	re Block Ities of perjury, I dit is true, correct, a	and complete Declaration of		icer) is based on a			erer has any	/ knowledge
DE CONTRACTOR OF THE PROPERTY	22 Net as	Signatu Under penal and belief	tes of perjury, I dans true, correct, a	cocker		icer) is based on a	ill information of w		erer has any	/ knowledge
DE CONTRACTOR OF THE PROPERTY	22 Net as	Signatu Under penal and belief of Signatu Type or	re Block Ities of perjury, I do t is true, correct, a Lucio are of officer ennis Cr r print name and t	cocker	of preparer (other than off	Ch	ief 1	vhich prepa	erer has any	/ knowledge
Signature Assets	22 Net as	Signatu Under penaland belief of Signatu Signatu Type or	re Block Ities of perjury, I do t is true, correct, a Lucio are of officer ennis Cr r print name and t	cocker	of preparer (other than off	Ch	ief 1	Check if	arer has any	Preparer's identifying numt (see instructions)
Sig Her	22 Net as	Signatu Under penal and belief of Signatu Type or	Ities of perjury, I dit is true, correct, a	cocker	of preparer (other than off	Ch	ief 1	Check if	arer has any	/ knowledge -24-70 Preparer's identifying numb
Net Assets Signature Pare Pare Pare Pare Pare Pare Pare Pa	n d parer's	Signatu Under penal and belief the Signature Signature	Ities of perjury, I de it is true, correct, a correct, a correct and a c	cocker title Anthony B.	Baglio, CP	Ch	ief 1	Check if	arer has any	Preparer's identifying numt (see instructions)
Sign Per Prairie Prairie Prairie Palanc	22 Net as art II n re d parer's e Only	Signatu Under penal and belief of Signatu Signatu Type or Preparer's signature Firm's name f self-emplo	re Block Ittes of perjury, I do t is true, correct, a Lucio re of officer ennis Cr r print name and t e (or yours yed).	cocker title Anthony B. 2011 Rue Si	Baglio, CPA	Ch	ief 1	Check if	q. 9ata	Preparer's identifying numb (see instructions) P00060376
Sign Per Prairie Prairie Prairie Palanc	22 Net as art II n re d parer's e Only	Signatu Under penal and belief of Signatu Type of Preparer's signature Firm's name	re Block Ities of perjury, I do t is true, correct, a Lucio re of officer ennis Cr r print name and to e (or yours byed).	cocker title Anthony B.	Baglio, CPA	Ch	ief 1	Check if	garer has any	Preparer's identifying numt (see instructions)

orm	990 (2008) Independence	Volunteer Fire Dept 72	-1250883	Page 2
		Service Accomplishments (see instruction	ons)	
	Briefly describe the organization's mission			
		nteer Fire Department, Inc		
		ng fire protection and fir	st response	
a:	reas assistance for	the area public.		
2	Did the organization undertake any signi	ficant program services during the year which were no	t listed on	
	the pnor Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on			
		r make significant changes in how it conducts, any pro	gram	□.,
	services? If "Yos " dosoubo those changes on Sab	adula O		Yes X No
	If "Yes," describe these changes on Schoolse the exempt purpose achievement	ents for each of the organization's three largest program	m canuicae hy avnancae	
		tions and section 4947(a)(1) trusts are required to rep		
		and revenue, if any, for each program service reported	-	
	(Code) (Expenses \$	375,097 including grants of \$) (Revenue \$)
		nteer Fire Department, Inc		
		providing fire protection	and first	
Ι.	esponse areas assist	ance for the area public.		
			•	
4b	(Code) (Expenses \$	unallyding grants of C	\ /Payanya ¢	
40	(Code) (Expenses \$	including grants of \$) (Revenue \$,
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe in Sci	nedule O)		
	(Expenses \$	nedule O) Including grants of \$ \$ 375,097 (Must equal Part IX, Li	(Revenue \$)

			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_		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_ <u>X</u> _
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		ļ	
	candidates for public office? If "Yes," complete Schedule C, Part I	_3_		<u> </u>
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)	_		v
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_		<u> </u>
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	_		x
7	Schedule D, Part I	_6_		
′	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
U	complete Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		x
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		$\overline{\mathbf{x}}$
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	x	
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20 21	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			1
	24b–24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a pnor year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u>X</u>
				10000

Part IV	Checklist of Required Schedules	(continued)	,

			Yes	No
28	Dunng the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	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
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related			
	organization? If "Yes," 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			
	V	37		<u> </u>

Form **990** (2008)

F#	Statements Regarding Other IRS Filings and Tax Compliance					
4	Established III D. 0.65 4000 to 100 III W. 1.6				Yes	No
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	4-	0			
	U.S. Information Returns Enter -0- if not applicable	1a 1b	0	-		
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report gaming (gambling) winnings to prize winners?	able		1c		x
2a		1 1		16		
Za	, , , , , , , , , , , , , , , , , , ,	2a	18			
b	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	x	İ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			20		
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	v				
	this return?	,		3a		ж
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority		\ <u>\\\</u>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	-				
	account)?			4a		х
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ık				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?		5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				
	gifts were not tax deductible?			6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more tha	ın				•
_	\$75?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	_	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		x
а	If "Yes," indicate the number of Forms 8282 filed during the year	7d		10		-
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a persi			1		
•	benefit contract?	01141		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	,		7f		х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	;				
	required?			7h		Х
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and secti	on				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor	ring				
	organization, have excess business holdings at any time during the year?			8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		ļ
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a		-{		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	ا ا				
49-	amounts due or received from them)	11b		ا 🚅 ا		Ī
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	1 1		12a		ļ
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		<u> </u>		<u> </u>

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 Management						
			·			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the	е					
	circumstances, processes, or changes in Schedule O. See instructions						
1a	Enter the number of voting members of the governing body	1a					
b	Enter the number of voting members that are independent	1b					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship will	th					
	any other officer, director, trustee, or key employee?				2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the dire	ect					
	supervision of officers, directors or trustees, or key employees to a management company or other person	n?			3		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa:	s filed?		4		X X X
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5		<u>X</u>
6	Does the organization have members or stockholders?				6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers					
	of the governing body?				7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	ıg					
	the year by the following						
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9a	Does the organization have local chapters, branches, or affiliates?				9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chap	ters,					
	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	zations	3		Ì		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach	ned at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
<u>Sec</u>	tion B. Policies						
						Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ive					
	rise to conflicts?				12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,	,					
	describe in Schedule O how this is done				12c		
13	Does the organization have a written whistleblower policy?				13		X
14	Does the organization have a written document retention and destruction policy?				14		Х
15	Did the process for determining compensation of the following persons include a review and approval by						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	ecision					
а	The organization's CEO, Executive Director, or top management official?				15a		<u>X</u>
b	Other officers or key employees of the organization?				15b		X
	Describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				F		
	with a taxable entity during the year?				16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegu-	ard			•		
	the organization's exempt status with respect to such arrangements?		<u> </u>		16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501	1(c)(3):	s only)				
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	ict of in	nterest				
	policy, and financial statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books and re		of the				
	organization ♦ Anthony Baglio, CPA 2011 Rue Sim						4
<u>Ha</u>	mmond L	A 7	0403	985	-54	2-4	<u> 155</u>

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B) Average	Posi		(0	C)	hat ap		(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	Individual trustee		Officer		employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Frank S. Rum Asst Chief 2	falo							11 000	0	
Raymond D. A	lexia	+	_	\vdash	-	├	<u> </u>	11,000		<u>C</u>
Chief 1								4,200	o	O
Dennis M. Cr Chief 1	ocker								0	0
Brian J. Cos	ta '	+						3,200	U	
Capt 2/Sec								2,880	0	O
									·	
		+								
		<u> </u>	ļ							
,										
										
		+	_	<u> </u>	-					<u></u>
•					L					
									_	
	-	+				 				
	·									
-										
	-									
		+-		\vdash	\vdash	 				_

Form 990 (2	2008) Inde	pendence	Volu	<u>ınt</u>	ee	<u>r :</u>	Fi:	re	D€	ept 72-125	0883		_	P	age 8
Part VII	Section A	. Officers, Direct	tors, Trus	tees	, Ke	y En	plo	yees	, an	d Highest Compensated E	mployees (continued)				
-	(A)	(B)					C)			(D)	(E)		(F)		
Name	e and title	Average hours per week				Officer	_	at ar Highes		Reportable compensation from	Reportable compensation from related		Estimat amount other	of	
				Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	o	mpensa from the rganiza and rela rganizat	ne tion ited	
												·			
						ļ									
									_						
					_	_	_								
				ļ											
								_							
1b Total									♦	21,280		L			
	number of individual i	viduals (including t	those in 1	a) wi	no re	ceiv	ed m	ore	than	\$100,000 in reportable com	pensation from the				
		list any former of ? If "Yes," complet								ee, or highest compensated			3	Yes	No X
4 For a	ny individual lis ganization and	ted on line 1a, is t	he sum of	frep	ortab	le co	mpe	ensat	tion a	and other compensation from complete Schedule J for su			4		x
5 Did ai	ny person listed	on line 1a receiv								unrelated organization for uch person			5		X
1 Comp	Independent blete this table f	or your five highe:	st comper	nsate	ed inc	depe	nder	nt coi	ntrac	ctors that received more that	n \$100,000 of				
comp	ensation from t	he organization (A) Name and business							Τ		(B) tion of services		Con	(C)	
	•	Traine and business	address							Безиір	OUT OF SCIPACES			реподи	UII
		- , ,	.,	· -											
	_														
	_														
	<u> </u>														-
comp		pendent contractors he organization		ing t	nose	ın 1) wh	o rec	æıve —–	ed more than \$100,000 in			0	000	·05.5-*
DAA													Form	990 (2008)

Pa	rt V	III Staten	nent of Rev	enue						
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
N N	1a	Federated can	naigns	1a				revenue		512, 513, or 514
ant	b	Membership d	-	1b						
P.E	c	Fundraising ev		1c						
ar a	d	Related organi		1d						
S,E	8	Government grants		1e		.64,030				
o is	f	All other contribution	,			.01/000				
E E	•	and similar amounts		_{1f}		3,971				
d i	_	Noncash contribution	ne included in lines 1		\$	3,311				
äõ	g	Total. Add line		ia-11	Ψ	•	168,001			
-		Total. Add line	<u> </u>			Busn. Code	100,001			
eun	2a	Ad Valor	rem Taxes			Busii. Code	207,988	207,988		<u> </u>
Še	b		evenue Shar				29,464	29,464		
Program Service Revenue Contributions, gifts, grants	c			_	240		13,751	13,751		
ĒΞ	4	C Fire Insurance Prem Rebate				13,731	15,751			
S		e								
gra	f	All other progra	am service rev	anua		· · · · · · · · · · · · · · · · · · ·				
<u>P</u>	a	Total. Add line		Cildo		•	251,203			
	3			dıvide	nds interes					
	_	3 Investment income (including dividends, interest, other similar amounts)				•	20			20
	4	Income from in	•	х-ехеп	not bond pr	oceeds •				······································
	5	Royalties				•				
		,	(ı) Real	ı	(II) F	Personal				
	6a	Gross Rents		-						
	b	Less rental exps								
	С	Rental inc or (loss)								
	d	Net rental inco	me or (loss)			•				
	7a	Gross amount from	(ı) Secunt	ties	(11) Other				
		sales of assets other than inventory								
	b	Less cost or other								
		basis & sales exps						`		
	С	Gain or (loss)								
	d	Net gain or (los	ss)			•				
	8a	Gross income fro	om fundraising ev	ents/						
91		(not including \$								
Ven		of contributions r	eported on line 1	c)						,
8		See Part IV, line	18		a	<u>.</u> .				
Other Revenue	b	Less: direct ex	penses		ь					
ŏ	C	Net income or			g events	•				
	9a	Gross income fro		ies						
		See Part IV, line			a					
		Less direct ex	=		ь					
		Net income or	_	_	ti <u>vities</u>	•				
	10a	Gross sales of	•	3						
		returns and alle			a					
		Less cost of g			b					
	С	Net income or			ventory	•				
		Misc	ellaneous Reven	ue		Busn. Code				
	11a	Miscellan	eous Income	•			12,328			
	b	Insurance	Proceeds			<u> </u>	3,300	3,300		
	С									
	d	All other reven								
	е	Total. Add line				•	15,628			
	12	Total Revenue		, 2g, 3,	4, 5, 6d, 7d	d, 8c,				
		9c, 10c, and 1	1e				434,852	266,831	0	20

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				1
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	91,188	91,188		
8	Pension plan contributions (include section 401(k)	,			
	and section 403(b) employer contributions)			···	
9	Other employee benefits				_
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,925	6,925		
4	Accounting Lobbying	0,923	0,923	-	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy			-	
17	Travel				_
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	40.440	40.440		
20	Interest	10,143	10,143		-
21	Payments to affiliates	0.010	0.010		
22	Depreciation, depletion, and amortization	8,819	8,819		-
23	Insurance			***************************************	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				1
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Capital Expenditures	179,086	179,086		
b	Payment to Fire District	17,472			
С	Insurance	14,177	14,177		
d	Equipment Rental & Maint.	14,085	14,085		
е	Telephone	10,197	10,197		
	All other expenses	23,005	23,005		
25	Total functional expenses.Add lines 1 through 24f	375,097	375,097		
26	Joint Costs. Check here ◆ ☐ if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
	iunuraising solicitation				

P	art >	Balance Sheet									
					(A) Beginning of year		(B) End of				
	1	Cash—non-interest bearing			16,932	1		66,	626		
	2	Savings and temporary cash investments			<u> </u>	2					
	3	Pledges and grants receivable, net				3					
	4	Accounts receivable, net			68,885	4		73,	B 22		
	5	Receivables from current and former officers, directors, tru	stees,	key							
		employees, or other related parties Complete Part II of Sc	hedule	L.		5		_			
	6	Receivables from other disqualified persons (as defined ur	nder se	ection							
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	Com	plete							
		Part II of Schedule L		L		6					
ţ	7	Notes and loans receivable, net				7					
Assets	8	Inventones for sale or use				8					
As	9	Prepaid expenses and deferred charges	_	<u> </u>		9					
	10a	Land, buildings, and equipment cost basis	10a	267,104							
	b	Less: accumulated depreciation Complete									
		Part VI of Schedule D	10b	40,614	235,309	10c	2	26,	<u>490</u>		
	11	Investments—publicly traded securities				11					
	12	Investments—other securities See Part IV, line 11		_		12					
	13	Investments—program-related See Part IV, line 11		_		13					
	14	Intangible assets				14					
	15	Other assets See Part IV, line 11		-	201 106	15			~~~		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			321,126		3	<u>66,</u>	938 450		
	17 Accounts payable and accrued expenses 6,085 17										
	18	Grants payable 18 9,847 19									
	19			-	9,547						
Ś	20	Tax-exempt bond liabilities				20					
ij	21	Escrow account liability Complete Part IV of Schedule D	lease.	-		21					
Liabilities	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified										
Ë	employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22										
	23	Secured mortgages and notes payable to unrelated third p	artice		180,681	23	1	73,	220		
	24	Unsecured notes and loans payable to unrelated third p	artics			24	-	,			
	25	Other liabilities Complete Part X of Schedule D				25					
	26	Total liabilities. Add lines 17 through 25			196,613	26	1	82,	670		
ű		Organizations that follow SFAS 117, check here ◆ X	and				_				
ces		complete lines 27 through 29, and lines 33 and 34.		•							
<u>a</u>	27	Unrestricted net assets				27					
Ва	28	Temporanly restricted net assets			124,513	28	1	84,	268		
פַ	29	Permanently restricted net assets			-	29					
֖֡֡֡֡֡֡֡֡֡֡֡֡֡֝֡֡֡֡		Organizations that do not follow SFAS 117, check here	• • [1							
Net Assets or Fund Balan		and complete lines 30 through 34.	_	_							
S	30	Capital stock or trust principal, or current funds				30					
set	31	Paid-in or capital surplus, or land, building, or equipment fu	ınd			31					
Asi	32	Retained earnings, endowment, accumulated income, or o	ther fu	nds		32					
et '	33	Total net assets or fund balances			124,513	33		84,			
Z	34	Total liabilities and net assets/fund balances			321,126	34	3	<u>66,</u>	<u>938</u>		
P	art)	Financial Statements and Reporting									
							ę 	Yes	No		
1	Ac	counting method used to prepare the Form 990 C	ash	X Accrual Othe	ег				É		
2 a		ere the organization's financial statements compiled or review	-	•	•		. <u>2a</u>	X	- <u>-</u> -		
b		ere the organization's financial statements audited by an inde					2b		X		
C		Yes" to lines 2a or 2b, does the organization have a commit		•	•						
		e audit, review, or compilation of its financial statements and		•			2c		<u> </u>		
3 <i>a</i>		a result of a federal award, was the organization required to	unde	go an audit or audits as set fo	orth in						
		Single Audit Act and OMB Circular A-133?					3a		X		
b	lf "	Yes," did the organization undergo the required audit or aud	ıts?								

SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

♦ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2008
Open to Public

Inspection Name of the organization Employer identification number Independence Volunteer Fire Dept 72-1250883 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chantable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		nce volunteer			250883		Page 2
Pa	rt III Organizations Maintaining	Collections of Art, H	<u>istorical Treasu</u>	res, or Other S	imilar Assets	(continue	<u>ed)</u>
3	Using the organization's accession and other ritems (check all that apply)	ecords, check any of the fol	lowing that are a sig	nificant use of its col	llection		
а	Public exhibition	d 🔲 Loan o	r exchange program	s			
b	Scholarly research	e Other	0.0				
С	Preservation for future generations						
4	Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV						
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to be				٦	Yes	No
Pa	rt IV Trust, Escrow and Custodi				ed "Yes" to For		
	Part IV, line 9, or reported a				54 100 to 10.	,	
1a	Is the organization an agent, trustee, custodiar						
	included on Form 990, Part X?	ror outlor intermediary for o		400010 1101	Γ	Yes	No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following ta	ible		_		
_		nd complete the tenerming to				Amount	
c	Beginning balance				1c		
	Additions during the year				1d		
u	Distributions during the year				1e		
•	Ending balance				1f		
† 22	Did the organization include an amount on For	m 000 Bort V line 212			· · · · ·		
	If "Yes," explain the arrangement in Part XIV	III 990, Part A, IIIIe 217			L	Yes	∐ No
	et V Endowment Funds. Compl	ete if organization an	ewered "Vee" to	Form 990 Par	t IV/ line 10		
1.6	Endownient i ands. Compi	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Four	years back
1.	Postering of vegs belongs	(a) Current year	(b) Thorycar	(C) TWO YEARS DACK	(u) Three years bu	(6)1001	years back
	Beginning of year balance						······
	Contributions				+		
	Investment earnings or losses						
	Grants or scholarships				 		
Ð	Other expenditures for facilities						
	and programs		····		-		
	Administrative expenses		***************************************				
	End of year balance			L	<u>.l</u>	1	
2	Provide the estimated percentage of the year e						
	Board designated or quasi-endowment	%					
	Permanent endowment %						
	Term endowment • %						
sa	Are there endowment funds not in the possess	ion of the organization that	are neid and admini	stered for the		۲	
	organization by						Yes No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
_	If "Yes" to 3a(ıı), are the related organizations I	· · · · · · · · · · · · · · · · · · ·				3b	
4				N D-4 V II 40	`		
772	rt VI Investments—Land, Buildin	T T				(4) 5	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other	, , ,	epreciation	(d) Book	value
12	Land	1	<u> </u>	,000		1	0,000
	Buildings		+	, , , , , , , , , , , , , , , , , , , ,			.0,000
	•						
	Leasehold improvements		 				
	Equipment		257	104	40 614	21	6 400
	Other			,104	40,614		6,490
otal	. Add lines 1a-1e (Column (d) should equal Fo	m ээυ, нап х, column (В),	line 10(C))	,	•	2.2	<u>26,490</u>

Schedule D (Form 990) 2008 Independence Voluntee	r fire Dept	12-1250883	Page 3
Part VII Investments—Other Securities. See Form 990), Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of va	
(including name of security)		Cost or end-of-year i	market value
Financial derivatives and other financial products		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Closely-held equity interests			
Other			
	ļ	<u>. </u>	
		<u> </u>	
~		<u></u>	
Total (Column (h) should arrise France 200 Part V and (D) has 40)			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.) ◆ Part VIII Investments—Program Related. See Form 99	0 Part V line 13		
(a) Description of investment type	(b) Book value	(c) Method of va	aluation
(a) Description of investment type	(b) book value	Cost or end-of-year	
		,	
			
		<u> </u>	
		·	
			
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			· · · · · · · · · · · · · · · · · · ·
 			
			
Fotol (Column (b) about a good Form 200 Port V and (D) has 45)		•	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 29		<u>▼ 1</u>	
(a) Description of liability	(b) Amount		
Federal income taxes	(b) Amount		
edera income taxes		-	
	1	1	
	 	1	
	-	1	
	1	1	
	 	†	
		†	
		1	
	1	1	
		1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	·	1	
n Part XIV, provide the text of the footnote to the organization's financial state	ments that reports the organ	nization's liability for	
, production of the second to the organization of mandal state			

uncertain tax positions under FIN 48

<u>Sche</u>	dule D (Form 990) 2008 Independence Volunteer Fire	Dept	72-125088	<u>3</u> _	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	o Financ	ial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	434,852
2	Total expenses (Form 990, Part IX, column (A), line 25)			_2	375,097
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	59,755
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	<u> </u>
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	59,755
<u>Pa</u>	rt XII Reconciliation of Revenue per Audited Financial Statem	ents Wit	<u>th Revenue per Retu</u>		404 050
1	Total revenue, gains, and other support per audited financial statements			1	434,852
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		I		
а	Net unrealized gains on investments	<u> 2a</u>			
b	Donated services and use of facilities	2b			
С	Recovenes of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
0	Add lines 2a through 2d			2e	404 050
3	Subtract line 2e from line 1	1	ſ	3	434,852
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	424 050
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	434,852
	rt XIII Reconciliation of Expenses per Audited Financial Stater	nents W	ith Expenses per Re	1	375 007
1	Total expenses and losses per audited financial statements			1	375,097
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1.	ı		
a	Donated services and use of facilities	2a		-	
b	Prior year adjustments	2b_			
C	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d		1 1	
е	Add lines 2a through 2d			2e	375,097
3	Subtract line 2e from line 1	1	ſ	3	313,091
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
D	Other (Describe in Part XIV)	4b		١	
	Add lines 4a and 4b			4c	375,097
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	313,091
	rt XIV Supplemental Information	1	d 4. Dort IV Junes 1h		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, li		14, Part IV, lines 1b		
and 2	b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d	and 4b			
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Schedule,D (F	orm 990) 2008	Independence	Volunteer	Fire Dept	72-1250883	Page 5
Part XIV	Supplemer	Independence ntal Information (contin	iued)			
					-	
	— -					

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

See separate instructions. Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return Identifying number Independence Volunteer Fire Dept 72-1250883 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if married filing separately, see instructions 5 (b) Cost (business use only) (a) Description of property (c) Elected cost 6 7 Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 13 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.) Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 8,819 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation d) Recovery (a) Classification of property year placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property g 25-year property S/L 25 yrs S/L Residential rental 27 5 yrs MM property 27 <u>5 yrs</u> MM S/I MM Nonresidential real 39 yrs 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 b 12-year 12 yrs 40-year 40 yrs MM S/L Part IV Summary (See instructions.) Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 8,819 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr 23 For assets shown above and placed in service during the current year,

enter the portion of the basis attributable to section 263A costs

721250883 09/24/2010 11 19 Al	м				
Forms . 990 / 990-PF	Mor	tgages and Other	her Notes Payable		
	For calendar year 2008, o	or tax year beginning	, and ending		2008
Name				Employer Identifica	ation Number
Independence Volunteer Fire Dept			72-125088		
Form 990, Par	rt X, Line 23 -	Additional I	nformation		
(1) Equipment 8	Name of lender Building Note	s	Relationship to dis	qualified person	
(2)	<u> </u>				
(3)	<u> </u>			·	
(4)					
(5)	,				
(6)					
(7)					
(8)					
(9)					
(10)	·····		······		
<u></u>		·			
Original amount borrowed	Date of loan	Matunty date	Repayment terms		Interest rate
(1)					
(2)					ļ <u>.</u>
(3)					
(4)					
(5)					<u> </u>
(6)					
(7)					
(8)				·	
(9) (10)				·	
(10)		<u></u>			<u> </u>
·	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
	ecunty provided by borrower		Purpose o	of loan	
(1) Equipment 8	Bulluing				
(3)					
(4)	<u>.</u>				
(5)	_ -				
(6)	··				
(7)					
(8)					
(9)					
(10)					
	<u> </u>				
Consideration furnished by lender			Balance due at beginning of year	Balance due at end of year	
(1)			180,681		73,220
(2)					
(3)					
(4)					
(5)			· · · · · · · · · · · · · · · · · · ·		
(6)					

173,220

180,681

(7) (8) (9) (10)

Totals