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Form **990-EZ**

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) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(bX13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Open to Public Inspection

| | A F | or th | ie 2 <u>009 ca</u> | lendar ye | ar, or tax yea | ar beginning | | | | and end | ing | | | | |
|--------------|---------------|--|--------------------|-------------------------|------------------------|-----------------------|---------------------------------------|---------------------------------------|-------------|-----------------------------------|----------------|-------------|-------------------|---|---------------------------|
| 8 | ap | heck if oplicab | le Please | C Name o | of organization | | | | | | | D Emp | loyer i | dentification r | number |
| | ĽX. | Addres change Name | label or | 200 | | 1 MT 1 1 1 MT | 2 4 4177 | | ^-T | | | | | 50454 0 | |
| | <u> </u> |]Name changi Initial | type | | | | not delivered to stre | | | | Room/suite | | | 724513 number | |
| | | Term | | | • | - | not delivered to still | set audi ess | , | [| NOOHII/SUILE | | • | | 1 1 |
| | \vdash | Terminated Instructions P.O. BOX 622 City or town, state or country, and ZIP + 4 F (| | | | | | | | 609-485-5244 F Group Exemption | | | | | |
| | 늗 | returr Applica pendin | 1 1 | | FIELD, | - | | | | | | | up Exer nber ▶ | • | |
| - | | | | | | | t charitable trusts r | nuct attach | 2 0000 | lotod | G Accour | | | | X Accrual |
| | | - 066 | | (5) Olyaniz | | le A (Form 990 or | | nusi allaun | a comp | icicu | Other (| _ | | oasii | LA_ /toordal |
| ī | W | /ehsit | te: N/ | 'A | | | , , , , , , , , , , , , , , , , , , , | | | | H Check | | _ | he organizatio | n is not |
| · | | | | | ly one) — X | 7 501(c) (3) | ◀ (insert no.) | 4947(a)(| 1) or | 527 | | | | ule B (Form 990, | |
| Ī | | heck | | | • | | ipporting organization | | | | | | | | |
| | | | | | | | inization chooses to | | | | | | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Ī | L A | dd lın | es 5b, 6b, a | nd 7b, to lii | ne 9 to determi | ne gross receipts; i | f \$500,000 or more, | file Form 9 | 90 inste | ad of Forr | n 990-EZ | | ▶ \$ | 10 | 06,645. |
| [| Pa | rt I | Reve | nue, Exp | oenses, ar | nd Changes i | n Net Assets | or Func | l Bala | nces (S | See the instri | uctions | for Par | rt I.) | |
| | | 1 | Contribution | ons, gifts, g | rants, and sımı | lar amounts receive | ed | | | | | | _1_ | | 67,621. |
| | | 2 | Program s | ervice revei | nue including g | overnment fees an | d contracts | | | | | | 2 | | <u>33,975.</u> |
| _ | ļ | 3 | Membersh | ip dues and | d assessments | | | | | | | | 3 | | |
| 29 | | 4 | Investmen | | | | | | 1 1 | | | _ | 4 | | 2,340. |
| | | 5 a | | | | her than inventory | STM | т 2 | 5a | | 2,7 | | . | | |
| ∠&, | | b | | | sis and sales e | • | 0.1 51. | | <u>5b</u> | | 3,0 | 63. | | | 254 |
| \lesssim l | 6 | Ď | n 11 w 11 11 | | 1 | | Subtract line 5b from | | - 4 | | | | 5c | | <u>-354.</u> |
| MAN | בֻ ק | 4 1 | | | _ 1 . | ite applicable parts | of Schedule G). If a | - | s from (| jaming, c | neck nere | `[] | | | |
| 25 | E2-Bekenne | a | | nue (not in | | | of contribution | JIIS | 6a | | | | . [| | |
| | 2-6 | _ ,∆ | VPR' 2'0 | '' 2'010 '' 8ynansas | diberthan fun | draising expenses | | | 6b | | | | . | | |
| 씤 | ш | | -Nat-incom | n-or-(loss) f | rom special evi | ents and activities (| Subtract line 6b froi | m line 6a) | 00 | | | | 6c | | |
| SCANNED | | <i>T</i> 1 // | 7 M // II M | a unk | | s and allowances | Cabillact iiilo Ca ii Ci | | 7a | | | İ | | | |
| ₹ | === | b | | of goods s | | | | | 7b | | | | . | | |
| . <u>Q</u> | | C | Gross prof | it or (loss) | from sales of ir | nventory (Subtract I | ine 7b from line 7a) | | | | | | 7c | | |
| עש | | 8 | Other reve | nue (descri | be ► | | | | | | |)[| 8 | | |
| | | 9_ | Total reve | nue. Add li | nes 1, 2, 3, 4, 5 | c, 6c, 7c, and 8 | | | | | | > | 9 | 1 | 03,582. |
| | ŀ | 10 | Grants and | l sımılar am | ounts paid (att | ach schedule) | | | | | | ļ | 10 | | |
| | l | 11 | Benefits pa | aid to or for | members | | | | | | | ļ | 11 | | |
| | ် ရှိ | 12 | | | | mployee benefits | | | | | | - } | 12 | | |
| | cbenses | 13 | | | | s to independent co | ontractors | | | | | } | 13 | | 140. |
| | х Б | 14 | | | ies, and mainte | | | | | | | } | 14 | | 2 012 |
| | | 15 | | | postage, and s | snipping | | - | कक्त | am a m t | MISSIM | , . | 15 | | 3,812. |
| | | 16 17 | | nses (desc | lines 10 throug | | | <u> </u> | | TATE | MENT | 1) | 16 | | <u>45,257.</u> 49,209. |
| - | - | 18 | | | | ract line 17 from lin | | | | | | | 17 18 | | 54,373. |
| | <u>ي</u> | 19 | | | | | ine 27, column (A)) | | | | | | -10 | | <u> </u> |
| | lss(| | | | | reported on prior ye | | | | | | | 19 | 2: | 11,021. |
| | Net Assets | 20 | | | | balances (attach ex | • | S | EE S | STATE | MENT | 3 | 20 | | 13,923. |
| | Ž | 21 | | - | | f year. Combine line | | _ | " | | | • | 21 | | 79,317. |
| Ī | Pa | rt II | | | ets. If Total a | ssets on line 25, co | lumn (B) are \$1,250 | 0,000 or mo | ore, file f | orm 990 | instead of Fo | orm 990 |)-EZ. | | |
| | | | | | (See the instr | uctions for Part II.) | | · · · · · · · · · · · · · · · · · · · | | (A) | Beginning o | f year | | (B) End | of year |
| | 22 | Cas | h, savings, | and investr | ments | | | | | | 172, | 007 | . 22 | 2: | 25,672. |
| | 23 | | d and build | - | | | | | | | | | 23 | | |
| | 24 | | | escribe ► | MARKET | ABLE SEC | JRITIES | |) | | | 014 | | | <u>53,645.</u> |
| | 25 | | al assets | | _ | | | | | | 211, | | | 2' | <u>79,317.</u> |
| | 26 | | al liabilitie: | - | | | | |) | | - 044 | | . 26 | | 0. |
| - | 27 9321 | | | _ | | olumn (B) must ag | | | | L | 211, | <u>UZI</u> | . 27 | | 79,317. |
| | 9321 02-08 | 3-10 | LHA F | or Privacy . | ACT and Paper | work neduction Act | t Notice, see the se | parate inst | ructions | | | | | Form 99 | 90-EZ (2009) |



| What Des | nt III Statement of Program Service Accomplishment is the organization's primary exempt purpose? SEE STATEMENT cribe what was achieved in carrying out the organization's exempt purpose provided, the number of persons benefited, and other relevant MEMORIAL BRUNCH FOR FAMILIES OF FAI | nts (See the instructions for 5 poses. In a clear and concit information for each prog | Part III.) ise manner, descri | be | Required fo and 501(c)(4 | penses r section 501(c(X3)) organizations and 7(a(X1) trusts, optional |
|----------|--|--|--|------------------------------------|--|---|
| 29 | (Grants \$) If this amount includes foreign of | grants, check here | > | 2 2 | .8a | 43,517. |
| 30 | (Grants \$) If this amount includes foreign of | grants, check here | > | | .9a | |
| | (Grants \$) If this amount includes foreign of Other program services (attach schedule) (Grants \$) If this amount includes foreign of Total program service expenses (add lines 28a through 31a) | grants, check here | > | | 30a 31a 32 | 43,517. |
| P | art IV List of Officers, Directors, Trustees, and Key E (a) Name and address | (b) Title and average hours per week devoted to position | (c) Compensation (If not paid, enter -0) | (d) Con to en benefit def | nstructions f tributions aployee t plans & erred ensation | (e) Expense account and other allowances |
| P. | SEPH A CORBO JR O. BOX 622 , NORTHFIELD, NJ 08225 RRY SWEENEY | PRESIDENT 0.00 VICE-PRES | 0. | Comp | 0. | 0. |
| KE | O. BOX 622 , NORTHFIELD, NJ 08225 NNETH BLANKENBUEHLER O. BOX 495 , LINWOOD, NJ 08221 | 0.00 TREASURER 0.00 | 0. | | 0. | 0. |
| SP P. | LLY ROMONOWSKI O. BOX 622 , NORTHFIELD, NJ 08225 FF DYE | SECRETARY | 0. | | 0. | 0. |
| | O. BOX 622, NORTHFIELD, NJ 08225 | 0.00 | 0. | | 0. | 0. |
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| 932 | 172 8-10 | | | | Form | 990-EZ (2009) |

| | The state of the statement requirements in the instructions for Fact V | | 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 | 163 | X |
| 34 | Were any changes made to the organizing or governing documents? 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 | 04 | | |
| | reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. | | | |
| а | 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? | 35a | i | х |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 35b | N/ | |
| 36 | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," | 000 | -11/ | |
| • | complete applicable parts of Sch. N | 36 | | x |
| 37 a | Enter amount of political expenditures, direct or indirect, as described in the instructions. | $\overline{}$ | | |
| | Did the organization file Form 1120-POL for this year? | 37b | | x |
| | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made | 370 | | |
| 004 | in a prior year and still outstanding at the end of the period covered by this return? | 38a | | х |
| h | If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A | 30a | | |
| 39 | Section 501(c)(7) organizations. Enter: | † | | |
| | Initiation fees and capital contributions included on line 9 39a N/A | | | |
| | Gross receipts, included on line 9, for public use of club facilities 39b N/A | - | | |
| | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: | 1 | | ŀ |
| 700 | section 4911 | | | |
| h | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the | | | |
| U | 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 | 40b | | х |
| • | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers | 400 | - | <u> </u> |
| · | or disqualified persons during the year under sections 4912, 4955, and 4958 | | | |
| 4 | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the | | | |
| u | organization | | | |
| | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter | | | ļ |
| - | transaction? If "Yes," complete Form 8886-T | 400 | | X |
| 41 | List the states with which a copy of this return is filed. NJ | 40e | | <u> </u> |
| | The organization's books are in care of ► KENNETH BLANKENBUEHLER Telephone no. ► 609-92 | 7_0 | 116 | |
| 42 a | Located at ▶ 7 LUIS DRIVE, EGG HARBOR TOWNSHIP, NJ | | | |
| . | At any time during the calendar year, did the organization have an interest in or a signature or other authority | 043 | 4-/ | 04/ |
| υ | over a financial account in a foreign country (such as a bank account, securities account, or other financial | | Vac | No |
| | account)? | 406 | 163 | X |
| | If "Yes," enter the name of the foreign country: | 42b | | |
| | | | | |
| _ | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U.S.? | 40- | | |
| C | | 42c | 1 | X |
| 40 | If "Yes," enter the name of the foreign country: | | | |
| 43 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here | NT / N | | نـــا |
| | and enter the amount of tax-exempt interest received or accrued during the tax year | N/A | <u> </u> | |
| | | | V | I N 1. |
| | Delthe second of the first term of the first ter | | Yes | No |
| 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 | <u> </u> | X |
| | | Form 9 | 190-EZ | (2009) |

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

| 46 | Did the organization engage in direct or indirect political campaign activities of | on behalf of or in opposition to o | candidates for publi | c | | Y es | | |
|---|--|--|--|---|--------------|------------------------|-------------|--|
| | office? If "Yes," complete Schedule C, Part I | | | - | 46 | | X | |
| 47 | Did the organization engage in lobbying activities? If "Yes," complete Sche | | | _ | 47 | | X | |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | | | | | | | | |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | | | | | | | | |
| | If "Yes," was the related organization a section 527 organization? | | | L | 49b | | Щ_ | |
| 50 | Complete this table for the organization's five highest compensated employee | | s, trustees and key | employees) who ea | ch rece | ived r | nore | |
| | 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 NONE | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e) | Expe count allow | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | - | | | | | | |
| f | Total number of other employees paid over \$100,000 | • | | | | | | |
| 51 | Complete this table for the organization's five highest compensated independ organization. If there is none, enter "None." NONE | | Y | | | | | |
| | (a) Name and address of each independent contractor paid more | tnan \$100,000 | (b) Type of se | ervice (c |) Comp | ensai | 1011 | |
| | | | | | | | | |
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| | | | | | | | | |
| | ······································ | | | | | | | |
| | | | | | | | | |
| d | Total number of other independent contractors each receiving over \$100,000 |) | > | | | | | |
| Sigr | | companying schedules and staterner nformation of which preparer has any | nts, and to the best of r knowledge | my knowledge and bei | ef, it is to | rue, | | |
| Her | Signature of office. NENWETH C BLANKENBUEHUER Type or print name and title | | | Date | | | | |
| | arer's budiey of hered of | 3/30/10 em | oloyed 🛌 🔲 | eparer's identifying nu | 3368 | 320 | | |
| | firm s name (or yours of the self-employed) 327 CENTRAL AVENUE | COMPANY, CPA'S | Pho | <u>▶ 22-22;</u> ne ▶ | 3266 | 6 | | |
| | address, and ZIP+4 LINWOOD, NEW JERSEY 08 | 221 | no. | 609-9 | | 222 | 2 | |
| May | the IRS discuss this return with the preparer shown above? See instructions | · · · · · · · · · · · · · · · · · · · | <u>-</u> | ▶ □ | Yes | | No | |
| | | | | F | orm 99 | 0-EZ | (2009) | |

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

200 CLUB OF ATLANTIC & CAPE MAY COUNTIES

2009

Open to Public Inspection

Name of the organization

Employer identification number

22-2724513

| Part I | Reason | for Public Char | ity Status (All organiz | ations mus | st complet | e this part | .) See inst | ructions | | |
|---------|--------------------|---------------------------------------|-------------------------------|--------------------------------|---------------|------------------------|--------------|--------------------------|-----------------------|---------------------------------------|
| he orga | inization is not a | private foundation | because it is (For lines 1 | through 1 | 1, check | only one b | ox) | | | · · · · · · · · · · · · · · · · · · · |
| 1 🗆 | A church, co | nvention of churches | s, or association of churc | ches desci | ribed in se | ction 170 | (b)(1)(A)(i) | | | |
| 2 | A school des | cribed in section 17 | 0(b)(1)(A)(ii). (Attach Sci | hedule E) | | | | | | |
| з 🗔 | 7 | | tal service organization of | | n section | 170(b)(1)(| A)(iii). | | | |
| 4 | - | • | operated in conjunction | | | | | (b)(1)(A)(ii | i), Enter t | he hospital's name. |
| | city, and stat | _ | | • | | | | | • | , , |
| 5 | n . | | benefit of a college or ur | niversity ov | vned or or | erated by | a governr | nental uni | t describe | ed in |
| • | - | (b)(1)(A)(iv), (Comple | | vo.o.cy or | | oratoa by | a goronn | nontal on | . 40001101 | 2 3 |
| 6 | - | | ent or governmental unit | docomboo | l in contin | n 170/h\/1 | VAV | | | |
| 7 X | 7 | | eives a substantial part (| | | | | r from tha | gonoral r | nublic described in |
| 1 4 | | · · · · · · · · · · · · · · · · · · · | • | oi ita aupp | OIT HOIT A | governine | mai umit u | n nom me | yenerar p | Dabiic described iii |
| • | 7 | b)(1)(A)(vi). (Comple | | (Camalata | Dark II V | | | | | |
| 8 – | 7 | | ection 170(b)(1)(A)(vi). (| | | | L | | | - d |
| 9 | | | eives (1) more than 33 1 | | | | | | | |
| | | | nctions - subject to certa | | | | | | | = |
| | | | axable income (less sect | ion 511 ta | x) from bu | sinesses a | icquirea b | y tne orga | inization a | aπer June 30, 1975 |
| | ٦ | 509(a)(2). (Complete | * | | | | | | | |
| 10 ⊨ | ¬ - | | perated exclusively to tes | • | • | | | • | | |
| 11 | - | - | perated exclusively for th | | | | | | • | • • |
| | | | itions described in section | | | |) See sec | ction 509(| a)(3). Che | eck the box that |
| | | · · · · - | organization and comple | | _ | | | | | 1 |
| | a Ll Type ≀ | | • • | | e III - Func | • | • | | d | Type III - Other |
| e L | . , . | • | it the organization is not | | • | • | • | | | |
| | | • | han one or more publicly | | • | | | | 9(a)(1) or s | section 509(a)(2). |
| f | - | | ten determination from t | the IRS tha | at it is a ⊺y | pe I, Type | II, or Type | e III | | |
| | • • • | rganization, check th | | | | | | | | L |
| 9 | - | | organization accepted ar | | | • | | | | |
| | | | rectly controls, either al | one or tog | ether with | persons d | escribed | ın (ıi) and (| iii) below, | |
| | the gove | erning body of the si | upported organization? | | | | | | | 11g(ı) X |
| | • • • | , | n described in (i) above? | | | | | | | 11g(ii) X |
| | (iii) A 35% (| controlled entity of a | person described in (i) o | or (ii) above | ∍? | | | | | 11g(iii) X |
| h | Provide the f | ollowing information | about the supported org | ganızatıon(| (s) | | | | | |
| | | T | (111) T | | | | | | | |
| (i) Nan | ne of supported | (ii) EIN | (iii) Type of organization | | rganization | | | (vi) ls organizatio | s the on in col. I | (vii) Amount of |
| OI | ganization | | (described on lines 1-9 | in col. (i) lis governing (| | organizati (i) of your | | (i) organiz | ed in the [| support |
| | | | above or IRC section | | | | | U.S | | |
| | | | (see instructions)) | Yes | No | Yes | No | Yes | No | - |
| | | | | | | | | | | |
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Schedule A (Form 990 or,990-EZ) 2009 200 CLUB OF ATLANTIC & CAPE MAY COUNTIES 22 - 2724513 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 18,750. 34,793. 31,250. 49,711. 67,621. 202,125. include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 18,750. 34,793. 31,250. 49,711. 67,621. 202,125. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 202,125. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 18,750. 34,793. 31,250. 49,711. 67,621 202,125. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,798 8,625. 6,211 1,112. 2,340 21,086. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 223,211. 11 Total support. Add lines 7 through 10 94,946. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 90.55 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 82.33 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ▶ X I stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

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| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support Jordel lines 9, 10e, 11, and 12) 14 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009, if the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | Cale | endar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Me Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 31 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 31 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The or | 9 | Amounts from line 6 | | | | | | |
| (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 10a | dividends, payments received on securities loans, rents, royalties | | | | | | |
| acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | b | Unrelated business taxable income | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 19 a 31 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | • | | | | | | |
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| 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Investment income percentage from 2008 Schedule A, Part III, line 17 11 Investment income percentage from 2008 Schedule A, Part III, line 17 12 Investment income percentage from 2008 Schedule A, Part III, line 17 13 Investment income percentage from 2008 Schedule A, Part III, line 17 14 Investment income percentage from 2008 Schedule A, Part III, line 17 15 Investment income percentage from 2008 Schedule A, Part III, line 17 16 Investment income percentage from 2008 Schedule A, Part III, line 17 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 Investment income percentage from 2008 Schedule A, Part III, line 19 10 Investment income percentage from 2008 Schedule A, Part III, line 19 11 Investment income percentage from 2008 Schedule A, Part | 12 | or loss from the sale of capital | | | | | | |
| First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Support tests - 2009. If the organization did not check a box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 19 Investment income percentage from 2008 Schedule A, Part III, line 17 10 Investment income percentage from 2008 Schedule A, Part III, line 17 11 Investment income percentage from 2008 Schedule A, Part III, line 17 12 Investment income percentage from 2008 Schedule A, Part III, line 17 13 Investment income percentage from 2008 Schedule A, Part III, line 17 14 Investment income percentage from 2008 Schedule A, Part III, line 15 15 Investment income percentage from 2008 Schedule A, Part III, line 15 16 Investment income percentage from 2008 Schedule A, Part III, line 15 17 Investmen | 13 | | | | | | | |
| Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization □ □ | | | the organization' | s first, second, thii | d, fourth, or fifth to | ax year as a section | on 501(c)(3) organi | zation, |
| Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization In 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | check this box and stop here | | | | | | |
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| Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 15 | Public support percentage for 2009 (| line 8, column (f) d | ivided by line 13, o | column (f)) | | 15 | % |
| 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 16 | Public support percentage from 2008 | Schedule A, Part | III, line 15 | | | 16 | % |
| 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | Sec | ction D. Computation of Inve | stment Incom | e Percentage | | | | |
| 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 17 | Investment income percentage for 20 | 09 (line 10c, colur | nn (f) divided by lii | ne 13, column (f)) | | 17 | % |
| more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 18 | Investment income percentage from | 2008 Schedule A, | Part III, line 17 | - // | | 18 | |
| b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 19a | 33 1/3% support tests - 2009. If the | organization did r | not check the box | on line 14, and line | e 15 is more than | 33 1/3%, and line | 17 is not |
| line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | more than 33 1/3%, check this box a | ndstop here. The | organization quali | fies as a publicly s | supported organiz | ation | ightharpoons |
| | b | 33 1/3% support tests - 2008. If the | organization did r | not check a box or | line 14 or line 19a | a, and line 16 is m | ore than 33 1/3%, | and |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions | | line 18 is not more than 33 1/3%, che | eck this box and st | op here. The orga | nization qualifies a | as a publicly supp | orted organization | ▶ 🔲 |
| Schodule A /Form 990 or 990 F7) 2009 | 20 | Private foundation, if the organization | n did not check a | box on line 14, 19 | a, or 19b, check th | | | |

| FORM 990-EZ | TO | HER EXPENSES | | STATEMENT | 1 |
|---|--|--|--------------------|------------------------------------|-----|
| DESCRIPTION | | | | AMOUNT | |
| OFFICE SUPPLIES BUSINESS REGISTRATION INSURANCE AWARDS TO FALLEN OFFI MISCELLANEOUS EXPENSE OTHER DONATIONS MEMORIAL PROGRAM EXPE | ICERS FAMILY ME ES ENSES | MBERS | | 55 25 38 5 30 43,12 | |
| INVESTMENT FEES EXPENTOTAL TO FORM 990-EZ, | | | | 45,25 | 7. |
| FORM 990-EZ GAIN | (LOSS) FROM PU | BLICLY TRADED S | ECURITIES | STATEMENT | 2 |
| | | | | | |
| DESCRIPTION | GROSS SALES PRICE | COST OR OTHER BASIS | EXPENSE OF SALE | NET GAIN OR (LOSS) | |
| DESCRIPTION | | OTHER BASIS | | OR (LOSS) | |
| TO FORM 990-EZ, LINE | SALES PRICE 2,709. | OTHER BASIS 3,063. | OF SALE | OR (LOSS) | 54. |
| TO FORM 990-EZ, LINE | SALES PRICE 2,709. 5 2,709. | OTHER BASIS 3,063. | OF SALE 0. | OR (LOSS) | 54. |
| TO FORM 990-EZ, LINE FORM 990-EZ OTHER | SALES PRICE 2,709. 5 2,709. | OTHER BASIS 3,063. 3,063. | OF SALE 0. | OR (LOSS) -35 | 54. |
| TO FORM 990-EZ, LINE | SALES PRICE 2,709. 5 2,709. CHANGES IN NET | OTHER BASIS 3,063. 3,063. ASSETS OR FUND | OF SALE 0. | OR (LOSS) -35 -35 STATEMENT | 3 |

| FORM 990-EZ | 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS | | | | |
|-------------|---|-----|-------|-----|----|
| DIRECTLY OR | ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL PRACT? | [|] YES | (x) | ио |
| | ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . | . [|] YES | [X] | NO |

990-EZ PG 2 STATEMENT

TO SUPPORT POLICE, FIRE & RESCUE SERVICES