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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 JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable	C Name of organization <b>Policeman's Benevolent Association, Local No. 24, Inc.</b>	D Employer identification number <b>52-1760761</b>
<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 type="checkbox"/> Application pending	Number and street (or P.O. box, if mail is not delivered to street address) <b>520 N Annapolis Avenue</b>	Room/suite <b>609-347-5285</b>
	City or town, state or country, and ZIP + 4 <b>Atlantic City, NJ 08401</b>	F Group Exemption Number ►

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

G Accounting method:  Cash  Accrual  
Other (specify) ►

I Website: ► **N/A**

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

K Check ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► **\$ 399023.**

## 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
4 Investment income	4
5a Gross amount from sale of assets other than inventory	5a
b Less: cost or other basis and sales expenses	5b
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a
b Less: direct expenses other than fundraising expenses	6b
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c
7a Gross sales of inventory, less returns and allowances	7a
b Less: cost of goods sold	7b
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
8 Other revenue (describe ► <b>Salary Reimbursement</b> )	8
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9
10 Grants and similar amounts paid (attach schedule)	10
11 Benefits paid to or for members	11
12 Salaries, other compensation, and employee benefits	12
13 Professional fees and other payments to independent contractors	13
14 Occupancy, rent, utilities, and maintenance	14
15 Printing, publications, postage, and shipping	15
16 Other expenses (describe ► <b>90 NAR</b> )	16
17 Total expenses. Add lines 10 through 16	17
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19
20 Other changes in net assets or fund balances (attach explanation)	20
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21

See Statement 2

See Statement 1

## 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.)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	346166.22	404714.
23 Land and buildings	39827.23	51328.
24 Other assets (describe ► <b>Prepaid Expense</b> )	0.24	141.
25 Total assets	385993.25	456183.
26 Total liabilities (describe ► <b>Payroll Tax Payable</b> )	3820.26	1588.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	382173.27	454595.

Policeman's Benevolent Association,  
Local No. 24, Inc.

**Form 990-EZ (2008)**

Local No. 24, Inc.

52-1760761

Page 2

**Part III Statement of Program Service Accomplishments** (See the instructions for Part III.)

What is the organization's primary exempt purpose? **See Statement 4**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

**Expenses**  
required for 501(c)(3)  
and (4) organizations and  
47(a)(1) trusts; optional  
others.)

28 Programs services provide death benefits to members families and group insurance for members.

(Grants \$  ) If this amount includes foreign grants, check here

28a

29 Contributions to various local charities and local police departments.

(Grants \$  ) If this amount includes foreign grants, check here

29a

30

(Grants \$  ) If this amount includes foreign grants, check here

302

**31 Other program services (attach schedule)**

(Grants \$  ) If this amount includes foreign grants, check here

312

**32 Total program service expenses (add lines 28a through 31a)**

32

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

832172  
12-17-08

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Form 990-EZ (2008)

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 33  Yes  No

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  Yes  No

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. 35a  Yes  No

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements? 35b  N/A

b If "Yes," has it filed a tax return on Form 990-T for this year? 36  Yes  No

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N 36  Yes  No

37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0. 37b  Yes  No

b Did the organization file Form 1120-POL for this year? 38a  Yes  No

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? 38b  N/A

b If "Yes," complete Schedule L, Part II and enter the total amount involved 39  Yes  No

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 40a  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

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 40b  Yes  No

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  Yes  No

41 List the states with which a copy of this return is filed. ► NJ42a The books are in care of ► Treasurer Telephone no. ► 609-347-5285Located at ► 520 N. Annapolis Ave, Atlantic City, NJ ZIP + 4 ► 08401b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b  Yes  NoIf "Yes," enter the name of the foreign country: ► 42c  Yes  No

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42d  Yes  NoIf "Yes," enter the name of the foreign country: ► 42e  Yes  No43 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/A44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44  Yes  No45 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  Yes  No

**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

		Yes	No
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	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization(s) a section 527 organization?	49b	
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."		

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."

N/A

Total number of other independent contractors each receiving over \$100,000

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.

12-28-09

<p><b>Sign Here</b></p> <p>► </p>	<p>correct and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge</p> <p>► <b>Signature of officer</b></p> <p>► <b>David Davidson, Jr., President</b></p> <p>Type or print name and title</p>	<p>12-28-01</p> <p>Date</p>
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Paid Preparer's Use Only	Preparer's signature ►  <b>CPA</b>	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instr.)
		12/22/09		
Firm's name (or yours if self-employed), address, and ZIP + 4	Capaldi Reynolds & Pelosi, PA 332 Tilton Road Northfield, NJ 08225			EN ► Phone ► no. (609) 641-4000

May the IRS discuss this return with the preparer shown above? See instructions

Yes  No

**Form 990-EZ (2008)**

Form 990-EZ

Other Expenses

Statement 1

Description	Amount
Annual report	150.
Auto expense	3438.
Awards and trophies	1920.
Banquet expense	4579.
Christmas party	2332.
Convention	6082.
Death benefits	6000.
Dues expense	39523.
Equipment rental	130.
Fees	180.
Flowers and gifts	4021.
Insurance	54008.
Penalties	389.
Meals and entertainment	1913.
Meeting	2130.
Office expense	10515.
Office supplies	27.
PBA cards	787.
Picnic	14712.
Retirement benefits	2500.
Payroll taxes	4773.
Telephone	7183.
Travel	3350.
Uniforms	400.
Total to Form 990-EZ, line 16	171042.

Form 990-EZ

Occupancy, Rent, Utilities and Maintenance

Statement 2

Description	Amount
Depreciation	8340.
Other Expenses	1977.
Total to Form 990-EZ, line 14	10317.

FORM 990-EZ

Information Regarding Transfers  
Associated with Personal Benefit Contracts

Statement 3

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 primary purpose is to provide various benefits to its members and their families.

Form 4562

Depreciation and Amortization 990EZ  
(Including Information on Listed Property)

OMB No 1545-0172

2008

Attachment  
Sequence No 67Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

Policeman's Benevolent Association,  
Local No. 24, Inc.

Business or activity to which this form relates

Identifying number

Form 990-EZ Page 1

52-1760761

## 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

1 Maximum amount See the instructions for a higher limit for certain businesses	1	250000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	800000.
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

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	
9 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	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	13	

Note: Do not use Part II or Part III below for listed property instead, use Part V.

## Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

## Part III 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	2181.
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		

## Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1574.	5 Yrs	HY	200DB	315.
c 7-year property		5967.	7 Yrs	HY	200DB	852.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27 5 yrs.	MM	S/L	
	/		27 5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
		See Statement 5		MM	S/L	192.

## 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		S/L	
c 40-year	/		40 yrs	MM	S/L	

## Part IV Summary (See instructions)

21 Listed property. Enter amount from line 28	21	4800.
22 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 instr	22	8340.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Policeman's Benevolent Association,  
Local No. 24, Inc.**

Form 4562 (2008)

52-1760761 Page 2

**Part V** **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 2a, 2b, columns 4 through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for hints for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

**26** Property used more than 50% in a qualified business use

Vehicle	041108	100.00 %	29905.	18945.5	Yrs	200DB-MO	4800.
		%					
		%					
		%					

**27** Property used 50% or less in a qualified business use

%	%	S/L -	S/L -	S/L -

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

**29** Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Vehicle	Vehicle										
31												
32												
33												
34	Yes	No										
35												
36												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI	Amortization				
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage

**42** Amortization of costs that begins during your 2008 tax year:

43	Amortization of costs that began before your 2008 tax year	43
44	Total. Add amounts in column (f). See the instructions for where to report	44

Form 4562 Totals	Nonresidential Real Property	Statement	5
(b) Month/Year	(c) Basis	(d) Recovery Period	(g) Depreciation Deduction
10/08	2710.	39 YEARS	49.
11/08	4562.	39 YEARS	73.
12/08	5027.	39 YEARS	70.
Totals 4562 L19i	12299.		192.

Application for Extension of Time To File an  
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only *All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization <b>Policeman's Benevolent Association, Local No. 24, Inc.</b>	Employer identification number <b>52-1760761</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. <b>520 N Annapolis Avenue</b>	<b>COPY</b>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>Atlantic City, NJ 08401</b>	

Check type of return to be filed(file a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input checked="" type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

**Treasurer**

- The books are in the care of ► **520 N. Annapolis Ave, Atlantic City, NJ - 08401**  
Telephone No ► **609-347-5285** FAX No ►
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **February 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
►  calendar year  or  
►  tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ <b>N/A</b>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)