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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009**Open to Public Inspection**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

A For the 2009 calendar year, or tax year beginning 1 July , 2009, and ending 30 June , 20 10														
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	<table border="1"> <tr> <td rowspan="4">Please use IRS label or print or type. See Specific Instructions.</td> <td colspan="2">C Name of organization Association of Former OSI Special Agents, Inc</td> <td>D Employer identification number 95-3785917</td> </tr> <tr> <td colspan="2">Number and street (or P.O. box, if mail is not delivered to street address) Room/suite</td> <td>E Telephone number 703-978-8042</td> </tr> <tr> <td colspan="2">PO Box 523135</td> <td>F Group Exemption Number ► 3</td> </tr> <tr> <td colspan="2">City or town, state or country, and ZIP + 4 Springfield, VA 22152-5135</td> <td></td> </tr> </table>	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Association of Former OSI Special Agents, Inc		D Employer identification number 95-3785917	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite		E Telephone number 703-978-8042	PO Box 523135		F Group Exemption Number ► 3	City or town, state or country, and ZIP + 4 Springfield, VA 22152-5135		
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• 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: ►

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

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

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 ► \$

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	\$21,635.00
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	\$82,324.00
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a	Gross revenue (not including \$ of contributions 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	0	
7a	Gross sales of inventory, less returns and allowances	7a	\$317.00	
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	\$317.00	
8	Other revenue (describe ► Bank Credit)	8	\$380.00	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	\$104,657.00	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	\$15,000.00
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	\$29,784.00
	16	Other expenses (describe ► See Attached)	16	\$11,150.00
17	Total expenses. Add lines 10 through 16	17	\$55,934.00	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	\$48,722.00
	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	\$333,372.00
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	\$382,094.00

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	\$333,372.00	\$382,094.00
23 Land and buildings		
24 Other assets (describe ►)		
25 Total assets	\$333,372.00	\$382,094.00
26 Total liabilities (describe ►)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	\$333,372.00	\$382,094.00

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

Cat. No. 106421

Form **990-EZ** (2009)

SCANNED NOV 01 2010

P 20

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others)

28	Scholarships and Charity		
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a	\$15,000.00
29	Postage, shipping, mailing and printing member's magazine		
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a	\$29,784.00
30			
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) ►	32	\$44,784.00

(a) Name and address

[illegible]

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	33	✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
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?	35a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
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	36	✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a		
b	Did the organization file Form 1120-POL for this year?	37b	✓
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?	38a	✓
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	
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	40b	✓
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.	40e	✓
41	List the states with which a copy of this return is filed. ► VA		
42a	The organization's books are in care of ► Charles A. Costa Telephone no. ► 301-843-3391 Located at ► 6110 Bison Court, Waldorf, MD ZIP + 4 ► 20603-4341		
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)?	42b	✓
	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.?	42c	✓
	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 and enter the amount of tax-exempt interest received or accrued during the tax year	43	► <input type="checkbox"/>
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
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	✓

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 on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I **46** ☐ **Yes** ☒ **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II **47** ☐ **Yes** ☒ **No**
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E **48** ☐ **Yes** ☒ **No**
- 49a** Did the organization make any transfers to an exempt non-charitable related organization? **49a** ☐ **Yes** ☒ **No**
- b** If "Yes," was the related organization a section 527 organization? **49b** ☐ **Yes** ☒ **No**
- 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 **f** _____

- 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 **d** _____

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 Here *Charles A. Costa* **OCT 12, 2010**
 Signature of officer Date
Charles A. Costa, Treasurer
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed ☐ 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**

AFOSISA Charity Donations

Fisher House Foundation, Inc	\$500.00
111 Rockville Pike, Suite 420	
Rockville, MD 20850	
Wounded Warrior Project	\$500.00
2020 AC Skinner Pkwy, Suite 100	
Jacksonville, FL 32256	
Total Contributions	\$1,000.00

EXPENSES - Line 16

Association Storage Space	\$1,104.00
Bank Charge	\$43.00
Association Pins	\$820.00
Association Plaques	\$410.00
Expense Voucher(s)	\$247.00
Liability Insurance	\$1,483.00
State of VA Registration Fee	\$25.00
Data Base Maintenance	\$1,700.00
Refund	\$8.00
Double Entry (Accounting Error)	\$1,514.00
Triple Entry (Accounting Error)	\$3,680.00
Other	\$116.00

Total	\$11,150.00
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/s/ Charles A. Costa
Treasurer, AFOSISA, Inc

Scholarship Winners for 2009

Name & Address	School	Scholarship Name	Amount
Nicole Jaqueline Givens 5326 Sea Raven Court Waldorf, MD 20603	Virginia Technological University	Earl Middaugh Scholarship	\$1,000.00
Amanda Marie Henderson 316 Old Mills Road Morriston, NY	State University of New York (SUNY)	Earl Middaugh Scholarship	\$1,000.00
Stephanie Lynn Krills 2123B Last Frontier Circle Eielson AFB, AK 99702	University of Alaska	Keith O'Keefe Scholarship	\$1,000.00
Giulia L. Manno 38 Francis Court Stafford, VA 22554	George Mason University	Founder's Scholarship	\$1,000.00
Jonathan Brian McEntee 7875 SW Summerton Avenue Wilsonville, OR 97070	Clackamas Community College	Mathew Kuglics Scholarship	\$1,000.00
Lauern Ashley Moore 1823 Scirocco Loop Fort Walton Beach, FL 32547	Florida State University	4 Year Winner (09, 10, 11, 12 remaining)	\$1,000.00
Matthew Alexander Rodriguez 20811 Wild Springs Drive San Antonio, TX	Lubbock Christian University	Richard Sakakida Scholarship	\$1,000.00
Paul Logan Williams	Des Moines Area Community College	Joseph F. Foye Scholarship	\$1,000.00

5708 Wentworth Johnston, IA 50131	Colorado State University	John Delaney Scholarship	\$1,000.00
Mariel Claire DuPont 1228 Mallard Court Boulder, CO 80303			
Laura Alexandra Ramsey 5124 Payton Chapel Drive Haymarket, VA 20169	George Mason University		\$1,000.00
Brittany A. Savage 12511 Ventura Lane Frederickbutg, VA 22407	Southern Virginia University		\$1,000.00
Previous 4 Year Winners			
Courtney Allison Cresap 7365 East Windwood Way Parker, CO 80154	Georgetown University	(09, 10, 11 remaining)	\$1,000.00
Brittany Leigh Haberstroh 1401 FM 3161 Floresville, TX 78114	Texas A & M	(09, 10 remaining)	\$1,000.00
Alicia Jean Carter 4920 Carriage Park Road Fairfax, VA 22032-8939	Georgia College and State University	(09 remaining)	\$1,000.00
		Total:	\$14,000.00