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

|            |  | Yes        | No                                  |
|------------|--|------------|-------------------------------------|
| <b>33</b>  | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .   |            | <input checked="" type="checkbox"/> |
| <b>34</b>  | Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .   |            | <input checked="" type="checkbox"/> |
| <b>35</b>  | 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 why the organization did not report the income on Form 990-T.   |            |                                     |
| <b>a</b>   | Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .   |            | <input checked="" type="checkbox"/> |
| <b>b</b>   | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .  |            | <input checked="" type="checkbox"/> |
| <b>36</b>  | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .  |            | <input checked="" type="checkbox"/> |
| <b>37a</b> | Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> _____   |            |                                     |
| <b>b</b>   | Did the organization file <b>Form 1120-POL</b> for this year? . . . . .  |            | <input checked="" type="checkbox"/> |
| <b>38a</b> | 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 outstanding at the end of the period covered by this return? . . . . .   |            | <input checked="" type="checkbox"/> |
| <b>b</b>   | If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .   | <b>38b</b> | N/A                                 |
| <b>39</b>  | Section 501(c)(7) organizations. Enter:  |            |                                     |
| <b>a</b>   | Initiation fees and capital contributions included on line 9 . . . . .   | <b>39a</b> | N/A                                 |
| <b>a</b>   | Gross receipts, included on line 9, for public use of club facilities . . . . .  | <b>39b</b> | N/A                                 |
| <b>40a</b> | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____   |            |                                     |
| <b>b</b>   | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . . | <b>40b</b> |                                     |
| <b>c</b>   | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____  |            | N/A                                 |
| <b>d</b>   | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____  |            | N/A                                 |
| <b>e</b>   | 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. . . . .  | <b>40e</b> | <input checked="" type="checkbox"/> |
| <b>41</b>  | List the states with which a copy of this return is filed. ▶ <b>Rhode Island</b>   |            |                                     |
| <b>42a</b> | The organization's books are in care of ▶ <b>Stephen Brown</b> Telephone no. ▶ <b>401-886-8639</b><br>Located at ▶ <b>206 Riverside Dr. Wakefield, RI</b> ZIP + 4 ▶ <b>02879</b>   |            |                                     |
| <b>b</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)? . . . . .   |            | <input checked="" type="checkbox"/> |
|            | If "Yes," enter the name of the foreign country: ▶ _____<br>See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .  | <b>42b</b> |                                     |
| <b>c</b>   | At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .   | <b>42c</b> | <input checked="" type="checkbox"/> |
|            | If "Yes," enter the name of the foreign country: ▶ _____   |            |                                     |
| <b>43</b>  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____  |            |                                     |
| <b>44</b>  | Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .   | <b>44</b>  | <input checked="" type="checkbox"/> |
| <b>45</b>  | 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 . . . . .  | <b>45</b>  | <input checked="" type="checkbox"/> |

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| <b>46</b> 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 . . . . . | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 50** Complete this table for the organization's 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."

| (a) Name and address of each employee paid more than \$100,000 | (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 |
|--|--|------------------|---|--|
| NONE   |  |                  |   |  |
|  |  |                  |   |  |
|  |  |                  |   |  |
|  |  |                  |   |  |
|  |  |                  |   |  |

**f** Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_

**51** Complete this table for the organization's 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 | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| NONE   |                     |                  |
|  |                     |                  |
|  |                     |                  |
|  |                     |                  |
|  |                     |                  |

**d** 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.

**Sign Here**

Signature of officer: Stephan J Brown Date: 4/8/10

Type or print name and title: Stephan Brown, Treasurer

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**Paid Preparer's Use Only**

Preparer's signature: Armanderson Date: 3-30-10 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: Anne Anderson EIN: \_\_\_\_\_

190 Cedar Ave. East Greenwich, RI 02818 Phone no: 401-884-2380

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

Form 990-EZ (2009)

**Attachment 1**

Form 990, 2009

International Brotherhood of Police Officers 05-0429702

Part I, number 6 Special Events and Activities

|                   |                 |                  |
|-------------------|-----------------|------------------|
| Golf Tournament : | Gross Revenue   | \$ 9,075         |
|                   | Direct Expenses | <u>\$ 10,205</u> |
|                   | Net Loss        | (\$ 1,130)       |

## Attachment 2

Form 990, 2009

International Brotherhood of Police Officers 05-0429702

### Part I, number 10 Schedule of Grants and similar amounts paid :

|   |                   |
|---|-------------------|
| Susan Komen 3 day Breast Cancer Walk            | \$ 250.00         |
| American Cancer Society Camp Hope               | \$1,500.00        |
| East Greenwich High School Athletic Fields Fund | \$1,000.00        |
| East Greenwich High School Gilday Scholarship   | \$1,000.00        |
| Tom Cabral Scholarship Fund                     | \$ 150.00         |
| North Kingstown American Little League          | \$ 400.00         |
| Special Olympics                                | \$ 100.00         |
| Cranston Police IBPO                            | \$ 480.00         |
| Boy Scouts Troop 11                             | \$ 500.00         |
| Memorial Gifts Deceased Members                 | \$ 840.00         |
|   | <u>\$6,220.00</u> |

Attachment # 3

Form 990

International Brotherhood of Police Officers (IBPO Local 472)

# 05 - 0429702

Year Ended 12.31.09

Part III: Organizations primary exempt purpose

**EAST GREENWICH POLICE**

**IBPO**

**LOCAL 472**

**PREAMBLE**

The object and purpose of the International Brotherhood of Police Officers are as follows:

To foster and adopt ways and means for the continuous improvement of the working and living standards of the Local affiliates with this Brotherhood; to secure legislation in the interests of our members; to bring about higher wages, shorter hours and better working conditions for them; to influence public opinion, by peaceful and legal methods, in favor of our organizations and all organized labor generally, to promote, encourage and to bring into existence satisfactory contractual relationships with Municipal, State, and Federal governments from which the members of our affiliates are drawn; all for the purpose of stabilizing employment conditions to the mutual advantage of both government and our members.