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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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(b)(13) 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

2009**Open to Public Inspection**

A For the 2009 calendar year, or tax year beginning January 1, 2009, and ending December 31, 2009	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Towanda Firemen's Relief Association Number and street (or P O box, if mail is not delivered to street address) Room/suite 3 Elm Street City or town, state or country, and ZIP + 4 Towanda, Pennsylvania 18848-1331
D Employer identification number 23-6390732	E Telephone number 570-265-2000
F Group Exemption Number ►	

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

G Accounting Method: ☒ Cash ☐ Accrual
Other (specify) ►

I Website: ►

J Tax-exempt status (check only one) — ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **112,522.00**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	939.00
	2	Program service revenue including government fees and contracts	2	19,733.00
	3	Membership dues and assessments	3	
	4	Investment income	4	73,008.00
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
Expenses	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less: cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ► <u>Lease Payment & Interest</u>)	8	18,842.00
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	112,522.00
	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	1,600.00
	13	Professional fees and other payments to independent contractors	13	6,665.00
	14	Occupancy, rent, utilities, and maintenance	14	77,562.00
15	Printing, publications, postage, and shipping	15	44.00	
16	Other expenses (describe ► <u>Training, Travel, Equipment, Tokens, Insurances, Fire Prevention</u>)	16	12,007.00	
17	Total expenses. Add lines 10 through 16	17	97,878.00	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	14,644.00
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	921,195.00
	20	Other changes in net assets or fund balances (attach explanation)	20	146,367.00
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	1,067,562.00

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	917,120.00	22 1,086,447.00
23	Land and buildings	888,098.00	23 844,081.00
24	Other assets (describe ►)		24
25	Total assets	1,805,218.00	25 1,930,528.00
26	Total liabilities (describe ► <u>Mortgage</u>)	884,023.00	26 862,966.00
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	921,195.00	27 1,067,562.00

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2009)

9 8 NE

Part V Other Information (Note the statement requirements in the instructions for Part 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		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a	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?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	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		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a n/a		
b	Did the organization file Form 1120-POL for this year?		
38a	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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a n/a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
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		✓
c	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 ▶		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
41	List the states with which a copy of this return is filed. ▶ Pennsylvania		
42a	The organization's books are in care of ▶ Edward Webster, Jr. Telephone no. ▶ 570-637-0216 Located at ▶ 3 Elm Street Towanda, Pennsylvania ZIP + 4 ▶ 18848-1331		
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)?	Yes	No
	If "Yes," enter the name of the foreign country: ▶		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		✓
	If "Yes," enter the name of the foreign country: ▶		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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		✓

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
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	49b	<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."

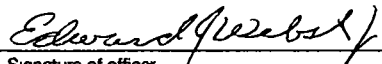
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		5-14-2010 Date	
Paid Preparer's Use Only	Edward Webster, Jr. Treasurer		Type or print name and title	
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		Phone no.

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

TOWANDA FIREMEN'S RELIEF ASSOCIATION

3 ELM STREET

TOWANDA, PENNSYLVANIA 18848-1331

2010 OFFICERS

PRESIDENT

David Landmesser

RR #4 Box 262

Towanda, Pa. 18848

VICE-PRESIDENT

James Hatch

P. O. Box 286

Ulster, Pa. 18850

SECRETARY

Phillip Roof

605 Fourth Street

Towanda, Pa. 18848

TREASURER

Edward Webster, Jr.

107 Ward Ave.

Towanda, Pa. 18848

**TOWANDA FIREMEN'S RELIEF ASSOCIATION
FINANCIAL STATEMENT**

Summary of Cash Receipts and Disbursements
FOR THE PERIOD ; January 1, 2009 to December 31, 2009

BALANCE: January 1, 2009	Checking	\$ 207.45
	Money Market	\$ 50,018.75
		\$ 50,226.20

RECEIPTS

100	Commonwealth Allocation	\$	19,733.24	
110	Interest Income	\$	111.46	
120	Dividend Income	\$	-	
130	Investments Sold (cost)	\$	-	
140	Investment Returns (gain/loss)	\$	18,730.87	
150	Contributions / Donations	\$	-	
160	Reimbursements	\$	939.31	
170	Proceeds - Equipment Sold	\$	-	
180	Membership Dues	\$	-	
190	Insurance Claims	\$	-	
210	Trust Fund Loan Payments	\$	73,008.12	
	Total Receipts	\$	112,523.00	\$ 162,749.20

DISBURSEMENTS

500	Investments Purchased	\$	-	
510	Insurance Payments	\$	4,192.00	
520	Equipment Purchased	\$	2,332.00	
530	Equipment Maintenance	\$	484.00	
540	Death Benefits	\$	-	
550	Relief Benefits	\$	-	
560	Training Expenses	\$	1,996.60	
570	Tokens of Smpathy& Goodwill	\$	208.00	
580	Fire Prevention Materials	\$	220.00	
590	Administrative Expenses	\$	2,218.17	
600	Principal Payments on Loan	\$	21,141.47	
610	Interst Payments on Loan	\$	51,866.65	
620	Delegate Dues & Expenses	\$	354.91	
630	Building Expenses	\$	4,554.07	
640	Banking Fees	\$	1.50	
	Total Disbursements			\$ (89,569.37)

BALANCE; December 31, 2009	Cash Accounts	\$ 73,179.83
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**TOWANDA FIREMEN'S RELIEF ASSOCIATION
FINANCIAL STATEMENT**

Summary of Cash Receipts and Disbursements
FOR THE PERIOD : January 1, 2009 - December 31, 2009

TRUST FUND

January 1, 2009 Beginning Market Value	\$ 866,899.43	
December 31, 2009 Ending Market Value	\$1,013,266.57	
Realized Gain / Loss		\$ 146,367.14

TRUST FUND EXPENSES

	FEES	EXPENSES	
FIRST QUARTER	\$ 1,518.35	\$ 3.50	
SECOND QUARTER	\$ 1,632.31	\$ 35.91	
THIRD QUARTER	\$ 1,572.42	\$ 3.90	
FOURTH QUARTER	\$ 1,895.17	\$ 3.92	
	\$ 6,618.25	\$ 47.23	\$ (6,665.48)

MORTGAGE PAYMENTS **\$ (73,008.12)**

GAIN / LOSS **\$ 66,693.54**

Edward J. Webster, Jr.
Treasurer

00647902L

E.I.N. 16-0538020

1-800-724-2440

PAGE 1 OF 1

TOWANDA FIREMANS RELIEF ASSN 647902
3 ELM ST 4525
TOWANDA PA 18848-1331

FOR TAX YEAR

2009

TAXPAYER ID NUMBER

23-6390732

2009 - 1099-INT, INTEREST INCOME

	ACCOUNT NUMBER	
SAVINGS INT	015004200582044	
BOX 1	INTEREST INCOME	111.46
	TOTAL INTEREST	111.46

*Form 1099-OID: This may not be the correct figure to report on your income tax return. See instructions on back.

L00M (11/06)

1099-INT 1099-DIV	1099-OID 1099-MISC	1099-B	1099-A	1099-C	1098-MORTGAGE
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and IRS determines that it has not been reported.			This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.		The information next to boxes 1, 2, and 3 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, address and telephone number PEOPLES STATE BANK OF WYALUSING PO BOX 217 WYALUSING PA 18853 570-746-1011		*Caution: The amount shown may not be deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No 1545-0047 2009 Form 1098	Mortgage Interest Statement Copy B For Payer The information in boxes 1, 2, 3, and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.
RECIPIENT'S federal identification no 24-0687920	PAYER'S social security number 23-6390732	1 Mortgage interest received from payer(s)/borrower(s)* \$ 51866.65			
PAYER'S/BORROWER'S name, street address (including apt. no.), city, state, and ZIP code TOWANDA FIREMANS RELIEF ASSOCIATION 3 ELM STREET TOWANDA PA 18848-0127		2 Points paid on purchase of principal residence \$			
		3 Refund of overpaid interest \$			
		4 Mortgage insurance premiums \$			
Account number (see instructions) 9001385198		5 Taxes paid in 2009 \$0.00			

Form **1098** (keep for your records) Department of the Treasury - Internal Revenue Service

Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least \$600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

If you received this statement as the payer of record on a mortgage on which there are other borrowers, furnish each of the other borrowers with information about the proper distribution of amounts reported on this form. Each borrower is entitled to deduct only the amount he or she paid and points paid by the seller that represent his or her share of the amount allowable as a deduction. Each borrower may have to include in income a share of any amount reported in box 3.

If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Form 1040, Schedule A, C, or E for how to report the mortgage interest. Also, for more information, see Pub. 936, Home Mortgage Interest Deduction, and Pub. 535, Business Expenses.

Account Number. May show an account or other unique number the lender has assigned to distinguish your account.

Box 1. Shows the mortgage interest received during the year. This amount includes interest on any obligation secured by real property, including a home equity, line of credit, or credit card loan. This amount does not include points, government subsidy payments, or seller

payments on a "buy-down" mortgage. Such amounts are deductible by you only in certain circumstances. **Caution:** If you prepaid interest in 2009 that accrued in full by January 15, 2010, this prepaid interest may be included in box 1. However, you cannot deduct the prepaid amount in 2009 even though it may be included in box 1. If you hold a mortgage credit certificate and can claim the mortgage interest credit, see Form 8396, Mortgage Interest Credit. If the interest was paid on a mortgage, home equity, line of credit, or credit card loan secured by your personal residence, you may be subject to a deduction limitation. **Box 2.** Not all points are reportable to you. Box 2 shows points you or the seller paid this year for the purchase of your principal residence that are required to be reported to you. Generally, these points are fully deductible in the year paid, but you must subtract seller-paid points from the basis of your residence. Other points not reported in box 2 may also be deductible. See Pub. 936 to figure the amount you can deduct.

Box 3. Do not deduct this amount. It is a refund (or credit) for overpayment(s) of interest you made in a prior year or years. If you itemized deductions in the year(s) you paid the interest, you may have to include part or all of the box 3 amount on the "Other income" line of your 2009 Form 1040. No adjustment to your prior year(s) tax return(s) is necessary. For more information, see Pub. 936 and *Itemized Deduction Recoveries* in Pub. 525, Taxable and Nontaxable Income.

Box 4. Shows mortgage insurance premiums which may qualify to be treated as deductible mortgage interest. See the Schedule A (Form 1040) instructions.

Box 5. The interest recipient may use this box to give you other information, such as the address of the property that secures the debt, real estate taxes, or insurance paid from escrow.