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Short Form
Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

2008

Open to Public
Inspection► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
► The organization may have to use a copy of this return to satisfy state reporting requirements.A For the 2008 calendar year, or tax year beginning **APR 1, 2008** and ending **MAR 31, 2009**

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Application pending	C Name of organization FRATERNAL ORDER OF POLICE LODGE #4 SAN JUAN COUNTY Number and street (or P.O. box, if mail is not delivered to street address) 6750 PECOS ST City or town, state or country, and ZIP + 4 FARMINGTON, NM 87402	D Employer identification number 23-7585657
	Room/suite	E Telephone number 5058603300
		F Group Exemption Number ►

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

Website: ► N/A
Organization type (check only one) — 501(c)(5) (insert no.) 4947(a)(1) or 527K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► **\$ 28,998.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

1 Contributions, gifts, grants, and similar amounts received	1
2 Program service revenue including government fees and contracts	2
3 Membership dues and assessments	3 2,135.
4 Investment income	4 26,863.
5a Gross amount from sale of assets other than inventory	5a STATUTE UNIT RECEIVED
b Less: cost or other basis and sales expenses	5b
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from line 6a, check here ► <input type="checkbox"/>	6a APR 10 2014 TPR BRANCH 6b OGDEN
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6c
b Less: direct expenses other than fundraising expenses	7a
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7b
7a Gross sales of inventory, less returns and allowances	7c
b Less: cost of goods sold	8
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	9 28,998.
8 Other revenue (describe ►)	
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	
10 Grants and similar amounts paid (attach schedule)	STMT 6
11 Benefits paid to or for members	STMT 3
12 Salaries, other compensation, and employee benefits	10 6,958.
13 Professional fees and other payments to independent contractors	11 325.
14 Occupancy, rent, utilities, and maintenance	12
15 Printing, publications, postage, and shipping	13 4,000.
16 Other expenses (describe ►)	14 42,670.
17 Total expenses Add lines 10 through 16	15 73.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	16 6,698.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	17 60,724.
20 Other changes in net assets or fund balances (attach explanation)	18 -31,726.
21 Net assets or fund balances at end of year. Combine lines 18 through 20	19 1,349,381.
	20 -151,799.
	21 1,165,856.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

22 Cash, savings, and investments	(A) Beginning of year 113,849.22	(B) End of year 141,779.
23 Land and buildings	595,954.23	580,192.
24 Other assets (describe ►)	639,578.24	443,885.
25 Total assets	1,349,381.25	1,165,856.
26 Total liabilities (describe ►)	0.26	0.
27 Net assets or fund balances (line 25 of column (B) must agree with line 21)	1,349,381.27	1,165,856.

APR 10 2014 STATUTE CLEARED 0436522542

Revenue 0436522542
1201106 2014

Expenses

Net Assets

RECEIVED OSC 208
APR 10 2014
IRS OGDEN UTAH
OOF's 1 Dept BB

SEE STATEMENT 5

SEE STATEMENT 1

SEE STATEMENT 4

FRATERNAL ORDER OF POLICE
LODGE #4 SAN JUAN COUNTY

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Part V Other Information (Note the statement requirements in the instructions for Part VI)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/A
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36	X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0.		
b Did the organization file Form 1120-POL for this year?	37b	X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:	39a	N/A
a Initiation fees and capital contributions included on line 9	39b	N/A
b Gross receipts, included on line 9, for public use of club facilities		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A	40b	N/A
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	40c	0.
d Enter amount of tax on line 40c reimbursed by the organization	40d	0.
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed. ► NM		
42 a The books are in care of ► JACK RICHARDS Telephone no. ► 505-860-3300 Located at ► 6750 PELOS STREET, FARMINGTON, NM ZIP + 4 ► 87402		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Bank and Financial Accounts.	42b	X
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► _____	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 N/A		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Form 990-EZ (2008)

**FRATERNAL ORDER OF POLICE
LODGE #4 SAN JUAN COUNTY**

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Part VI **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

<p>46 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</p> <p>47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II</p> <p>48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</p> <p>49a Did the organization make any transfers to an exempt non-charitable related organization?</p> <p>b If "Yes," was the related organization(s) a section 527 organization?</p> <p>50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Yes</td><td>No</td></tr> <tr><td>46</td><td></td></tr> <tr><td>47</td><td></td></tr> <tr><td>48</td><td></td></tr> <tr><td>49a</td><td></td></tr> <tr><td>49b</td><td></td></tr> </table>	Yes	No	46		47		48		49a		49b	
Yes	No												
46													
47													
48													
49a													
49b													

(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Total number of other employees paid over \$100,000 ►				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000 N/A	(b) Type of service	(c) Compensation
Total number of other independent contractors each receiving over \$100,000 ►		

Sign Here ► Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer ► *Jack Richards* Date 11-06-2012

► JACK RICHARDS, TREASURER
Type or print name and title

Paid Preparer's Use Only	Preparer's signature ► <i>Mark H.</i>	Date 11-6-12	Check if self-employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self employed), address, and ZIP + 4 ► THE ACCOUNTING FIRM, INC. 3300 N. BUTLER FARMINGTON, NM 87401		EIN ► <input type="checkbox"/>	Phone ► <input type="checkbox"/> no. 505-326-1401

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

832174
12-17-08

10001106 131396 FRAT5657

2008.05000 FRATERNAL ORDER OF POLICE L FRAT5651

FORM 990-EZ	OTHER EXPENSES	STATEMENT 1
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DESCRIPTION	AMOUNT
CONTINUING EDUCATION OFFERED TO MEMBERS	5,255.
MEALS	221.
OFFICE SUPPLIES	43.
BANK CHARGES	16.
LICENSES AND FEES	60.
FLOWERS FOR FUNERALS AND EVENTS	315.
EVENT EXPENSES	191.
DEPRECIATION	597.
TOTAL TO FORM 990-EZ, LINE 16	6,698.

FORM 990-EZ	OTHER ASSETS	STATEMENT 2
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
NOTE RECEIVABLE - FARNSWORTH DEVELOPMENT	140,621.	0.
INVESTMENTS	498,957.	443,885.
TOTAL TO FORM 990-EZ, LINE 24	639,578.	443,885.

FORM 990-EZ

PAYMENTS TO AFFILIATES

STATEMENT 3

AFFILIATE'S NAME

AFFILIATES ADDRESS

NEW MEXICO FRATERNAL ORDER OF POLICE

1420 CARLISLE BLVD, NE
ALBUQUERQUE, NM 87110

PURPOSE OF PAYMENT

AMOUNT

DUES TO STATE LODGE

1,000.

AFFILIATE'S NAME

AFFILIATES ADDRESS

FRATERNAL ORDER OF POLICE GRAND LODGE

701 MARRIOTT DRIVE
NASHVILLE, TN 37214

PURPOSE OF PAYMENT

AMOUNT

DUES TO NATIONAL LODGE

583.

TOTAL INCLUDED ON FORM 990-EZ, LINE 10

1,583.

FORM 990-EZ

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

STATEMENT 4

DESCRIPTION

AMOUNT

UNREALIZED LOSSES ON INVESTMENTS

-151,799.

TOTAL TO FORM 990-EZ, LINE 20

-151,799.

FORM 990-EZ

OCCUPANCY, RENT, UTILITIES AND MAINTENANCE

STATEMENT 5

DESCRIPTION

AMOUNT

DEPRECIATION
OTHER EXPENSES18,999.
23,671.

TOTAL TO FORM 990-EZ, LINE 14

42,670.

FORM 990-EZ

CASH GRANTS AND ALLOCATIONS

STATEMENT 6

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
FUNERAL EXPENSES GHISH	NONE	75.
FUNERAL EXPENSES JACKIE WARD 36 ROAD 3063 AZTEC, NM 87410	MEMBER'S GRANDDAUGHTER	300.
DONATION NEW MEXICO FRATERNAL ORDER OF POLICE 1420 CARLISLE BLVD NE ALBUQUERQUE, NM 87110	AFFILIATE	5,000.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		5,375.

FORM 990-EZ

REASONABLE CAUSE FOR LATE FILING

STATEMENT

7

THERE WAS A LACK OF PROFESSIONAL KNOWLEDGE OF FILING REQUIREMENTS. THEREFORE, THE ORGANIZATION DID NOT FILE THE RETURN AS REQUIRED. THIS RESULTED IN THE AUTOMATIC REVOCATION OF EXEMPT STATUS OF THIS ORGANIZATION BECAUSE OF NON-FILING 3 YEARS IN A ROW.

ONCE THE ORGANIZATION WAS INFORMED ABOUT THE REVOCATION, IT VOTED ON AND ENGAGED A NEW PROFESSIONAL TAX PRACTITIONER TO RE-INSTITUTE THE TAX-EXEMPT STATUS. THEREFORE, THIS RETURN AND FORM 1024 ARE BEING FILED. THE ORGANIZATION FEELS WITH THIS NEW BETTER RELIANCE ON PROFESSIONALS, IT WILL NOT MISS FUTURE TAX FILING DEADLINES.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 8

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? [] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

THE PURPOSES FOR WHICH THIS NON-PROFIT IS ORGANIZED ARE: TO SERVE LAW ENFORCEMENT OFFICERS THROUGH IMPROVEMENT OF THE PROFESSION AND THE PROTECTION OF THE RIGHTS OF THE OFFICERS; TO EDUCATE THE PUBLIC AND LEGISLATORS TO LOCAL PROBLEMS AND CIVIL INJUSTICES; TO IMPROVE THE LEVEL OF LAW ENFORCEMENT AND TO PRESERVE AND PROTECT INDIVIDUAL RIGHTS; TO PROVIDE EDUCATIONAL PROGRAMS TO WARN THE PUBLIC OF CRIMES AND HOW TO COMBAT THEM; TO HELP CREATE UNDERSTANDING AND PROGRESS IN THE RELATIONSHIP BETWEEN LAW ENFORCEMENT OFFICERS AND THE COMMUNITY; AND TO EXERCISE ALL POWERS GRANTED UNDER THE LAWS OF THE STATE OF NEW MEXICO TO NON-PROFIT CORPORATIONS.

FORM 990-EZ

OTHER PROGRAM SERVICES

STATEMENT 10

DESCRIPTION

GRANTS

EXPENSES

PROVIDE FACILITES FOR POLITICAL FORUMS.

TOTAL TO FORM 990-EZ, LINE 31