

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

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



Α	For the 2009 calendar year, or tax year beginning $4/01$, 2009, and ending $3/31$, 2010		
В	Check if applicable C	D Employer	r identification number		
	Address change Please Fraternal Order of Police	23-7	23-7227127		
	The Manual Control of the Control of	E Telephon			
	Industrial return type. 464 Mitchells Lane				
	Termination See Specific Middletown, RI 02842	(401) 847-0020		
		F Group f	Exemption		
	Application pending	Number			
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts G Accounting in	nethod [X Cash Accrual		
	must áttách a completed Schedule À (Form 990 or 990-EZ). Other (specif	y) ►			
	H Check ► X	ıf the o	rganization is not		
ı		ittach Sch	edule B (Form 990,		
J	Tax-exempt status (check only one) — X 501(c) (7) ◀ (insert no) 4947(a)(1) or 527 990-EZ, or 9	90-PF)			
K		e 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 co	omplete return		
ī	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	<u> </u>	56,021.		
, P	art I, 😹 Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the II	<u>nstructic</u>	ns for Part I.)		
	1 Contributions, gifts, grants, and similar amounts received	1	4,352.		
	Program service revenue including government fees and contracts	2			
	3 Membership dues and assessments	3			
	4 Investment income	4	27.		
	5a Gross amount from sale of assets other than inventory 5a	F			
	b Less cost or other basis and sales expenses 5b				
R	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)				
E	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here				
R E V E N U	a Gross revenue (not including \$ of contributions				
ÿ	reported on line 1) 6a				
	b Less direct expenses other than fundraising expenses 6b				
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	- 6c			
	7a Gross sales of inventory, less returns and allowances 7a 51,64 b Less cost of goods sold 7b 16,84				
			24 702		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	34,793.		
	8 Other revenue (describe >	_) 8_			
	9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	▶ 9	39,172.		
	10 Grants and similar amounts paid (attach schedule)	10	4,311.		
F	11 Benefits paid to or for members	11			
X	11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 12 OCT 10 2011	12			
E P E N S E	13 Professional fees and other payments to independent confractors	13			
S	14 Occupancy, rent, utilities, and maintenance	14	10,134.		
E S		15			
	16 Other expenses (describe ► See Statement 2	16	36,936.		
= 5	17 Total expenses. Add lines 10 through 16	▶ 17	51,381.		
<u></u>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-12,209.		
┥ .	A 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-	vear 🔭			
_	set 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	31,979.		
-, T	20 Other changes in net assets or fund balances (attach explanation)	20			
5	21 Net assets or fund balances at end of year Combine lines 18 through 20	▶ 21	19,770.		
, P	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990				
<u> </u>	(See the instructions for Part II) (A) Beginning of		(B) End of year		
2	· · · · · · · · · · · · · · · · · · ·	979. 22	19,770.		
= .	3 Land and buildings	23			
-	4 Other assets (describe ►)	24			
"	25 Total assets 31, 9		19,770.		
•	26 Total liabilities (describe ►)	0. 26	0.		
		979. 27	19,770.		

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

	<u>990-EZ(2009) Fraternal Order</u>			23	-72	27127 Page 2
	till Statement of Program Se		s (See the instructi	ons.)		Expenses
What	s the organization's primary exempt purpose? Se	e Statement 3			(Rec	quired for section
Desc	ribe what was achieved in carrying out the ribe the services provided, the number of	je organization's exempt purp	ooses. In a clear and c	oncise manner,	orga	c)(3) and (4) nizations and section ((a)(1) trusts, optional
proa	ribe the services provided, the number of ram title	persons benefited, or other	relevant information to	r each	494/	'(a)(1) trusts, optional others)
28					1.0.0	1
20						
					l	
					ļ	
	(Grants \$) If the	nis amount includes foreign g	rants, check here	>	28 a	
29						
					Ì	
					1	
	(Grants \$) If th	nis amount includes foreign gi	rants chack hara	- -	29 a	
30	(diants 2)	ils amount includes foreign gi	rants, check here		234	
30						
			- 			
						
		nis amount includes foreign gi	rants, check here	>	30 a	
31	Other program services (attach schedule	e)				
		is amount includes foreign gi	rants, check here		31 a	
	Total program service expenses (add I			_	32	
Par	t IV List of Officers, Directors	, Trustees, and Key Em	ployees. List each or	ne even if not com	pens	ated (See the instrs.)
		(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense account
	(a) Name and address	per week devoted	not paid, enter -0)	employee benefit plan	ns and	and other allowances
		to position		deferred compensa		
	<u>d Bodington</u>	President	0.		0.	0.
	South of Commons] 0				
Lit	tle Compton, RI 02837					
Tin	othy Beck	Treasurer	0.		0.	0.
	Valley Road	0	•		٠.	· ·
	dletown, RI 02842	ď				
					_	
	n Garcia	Director	0.		0.	0.
	erkeley Avenue	0]				
Mid	dletown, RI 02842					
Ric	hard Gamache	Director	0.		0.	0.
123	Valley Road	n			- 1	.
	dletown, RI 02842	ĭ				
	nk Campagna, Jr.	Dimantan				
		Director	0.		0.	0.
	ood_Terrace	이				
Mid	dletown, RI 02842					
						_
				1	- 1	
	·i					
					Ī	
	·					
	_					
					[
BAA		TEEA0812L 01	/30/10			Form 990-EZ (2009)

TEEA0812L 01/30/10

23-7227127

Form 990-EZ (2009)

Form 990-EZ (2009) Fraternal Order of Police

Pai	Other Information (Note the statement requirements in the instrs for Part V.)			<u> </u>
			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		X
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.			
á	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice		v	
ı	reporting, and proxy tax requirements? b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35a 35b	X	
36		36		х
37 a	a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.	4 57	18. A.	1/2
i	b Did the organization file Form 1120-POL for this year?	37b	3600 XI	X
38 a	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?	38a	***	X
ŀ	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A	4	*	
39	Section 501(c)(7) organizations Enter		*	
á	a Initiation fees and capital contributions included on line 9		李	
	b Gross receipts, included on line 9, for public use of club facilities 0.			
40 a	a 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			Ž
ŀ	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	40 b		
(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	•		, i
(d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	**1	*	1
•	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	3 3 1 40 e		X
41	List the states with which a copy of this return is filed None			
	a The organization's books are in care of ► Mike Nasiff Located at ► 464 Mitchells Lane Middletown RI 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)? If 'Yes,' enter the name of the foreign country •	509 	-739 Yes	9
(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 U S? If 'Yes,' enter the name of the foreign country	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	·		N/A N/A
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead		Yes	<u>No</u>
٠,٠	of Form 990-EZ	44		<u>X</u>
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		Х

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 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 48 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? 49 b 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' (b) Title and average (c) Compensation (d) Contributions to employe (e) Expense (a) Name and address of each employee paid more than \$100,000 hours per week devoted to position benefit plans and deferred compensation 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 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 Here Date RCASUR ea TIMOTHY Type or print name and title Date Preparer's Identifying Number (See instructions) Check if Paid signature Joseph Farmer employed N/A Pre-FARMER & FI Firm's name (or parer's yours if self-employed), address, and ZIP + 4 6 STATE ST Use N/A Only WARREN, 3120 Phone no ► (401) 247-1040 May the IRS discuss this return with the preparer shown above? See instructions ►|X| Yes | No BAA Form 990-EZ (2009)

20	a	0
ZU	u	y

Federal Statements

Page 1

Fraternal Order of Police Middletown Lodge #21

23-7227127

Statement 1 Form 990-EZ, Part I, Line 10 **Grants and Similar Amounts Paid**

Class of Activity:

Donee's Name: Donee's Address: Activities for children Various Charities 464 Mitchells Lane

Middletown, RI 02842 None

Relationship of Donee:

Cash Amount Given:

4,311.

Statement 2 Form 990-EZ, Part I, Line 16 Other Expenses

5K Expenses Advertising and Promotion Event gratuities Insurance Licences and permits Meals & Entertainment Office Expenses Pest control Repairs & Maintenance Supplies Taxes Trash removal Travel	\$ 2,909. 5,998. 699. 4,169. 1,645. 3,437. 2,039. 499. 5,524. 2,330. 4,277. 3,373. 37.
Travel	Total $\frac{37.}{$}$

Statement 3 Form 990-EZ, Part III **Organization's Primary Exempt Purpose**

To support and defend the Constitution of the United States; to inculcate loyalty and allegiance to the United States of America; to promote and foster the enforcement of law and order; to improve the individual and collective proficiency of our members in the performance of their duties; to encourage fraternal, educational, charitable and social activities among law enforcement officers; to advocate and strive for uniform application of the civil service merit system for appointment and promotion; to support the improvement of the standard of living and working conditions of the law enforcement profession through every legal and ethical means available; to creat and maintain tradition of esprit de corps insuring fidelity to duty under all conditions and circumstances; to cultivate a spirit of fraternalism and mutual helpfulness among our members and the people we serve; to increase the efficiency of the law enforcement profession and thus more firmly to establish the confidence of the public in the service dedicated to the protection of life and property.