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Form 990-EZ

Department of the Treasury Internal Revenue Service

For the 2009 calendar year, or tax year beginning

2009

OMB No 1545-1150

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(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 may use this form

, 2009, and ending

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

В	Check if applicable C			1) Employer	identification number		
	Idress change Please use IRS ORANGE COUNTY GANG INVESTIGATORS 2			26-38	5-3808628			
		ame change label or ASSOCIATION E Te				ephone number		
\vdash	Initial return type PO BOX 174				949-4	156-5255		
	Termination Specific SANTA ANA,	CA 92702		t.		· · · · · · · · · · · · · · · · · · ·		
	Amended return tions Application pending				Group E Number	<u> </u>		
	 Section 501(c)(3) organizations a must attach a completed 	and 4947(a)(1) nonexempt charitable trus Schedule A (Form 990 or 990-EZ).	sts	G Accounting n Other (specif		Cash Accrual		
				H Check ► X		ganization is not		
1	Website: ► <u>WWW.OCGIA.ORG</u>			required to a 990-EZ, or 990-EZ,	ttach Sche	edule B (Form 990,		
		1(c) (6) ◀ (insert no) 4947(a)(1) or						
n	\$25,000 A Form 990-EZ or Form 990 retu	a section 509(a)(3) supporting organization is not required, but if the organization cho	on and its poses to file	gross receipts are e a return, be sure	to file a co	mot more than mplete return		
Ĺ	Add lines 5b, 6b, and 7b, to line 9 to de instead of Form 990-EZ	etermine gross receipts, if \$500,000 or m	ore, file F	orm 990	- \$	12,898.		
Pa	Revenue, Expenses, an	d Changes in Net Assets or Fun	d Baland	es (See the in	nstructio	ns for Part I.)		
	1 Contributions, gifts, grants, and s	imilar amounts received			1	12,898.		
	2 Program service revenue includin	2 Program service revenue including government fees and contracts						
	3 Membership dues and assessmen	ıts			3			
	4 Investment income		1 - 1		4			
	5a Gross amount from sale of assets	-	5a					
	b Less cost or other basis and sale	•	5 b					
Ë	c Gain or (loss) from sale of assets other the Special events and activities (complete api	olicable parts of Schedule G) If any amount is from	aamina cha	ck bara 🕨 [5c			
Ě	a Gross revenue (not including \$	of contributions	yanning, che	ck liele - [-			
REVENUE	reported on line 1)	or contributions	6 a					
_	b Less direct expenses other than	fundraising expenses	6b					
	c Net income or (loss) from special events a		0.0		6c			
	7a Gross sales of inventory, less ret		7a					
					7c			
	C Gross profit or (loss) from sales of inventory (Subtract line / Strong white /a) 8 Other revenue (describe >) 8			
	9 Total revenue Add lines 1, 2, 3,				▶ 9	12,898.		
	10 Grants and similar amounts paid	(attach schedule) TPR BRAIL		-	10			
F	11 Benefits paid to or for members	' , Og -			11			
EXPENSE	12 Salaries, other compensation, an				12	-		
Ë	13 Professional fees and other paym	ients to independent contractors	RECE	IVED _ H	13			
Š	14 Occupancy, rent, utilities, and ma	milleriance		7.70	14			
Š	15 Printing, publications, postage, a	nd shipping ATEMENT 1	ALIC TI	5 2014 5	15	14 265		
	16 Other expenses (describe > SEE ST	101	AUG 1	2017	16 ► 17	14,365.		
	17 Total expenses. Add lines 10 thr	11 11 17 1 0		- 0 +		14,365.		
A	18 Excess or (deficit) for the year (S	· · · · · · · · · · · · · · · · · · ·	OGDE	N, UI	18	-1,467.		
N S E E T E	19 Net assets or fund balances at be figure reported on prior year's ret	eginning of year (from line 27, col <u>⊯mn (A</u> urn))) (must a	gree with end-of-	year 19	16,882.		
ŦĘ	20 Other changes in net assets or fu				20	10,002.		
S	1 3	nd of year Combine lines 18 through 20			▶ 21	15,415.		
Pa		assets on line 25, column (B) are \$1,250	.000 or mo	re, file Form 990				
		tructions for Part II)		(A) Beginning		(B) End of year		
22	2 Cash, savings, and investments				882. 22	15,415.		
23	B Land and buildings				23			
24					24			
25				16,		15,415.		
26)			0.26	0.		
27		of column (B) must agree with line 21)		16,	882. 27	15,415.		
BA	A For Privacy Act and Paperwork Red	uction Act Notice, see separate instructi	ons.			Form 990-EZ (2009) 4		

Form 990-EZ (2009) ORANGE COUNTY G	ANG INVESTIGATORS		26-	3808628 Page 2
Par III > Statement of Program Ser		(See the instruction	ns.)	Expenses
What is the organization's primary exempt purpose? SEE	noise mannor	Required for section 501(c)(3) and (4) organizations and section 1947(a)(1) trusts, optional		
Describe what was achieved in carrying out th describe the services provided, the number of program title	persons benefited, or other r	elevant information for	each f	or others)
28				
(Grants \$) If th		ants check here		28 a
29				204
(Grants \$) If th	is amount includes foreign gr	ants, check here	<u> </u>	29 a
30				
(Grants \$) If th	is amount includes foreign gr	ants, check here	· · · · · · · · · · · · · · · · · · ·	30 a
31 Other program services (attach schedule				
(Grants \$) If th 32 Total program service expenses (add lii	is amount includes foreign gr	ants, check here		31 a 32
Part List of Officers, Directors,		plovees. List each on		
Property Elector Officers, Directors,	(b) Title and average hours	(c) Compensation (If	(d) Contributions to	(e) Expense account
(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit plans deferred compensation	and and other allowances
JOEL NIGRO	PRESIDENT	0.		0.
P.O. BOX 1743	5.00			
SANTA ANA, CA 92705	ananama ny			
LUCY HERNANDEZ	SECRETARY	0.		0.
P.O. BOX 1743	5.00			
SANTA ANA, CA 92705				
SCOTT JORGENSEN	TREASURER	0.		0.
P.O. BOX 1743	5.00			
SANTA ANA, CA 92705				
-		*		-
		· ·-		
·				-
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RAA	TEE 400131 0			Form 990-F7 (2009

<u> </u>	Other information (Note the statement requirements in the insits for rait 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		х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		Х
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	İ	:	
	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?	35 a		Х
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36	_	Х
	a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0. Did the organization file Form 1120-POL for this year?	37 b	-	X
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X
1	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations Enter			
	a Initiation fees and capital contributions included on line 9			
-	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A			
ļ	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	40 b		
•	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			: :}
	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	40 e		X
	List the states with which a copy of this return is filed NONE			
42	a The organization's books are in care of ► JOEL NIGRO Telephone no ► 949-49	56-F	255	
	books are in care of ► JOEL NIGRO Telephone no ► 949-4! Located at ► P.O. BOX 1743 SANTA ANA CA ZIP+4 ► 92702	0-5	255	
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b	- <u></u>	<u>X</u>
	If 'Yes,' enter the name of the foreign country			
	See the instructions for exceptions and filling requirements for Form TD F 00 22.1. Beneat of a Foreign Bank and Financial Accounts			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the US?	42 c		v
	If 'Yes,' enter the name of the foreign country	_ 4 ∠C	_	_X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		► □	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year		ш	N/A
				r
			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		X
	to an obe must be completed instead of FORM DOCEZ	45	ĺ	Λ

►X Yes

Form 990-EZ (2009)

No

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 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 46 47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48 49a Did the organization make any transfers to an exempt non-charitable related organization? 49 a b If 'Yes,' was the related organization a section 527 organization? 49b 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' (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title and average (e) Expense account and other allowances (a) Name and address of each employee paid more than \$100,000 hours per week devoted to position f Total number of other employees paid over \$100,000 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 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here 1620 RESIDEN Type or print name and title Preparer's Identifying Number (See instructions) Check If Preparer's Paid signature P01221288 employed Pre-CPA Firm's name (or parer's yours if self-employed), address, and ZIP + 4 18662 MACARTHUR BLVD STE 101 26-2943397 Use EIN Only IRVINE. CA 92612-1207 Phone no ► (949) 333-0161

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

BAA

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FEDERAL STATEMENTS

ORANGE COUNTY GANG INVESTIGATORS ASSOCIATION

PAGE 1

26-3808628

STATEMENT 1 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

ADVERTISING AND PROMOTION	\$	249.
BANK SERVICE CHARGES		75.
CONFERENCES, CONVENTIONS, AND MEETINGS		8,775.
MEALS AND ENTERTAINMENT		2,775.
OFFICE EXPENSES		705.
PAYMENTS OF TRAVEL OR ENTERTAINMENT FOR PUBLIC OFFICIALS		485.
UNIFORMS		1,301.
	TOTAL \$	14,365.

STATEMENT 2 FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE PURPOSE OF THIS CORPORATION IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A CORPORATION MAY BE ORGANIZED UNDER SUCH LAW. SUCH PURPOSES FOR WHICH THIS CORRUPTION IS FORMED ARE, AMONG OTHER NONPROFITABLE PURPOSES:1. TO FOSTER AND EXPAND A COMMUNITY OF LAW ENFORCEMENT PROFESSIONALS RESPONSIBLE FOR INVESTIGATING, PROSECUTING AND SUPPRESSING GANGS AND GANG VIOLENCE IN ORANGE COUNTY, CALIFORNIA, AND THE SURROUNDING AREA; 2. TO SHARE INTELLIGENCE AND RESOURCES, AND PROVIDE EDUCATIONAL TRAINING, WITHIN THE LAW ENFORCEMENT COMMUNITY TO IMPROVE EFFORTS TO INVESTIGATE, PROSECUTE AND SUPPRESS GANGS AND GANG VIOLENCE; AND 3. TO PROMOTE AND ENCOURAGE AN UNDERSTANDING OF THE CAUSES OF GANGS AND GANG ACTIVITY TO DEVELOP PROGRAMS AND METHODS TO REDUCES GANG ACTIVITY.