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Form, **990**

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)

2009

©UU∃ Doen to Publi

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u> </u>	For th	e 2009 ca	alendar	year, or tax year beginning		2009, and e	naing			, 20	
В	Check if a	applicable	Please	C Name of organization Nation	nal Guard Associatio	n of RI			D Emplo	yer identification nu	mber
	Address	change	use IRS label or	Doing Business As					22	2816123	
_	Name abanda print or Number and street (or PO box if mail is not delivered to street address) Room/suite								E Teleph	one number	
	Initial ret		type. See	645 New London Ave					(401)	734-6236	
_	Terminat		Specific Instruc-	City or town, state or country,	and ZIP + 4	•	•				
		d return	tions	Cranston RI 02920					G Gross re	eceipts \$	
$\overline{}$		on pending	F Nan	ne and address of principal officer	James Mazerall			H(a) is this	a aroua ratus	n for affiliates? Yes	V No
_	Аррисано	on penuing	75 Pol	lk Rd, Warwick RI 02889			Ì				□ No
$\overline{}$	Tax-exe	empt status			947(a)(1) or 527					Included Times Itst (see instructions	
_		ite: ► NC			(4)(.,/ 5.			H(c) Group e		•	٠,
					Other ►	L Year of fo	rmation	1987		of legal domicile RI	
_	art I	Summ		Oracon Control Trast Control Control	Other P	12 100 0110	mation	1301	··· Olulo o	riogar dorrinone 141	
							-				
				the organization's mission							
8	-	bromore	dwale	eness of the military to the	e community						
Activities & Governance	-			·····							
ē	-										
စ္ထိ	2 (If the organization discontinue			1 25% of	its net asse		I	_
ಹ	3			ng members of the governi		•			. 3		
tes	4			pendent voting members of		(Part VI, Im	ne 1b)			 	8
ķ	5	Total nur	mber of	f employees (Part V, line 2a	3)				. 5		
¥	6	Total nur	mber of	f volunteers (estimate if ned	cessary)				. 6		<u> 15</u>
				elated business revenue fro					. 7a		0_
	b	Net unre	lated b	usiness taxable income fro	m Form 990-T, line 3	<u>4</u>	···		. 7b		0
	1							Prior Ye	-	Current Year	
Revenue	8	Contribu	itions ai	nd grants (Part VIII, line 1h)		. ├		<u> 1541</u>		<u>1487</u>
	9	Program	service	e revenue (Part VIII, line 2g)				539547	87	<u>5299</u>
ě	10			ome (Part-VIII, column (A), I					186		95
<u> </u>	111	Other rev	venue (Party III Column (A) lines add lines 8 through 11 (must	5, 6d, 8c, 9c, 10c, an	d 11e) .			20267	1	7082
	12	Total reve	enuea	add lines 8 Through 17 (must	equal Part VIII, column	(A), line 12)		561541	89	3966
	13	Grants a	ınd simi	ılar amounts paid (Raft IX,	&lumn (A), lines 1–3)				74182	20	3497
	14	Benefits	paid &	or for members (Part IX, k	column (A), line 4)						
ses	15			ompensation, employee bene), lines 5–10)) L		1137		<u> 1996</u>
Expenses	16a			dralsing fees (Part IX, colum							
ă	Ъ.	Total fund	draising	expenses Part IX, column	(D). line 25) ▶						
				(Part IX, column (A), lines					494477	70	0104
			•	. Add lines 13-17 (must eq	· · · · · · · · · · · · · · · · · · ·				569796	90	5597
				penses. Subtract line 18 froi			: I		-8255	-1	1631
5 8	ŝ						Beg	jinning of Ci	urrent Year	End of Year	
Net Assets or	20	Total ass	sets (Pa	art X, line 16)					79109	10	0235
Ą	2 21		•	Part X, line 26)							
ž	22			and balances. Subtract line	21 from line 20				79109	10	0235
	art II		ature							•	
		Under pe	enalties o	f perjury, I declare that I have exan							
		and belie	ef, it is tru	ue, correct, and complete Declara	tion of preparer (other than	officer) is base	ed on all	information	of which p	reparer has any knov	vledge
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		Type	e or print	name and title	1 (200	JOICI					
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		Preparer signature					self-	oved ▶ □	(see instru		
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Form	990	(2009)
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Par	t III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission: promote awareness of the military to the community	
2	Did the organization undertake any significant program services during the year which were not listed o	
_	the prior Form 990 or 990-EZ?	n □ Yes ☑ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	☐ Yes 🗹 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of the organization of the organiz	es by expenses.
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	ount or grants and
4a	(Code:) (Expenses \$905597 including grants of \$) (Revenue \$	875299)
	promote awareness of the military to the community	
	promote dwareness of the minutely to the community	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

	·····	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	<u></u>
		•••••••
	•	
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 905597	

Pai	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
3	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	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		1
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		√
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓_

u u	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			_
	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization 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	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		\
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	_35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
20	Part VI	37	L	✓
38 ——	19? Note. All Form 990 filers are required to complete Schedule O	38		✓

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	/	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	2b		
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		✓
	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)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			Ì
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		√
	organization solicit any contributions that were not tax deductible?			
J	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		 	
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ť		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
	· · ·		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		/
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	,	✓_
6	Does the organization have members or stockholders?	6_	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members		1	
L	of the governing body?	7 <u>a</u> 7b	1	<u> </u>
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	70		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		
Rev	enue Code.)		,	
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	١		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	<u> </u>	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11		1
44.6	form?	<u>''</u>		<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a		1
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	120	<u>-</u>	
	rise to conflicts?	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		√
14	Does the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	10-		1
	with a taxable entity during the year?	16a		V
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		"
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or			
	available for public inspection. Indicate how you make these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.		_	
20	State the name, physical address, and telephone number of the person who possesses the books and recoorganization: Mark Bourgery, 4 Molter st Cranston RI 02910, 401 734-6236	ords o	f the	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

✓ Check this box if the organization did not co	mpensate	any o	urr	ent	offi	cer, d	lirec	tor, or trustee		
(A)	(B)		(C)				(D)	(E)	(F)	
Name and Title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Rey employee	Highest compensated employee	Former Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Robert Ward 21 Fair Oakes Drive, Lincoln RI 02865	5			1				0	0	0
James Mazerall 75 Polk Ave Warwick, RI 02889	5			1				0	0	0
Kimberly Keller 4 Gilbert St. Warwick RI 02886	2			1				0	0	0
Mark Bourgery 4 Molter St, Cranston RI 02910	2			1				0	0	0

Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	an	d Hig	hes	t Compensated	i Employees (co	ntınued)
	(A)	(B)	l		•	C)			(D)	(E)	(F)
Name and title		Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
										-	
		•								_	
1b	Total			<u> </u>			L				
2	Total number of individuals (including but i		to the	ose	liste	ed a	above) wh	no received mo	ore than \$100,0	00 in
	reportable compensation from the organiza	ation >									Waa Na
3	Did the exceptation let any farmer office										Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S								e, or mynest c	·····	3 ✓
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.										4 1
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	com _l	en: Sch	satı edu	on i	from <i>I for</i> s	any ach	unrelated org	anization for	5 ✓
Se	ction B. Independent Contractors						_				
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	ере	nde	nt d	contra	cto	rs that received	d more than \$1	00,000 of
	(A) Name and business add	fress				-			(B) Description of s	ervices	(C) Compensation
								_			
_											
	Total number of independent contractors (i	noludina h	ut not	-	1100	to	these	Jugar.	ad about the	FOCONICA	
2	more than \$100,000 in compensation from					w	แบรย	เเรเ	eu abuve) WIIO	received	

TOITIS	_			· · · · · · · · · · · · · · · · · · ·			rage 3
Part	i VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats	1a	Federated campaigns 1a					
ĒŽ	ı	Membership dues 1b	17831				
υĒ							
ifts ra		Tundraising events					}
2: ²	i .	riciated organizations		Ì		}	
Sin	е	Government grants (contributions).				ì	
ē Ę	f	All other contributions, gifts, grants,					
흔등		and similar amounts not included above 1f	6781				
Contributions, gifts, grants and other similar amounts		Noncash contributions included in lines 1a-1f: \$					
۾ <u>ج</u>	h	Total. Add lines 1a-1f	▶	19873			
			Business Code				
a.	2a	Promote awareness of the mil	870071			1	
ě						-	
9	b						
ž	C	•••••				-	
Š	d	•••••				-	
Ē	е						
Program Service Revenue		All other program service revenue .					
	g	Total. Add lines 2a-2f	🕨	870071			
	3	Investment income (including dividends other similar amounts)		95			
	4	Income from investment of tax-exempt bond					
	5	Royalties					
		(i) Real	(ii) Personal				
	١.		(1) 1 0.001.0.				
		Gross Rents		İ			
		Less: rental expenses					
		Rental income or (loss)				ļ	-
	a	` - ' 	▶				
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	ь	Less cost or other basis					
		and sales expenses .					
	c	Gain or (loss)					
		Net gain or (loss)	•				
đ				-			
enne	8a	Gross income from fundraising					
-		events (not including \$	ŀ				
æ		of contributions reported on line 1c). See Part IV, line 18 a					ļ.
ē	١.						
Other Re	b	Less: direct expenses b					_
O	С	Net income or (loss) from fundraising e	vents				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
		Less: direct expenses, b					
	С	Net income or (loss) from gaming activ	ties ►				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	ь	Less: cost of goods sold b					
		Net income or (loss) from sales of inventor	orv				
		Miscellaneous Revenue	Business Code				
	40-					†	
						<u> </u>	_
	þ						
	С						
		All other revenue				-	
	е	Total. Add lines 11a-11d	🕨	0		ļ	
	12	Total revenue. See instructions .	▶	893966			

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	203497							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees								
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1641							
7	Other salaries and wages	1041							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)								
9	Other employee benefits	354							
10	Payroll taxes	334							
11	Fees for services (non-employees):								
	Management								
	Legal								
	Accounting								
	Lobbying								
e	Professional fundraising services. See Part IV, line 17								
T	Investment management fees	646157							
	Other	040137							
	Advertising and promotion	817							
13	Office expenses	017							
14	Information technology				<u> </u>				
15 16	Royalties								
17	Occupancy			-					
17 18	Payments of travel or entertainment expenses		<u>.</u>						
10	for any federal, state, or local public officials	9059							
19	Conferences, conventions, and meetings .	8658							
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization.		 	-					
23	Insurance								
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а									
b									
С									
d									
е	•••••								
f	All other expenses	44473							
25	Total functional expenses. Add lines 1 through 24f	905597							
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and								
	fundraising solicitation								

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	79109	1	100235
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3_	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
w	_			7	
Assets	7	Notes and loans receivable, net		8	
Ass	8	Inventories for sale or use		9	
	9	Prepaid expenses and deferred charges			
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	.			10c	
		Less: accumulated depreciation 10b		11	·
	11 12	Investments—publicly traded securities		12	
	13	·		13	
	14	Investments—program-related. See Part IV, line 11		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ā		employees, highest compensated employees, and disqualified			
		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
ces		Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Net Assets or Fund Balar		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances		33	
_	34	Total liabilities and net assets/fund balances	79109	34	100235

Part XI Financial Statements and Reporting								
			Yes	No				
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗆 Accrual 🗆 Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓				
	Were the organization's financial statements audited by an independent accountant?	_2b		✓				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of							
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c						
	If the organization changed either its oversight process or selection process during the tax year, explain in							
	Schedule O.							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were							
	issued on a consolidated basis, separate basis, or both:							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in							
	the Single Audit Act and OMB Circular A-133?	3a		✓				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b						

Form **990** (2009)

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number **National Guard Association of RI** 22 2816123 Part VI Question 6 & 7a/b: The organization has members who are all Active or retired Commissioned National Guardsman which pay annual dues and meet annually to vote on the board of directors. Question 8 a/b: The organizations governing body and subcomittees document minutes of meetings held.