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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)

OMB No. 1545-0047 2009

Department of the Treasury Internal Revenue Service Open to Public Inspection The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning 2009, and ending 2010 D Employer Identification Number Check if applicable Please use IRS label MERIDIAN POLICE ACTIVITIES LEAGUE 82-0484108 Address change or print or type. See 250 N. BALTIC PLACE A Telephone number Name change MERIDIAN, ID 83642 208-888-6030 Initial return specific Instruc-Termination G Gross receipts \$ 410,306. Amended return H(a) Is this a group return for affiliates? F Name and address of principal officer Application pending H(b) Are all affiliates included? SAME AS C ABOVE If 'No,' attach a list (see instructions) 4947(a)(1) or Tax-exempt status |X| 501(c) (3)) ◄ (insert no.) Website: ► MERIDIANPAL.ORG H(c) Group exemption number Form of organization X Corporation L Year of Formation 1996 M State of legal domicile ID Trust Association Other • Part I Summary Briefly describe the organization's mission or most significant activities PROVIDE A SAFE PLACE FOR KIDS TO PLA If the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 0 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 0 Ō. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 7 b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 80,479 10,434. 342,080. 397,677. Program service revenue (Part VIII, line 2q) Investment income (Part VIII, column (A), lines 3, 4, and 70) ECEI 3,812 2,195. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

Total revenue — add lines 8 through 11 (must equal Part VIII, column (A) <u>54,855</u>. 481,226. 410,306. 12 Grants and similar amounts paid (Part IX, column (A) (lines 1-3) 13 14 Benefits paid to or for members (Part IX, column (A), line 4) 44,782 61.550. Salaries, other compensation, employee benefits (Part IX, column (A) lines 510) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 318,368 376,444. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 437,994. 363,150 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -27,688. 118,076. Revenue less expenses Subtract line 18 from line 12 **End of Year** Beginning of Year 1,236,604 1,265,875 20 Total assets (Part X, line 16) 710,465. 653,505 21 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 583,099 555,410. 22 Part II Signature Block examined the feturn, including accompanying schedules and statements, and to the best of my knowledge and belief, it is are (other than officer) is based on all information of which preparer has any knowledge Sign Here Executive Type or print name and Preparer's identifying number (see instructions) Date Check if Paid employed Preparer's Presignature CAMERON KELLER, CPA N/A parer's KELLER CPAS Firm's name (or Use yours if self-employed), address, and ZIP + 4 700 E FRANKLIN RD SUITE 125 N/A Only MERIDIAN, ID 83642-7992 **►** (208) 887-9541 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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

	n 990 (2009) MERIDIAN POLICE ACTIVITIES LEAGUE	82-04	18410	8		-age ∠
Pa	* Statement of Program Service Accomplishments					
1	Briefly describe the organization's mission PROVIDE A SAFE PLACE FOR KIDS TO PLAY SPORTS.					
2	Did the organization undertake any significant program services during the year which were not listed on t	he prior			_	
	Form 990 or 990-EZ?			Yes	X	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 servi	ces?		Yes	X	No
4	If 'Yes,' describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported	by expens allocation	es Sec s to oth	tion 50 ers, th)1(c)(e tota	(3) al
4:	a (Code:) (Expenses \$ 163,387. including grants of \$) (F					15.)
41	b (Code) (Expenses \$ 69,030. including grants of \$) (FIND FOOTBALL / FLAG FOOTBALL			6	7,52	23.
	THE PRINCIPAL FOCUS OF THE FOOTBALL AND FLAG FOOTBALL PROGRAMS IS FUNDAMENTALS OF FOOTBALL THROUGH A RECREATIONAL PROGRAM. MANY OF CONTINUE ON TO OTHER FOOTBALL PROGRAMS OFFERED IN THE TREASURE VAI SEASONS ARE IN THE FALL AND THE SPRING, THE PROGRAM SERVED APPROXICHILDREN THIS YEAR.	THE PL LEY. MATELY	AYERS FOOTE 1,40	SALL OO		
	PASSING A BACKGROUND CHECK COORDINATED THROUGH THE STATE POLICE IS COACHES, BOARD MEMBERS AND OTHER ADULTS WHO HAVE CONTACT WITH THE PARTICIPANTS.	REQUI		E AI	<u></u>	
4	c (Code:) (Expenses \$ 33,464. including grants of \$) (F					25.)
	d Other program services. (Describe in Schedule O.) SEE SCHEDULE O					
4	d Other program services. (Describe in Schedule O.) (Expenses \$ 40,464. including grants of \$) (Revenue \$		37,2	220	١	
4	e Total program service expenses ► 306, 345.				<u> </u>	

Part 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 X 1 2 X Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Х for public office? If 'Yes,' complete Schedule C, Part I 3 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х 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 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 Х 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 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 Х 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 9 Х Schedule D, Part IV 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 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or Х 11 X as applicable 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 167 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х No 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 Х X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 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 X 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 Х 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 Х 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 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 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 X 20 Х Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

			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		Х
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24	a 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, and 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		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		Х
	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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		х
	c 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		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	\dashv	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
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		х
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? If 'Yes,' complete Schedule R, Part I	33_		х
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		х
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
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, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38		х
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Form **990** (2009)

Form 990 (2009) MERIDIAN POLICE ACTIVITIES LEAGUE 82-04841	08	F	age 5
Part 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 1a	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 _c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the	1		
calendar year ending with or within the year covered by this return	<u>o</u>		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
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		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3b		
4a 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		х
b 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	7		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c 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 organization solicit any contributions that were not tax deductible?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?	ot 6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	s -		
provided to the payor?	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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.			
a Did the organization make any taxable distributions under section 4966?	9a		L
b Did the organization make any distribution to a donor, donor advisor, or related person?	9ь		
10 Section 501(c)(7) organizations. Enter	1		
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	╛		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other 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			

BAA Form 990 (2009) 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.

Section A.	Governing Body and Management				
				Yes	No
1 a Enter the	number of voting members of the governing body	1a 7			
b Enter the	number of voting members that are independent .	1b			
2 Did any officer, d	officer, director, trustee, or key employee have a family relationship or a business re irector, trustee or key employee? .	elationship with any other	2		<u>X</u>
3 Did the o	rganization delegate control over management duties customarily performed by or	under the direct supervision			
	s, directors or trustees, or key employees to a management company or other pers	on'	3		X
	rganization make any significant changes to its organizational documents prior Form 990 was filed?		4		X
	rganization become aware during the year of a material diversion of the organization	on's assets?	5		Х
	organization have members or stockholders?		6		X
	organization have members, stockholders, or other persons who may elect one or	more members of the	7a		х
-	decisions of the governing body subject to approval by members, stockholders, or c	ther persons?	7b		X
8 Did the o	rganization contemporaneously document the meetings held or written actions unde	ertaken during the year by			
	erning body?		8a		X
•	nmittee with authority to act on behalf of the governing body?		8ь		$\frac{1}{X}$
9 Is there a	any officer, director or trustee, or key employee listed in Part VII. Section A, who ca	annot be reached at the			
	ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	and the state of t	9		<u> X</u>
Section B. Revenue Code	Policies (This Section B requests information about policies not	requirea by the internai			
	<u> </u>			Yes	No
10a Does the	organization have local chapters, branches, or affiliates?		10a		X
b If 'Yes,' o	does the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	10b		_
	organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11		X
	in Schedule O the process, if any, used by the organization to review this Form 99	_			
	organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
	ers, directors or trustees, and key employees required to disclose annually interests	that could give rise	12b		х
	organization regularly and consistently monitor and enforce compliance with the post of the second o	olicy? If 'Yes,' describe in	12c		х
	organization have a written whistleblower policy?		13		X
	organization have a written document retention and destruction policy?		14	-	X
	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent			
		ecision?			
=	nization's CEO, Executive Director, or top management official		15 a	\dashv	X
	icers of key employees of the organization		15 b		<u> </u>
	o line 15a or 15b, describe the process in Schedule O. (See instructions.)		ŀ		. 1
	rganization invest in, contribute assets to, or participate in a joint venture or similal ring the year?	r arrangement with a taxable	16a		X
ın joint v	nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard	n to evaluate its participation If the organization's exempt	101		
	th respect to such arrangements? Disclosures		16b		
18 Section 6	itates with which a copy of this Form 990 is required to be filed $ ho$ _ <u>ID</u>		– – – aılabl	e for p	 public
inspectio	n Indicate how you make these available. Check all that apply. website Another's website Upon request				
19 Describe	in Schedule O whether (and if so, how) the organization makes its governing docuits available to the public	ments, conflict of interest poli	cy, an	id fina	incial
20 State the	name, physical address, and telephone number of the person who possesses the	=			
► MERID	IAN POLICE ACTVTS LEAGUE 250 N. BALTIC PLACE, SUITE	A WEKIDIAN ID 836	<u> 2</u> 2	08-8	188-

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 organizations'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 employees.'
- 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 no	ot compen	sate a	ıny (curre	ent e	officer	, dır	ector, or trustee		
(A)	(B) (c)							(D)	(E)	(F)
Name and Title	Average hours				_	hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
TOM ROY										
EXECUTIVE DIREC	0							8,308.	0.	0.
RUSS KARN										
COMMISSIONER	0							0.	0.	0.
BART JACKSON]						ļ			
SOCCER PRES	0						<u>L</u> _	0.	0.	0.
BRIAN SIMER]									
FOOTBALL PRES	0							0.	0.	0.
DIANNE GRIFFITS										
HOCKEY PRES	0			L				0.	_0.	0.
JULIE_BURKETT			l					_	_	_
BASEBALL PRES	0		_					0.	0.	0.
JOHN GONZALES	1							_		_
POLICE LIAISON	0	 	-				<u> </u>	0.	_0.	0.
MARK LIGHTNER			ŀ							
VICE COMISINER	0	-	Н				<u> </u>	0.	0.	0.
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Part VII Section A. Officers, Directors, Trus				ıplo	oye	es,	an	d Highest Con	npensated Em	_	s (cont.)
(A)	(B)				c)			(D)	(E)		(F)
Name and Title	Average hours per week							compensation from	Reportable compensation from related organizations	l amo	Stimated ount of other opensation
	per week	direct	Institutional trustee	Officer	y emp	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	or	from the ganization nd related
		or taus	nal tr		loyee	ecomp		ł			ganizations
		e e	ustee			ensate					
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				!	<u> </u>						
1 b Total	L			l		ļ	•	8,308.	0		0
2 Total number of individuals (including but not limite	d to tho	se li	sted	labo	ove)) wh	o re		\$100,000 in repoi	rtable co	
from the organization 0											Tv Lu.
2.2.1					. 1						Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it										3	Х
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater ti	portable	cor	npe	nsat	ion	and	oth	er compensation	from such		ļ. <u>.</u>
individual	nan pro	,0,00			-			c conedate a for s		4	<u> </u>
5 Did any person listed on line 1a receive or accrue c rendered to the organization? If 'Yes,' complete Sci	ompens	atio	n fro	om a	any erso	unre	elate	ed organization foi	services	5	X
Section B. Independent Contractors											
1 Complete this table for your five highest compensation from the organization	ed inde	pend	dent	cor	ntrac	ctors	s tha	it received more t	han \$100,000 of		
(A)								(B)) of Sanuage	Comp	C)
Name and business addres	<u>s</u>			-				Description o	of Services	Compe	ensation
											_
										_	
		-									
											·
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		lımı	ted	to th	nose	e list	ted a	above) who receiv	ed more than		
					_						

Pa	rt 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
S	1a Federated campaigns 1a				
RAN	b Membership dues 1b 10,434.				
S, G	c Fundraising events. 1c				
AR.	d Related organizations 1d				
NS, (e Government grants (contributions) 1 e				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
NO ON	g Noncash contribns included in lns 1a-1f: \$				
<u>8</u> ✓	h Total. Add lines 1a-1f	10,434.			
NUE	Business Code	201 646	201 646		
EVE	2a REGISTRATION FEES	381,646.	381,646.		
ä	b SPORT CAMP REVENUE	5,160.	5,160.		
Z.	c TOURNAMENT FEES	3,950. 3,489.	3,950. 3,489.		
A SE	d EQUIPMENT SALES	2,801.	2,801.	·	**********
RA	e CONCESSIONS REVENUE	631.	631.		
8	f All other program service revenue	397,677.	031.	 	
		391,011.			
	Investment income (including dividends, interest and other similar amounts)	2,195.	2,195.		
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) . ▶				
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss)				<u> </u>
	d Net gain or (loss)				
NOE	8a Gross income from fundraising events (not including \$				
OTHER REVENU	of contributions reported on line 1c)				
8	See Part IV, line 18				
E	b Less direct expenses b				-
_	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				·
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances . a				
	b Less: cost of goods sold b				ļ
	c Net income or (loss) from sales of inventory				ļ
	Miscellaneous Revenue Business Code				·
	11a			<u> </u>	
	b				
	C				
	d All other revenue				
	e Total. Add lines 11a-11d	410 200	200 070		
	12 Total revenue. See instructions	410,306.	399,872.	0.	0.

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).

Do .	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
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	8,308.	0.	8,308.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.	46,364.	15,041.	31,323.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	_			
9	Other employee benefits.				
10	Payroll taxes	6,878.	1,760.	5,118.	
11	Fees for services (non-employees)				
á	Management				· <u> </u>
t	Legal				
(: Accounting				
(Lobbying				
•	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	Other				
12	Advertising and promotion	1,871.	1,871.		
13	Office expenses	6,814.	3,923.	2,891.	
14	Information technology				
15	Royalties				
16	Occupancy	52,493.	36,583.	15,910.	
17	Travel	2,491.	1,060.	1,431.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	11,255.	11,255.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,752.	6,582.	9,170.	
	Insurance	14,284.		14,284.	
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).				
	UNIFORMS	71,593.	71,296.	297.	
	PROFESSIONAL FEES	64,545.	38,490.	26,055.	
(REFEREE EXPENSE	32,787.	32,787.		· <u>·</u>
	TEAM PHOTOS	25,428.	25,428.		
•	FIELD MAINTENANCE	14,039.	13,205.	834.	
1	All other expenses	63,092.	47,064.	16,028.	
_25	Total functional expenses. Add lines 1 through 24f	437,994.	306,345.	131,649.	0.
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				
BAA				•	Form 990 (2009)

			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	244,714.	1	280,868
	2	Savings and temporary cash investments	 	2	
	3	Pledges and grants receivable, net		3	500
	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	
~ · · · · · ·	7	Notes and loans receivable, net		7	<u> </u>
	8	Inventories for sale or use		8	<u>.</u>
•	9	Prepaid expenses and deferred charges	13,807.	9	14,642
	10a	Land, buildings, and equipment: cost or other basis. 10a 1,084,643. Complete Part VI of Schedule D			
ļ	b	Less: accumulated depreciation . 10b 114,778.	978,083.	10 c	969,865
-	11	Investments — publicly-traded securities.		11	
	12	Investments – other securities See Part IV, line 11		12	
ĺ	13	Investments – program-related See Part IV, line 11 .		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	1,236,604.	16	1,265,875
	17	Accounts payable and accrued expenses	4,536.	17	619
	18	Grants payable		18	
ı	19	Deferred revenue	118,794.	19	198,815
١	20	Tax-exempt bond liabilities		20	
1	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
	}	of Schedule L .		22	
	23	Secured mortgages and notes payable to unrelated third parties	528,611.	23	510,047
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	1,564.	25	984
	26	Total liabilities. Add lines 17 through 25.	653,505.	26	710,465
!		Organizations that follow SFAS 117, check here ► X and complete lines			
		27 through 29 and lines 33 and 34.			
	l	Unrestricted net assets	583,099.	27	555,410
	ı	Temporarily restricted net assets	· · · · · · · · · · · · · · · · · · ·	28	
	29	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·	29	
3		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	
1	31	Paid-in or capital surplus, or land, building, and equipment fund .		31	
;	32	Retained earnings, endowment, accumulated income, or other funds		32	
שית ותביות	33	Total net assets or fund balances.	583,099.	33	555,410
5	34	Total liabilities and net assets/fund balances	1,236,604.	34	1,265,875

form 990 (2009) MERIDIAN POLICE ACTIVITIES LEAGUE	82-0484108	Pa	ige 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990. Cash X 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		X
b Were the organization's financial statements audited by an independent accountant?	. 2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit, 2c		
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ain		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both	ere issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	h in the Single		Х

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.

BAA

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name o	ame of the organization Employer identification number													
MER	IDI	AN	POLICE A	CTIVITIES LEAG	UE					82-04	<u> 184108</u>	}		
Part	:1	Rea	son for Pu	blic Charity Statu	s (All organizations	must c	comple	te this	part.)	See II	nstruct	ions		
The o	rgar	nzati	on is not a pri	vate foundation becau	ise it is (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1					ociation of churches desc									
2	П	A sch	nool described	i in section 170(b)(1)(A)(ii). (Attach Schedule E	Ξ)								
3	_				e organization described		on 170(l	χ1χΑχ	iii).					
4					d in conjunction with a h					0(b)(1)(A	A)(iii) . Er	iter the ho	spital's	S
	_		e, city, and sta	-	,	•								
5		An o 170(l	rganization op 5)(1)(A)(iv). ((perated for the benefit Complete Part II.)	of a college or university					nmenta	l unit de:	scribed in	sectio	n -
6 7	П	An o	rganization th	at normally receives a	governmental unit descri substantial part of its su	bed in s ipport fr	ection 1 om a go	70(b)(1) vernme	(A)(v). ntal unı	t or fron	n the ger	neral public	c desc	ribed
8	In section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)													
9	囨	An or	nanization that	normally receives: (1)	more than 33-1/3 % of its:	support f	rom conf	tributions	s. memb	ership fe	es, and o	ross receip	ots	
-	_	from	activities relate	ed to its exempt function	is — subject to certain exce ess taxable income (less	entions :	and (2) n	o more 1	than 33-	1/3 % of	its suppo	ort from aro	SS	after
10	\Box	An o	rganization or	ganized and operated	exclusively to test for pu	iblic safe	ety. See	section	1 509(a)	(4).				
11	ш	more	nublicly supp	ported organizations of	exclusively for the benef lescribed in section 509(a zation and complete lines	a)(1) or	section	509(a)(2	ctions (2) See	of, or ca section	rry out th 509(a)(3	ne purpose). Check t	s of o he bo	ne or x that
		a C	Type I	b Type II	c Type III				ted		d \square	Type III-	Othe	r
е		Bv.cl	necking this be foundation ma	ox. I certify that the or	ganization is not controll n one or more publicly s	led direc	tlv or in	directly	bv one	or more ed in se	disqualiction 509	fied perso	ons oth	ner
f		If the	,,,,	received a written det	ermination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting	organizatio	n,	
g		_		2006 has the organiza	ition accepted any gift o	r contrib	ution fro	om anv	of the f	ollowina	persons	?		
9			c / lagast 17, E	too, has the organiza	mon dooptod any girt o					- · · · · · · · · · · · · · · · · · · ·			Yes	No
		(i)	a person who below, the go	o directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d in (ii) i	and (III)	11 g (i)		
		(ii)	a family men	nber of a person desc	cribed in (i) above?							11 g (ii)		
		(iii)	a 35% contro	olled entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)	<u> </u>	
h		Prov	ide the followi	ng information about t	the supported organization	ons								
	(1)	Name Org	of Supported anization	(iı) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed gove	Is the tion in cold in your erning ment?	the organ	ou notify uzation in (i) of upport?	organizat (i) organi	s the ion in cot zed in the S ?	(VII) Amou	nt of Sup	oport
						Yes	No	Yes	No	Yes	No			

<u>r ai</u>	Complete only if you shock	-				id ivo(b)(יארי	(VI)
Sec	(Complete only if you check tion A. Public Support	ed the box on line	e 5, 7, or 8 of Pa	rt 1.)				
Cale begi	ndar year (or fiscal year nning in) >	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge.							
4	Total. Add lines 1-through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support				,			
	ndar year (or fiscal year nning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on						-	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	rities, etc. (see ins	structions)				12	
13	First five years. If the Form 990 organization, check this box and		ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section !	501(c)	(3)
	tion C. Computation of Pu							
	Public support percentage for 20 Public support percentage from			ne 11, column (f)		·	14 15	<u>%</u>
16 <i>a</i>	33-1/3 support test – 2009. If the and stop here. The organization				d the line 14 is 33	3-1/3 % or m	ore, c	heck this box
t	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a put	I not check a box olicly supported o	on line 13, or 16a	a, and line 15 is 3	33-1/3% or m	nore, c	theck this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	es' test, check this	box and stop he	re. Explain i	n Part	IV how
ł	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstance	es' test, check this	box and stop he	re. Explain i	n Part	IV how the
	Private foundation. If the organi	zation did not che	eck a box on line	, 13, 16a, 16b, 17a				
BAA					Sc	:hedule 🗛 (F	orm 99	90 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 MERIDIAN POLICE ACTIVITIES LEAGUE Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

	(Complete only if you chec	cked the box on an	ne 3 of Fait 1)				
	tion A. Public Support						
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants ')	465,363.	452,563.	589,287.	422,559.	376,331.	2,306,103.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	74,565.	56,720.	60,137.	57,105.	31,780.	280,307.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	539,928.	509,283.	649,424.	479,664.	408,111.	2,586,410.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
_	Public support (Subtract line						
·	7c from line 6.)						2,586,410.
Sec	tion B. Total Support			L			270007120.
	tion of rotal cappoit						
Calo	ndar vear (or fiscal yr heginning in)	(a) 2005	(h) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ndar year (or fiscal yr beginning in)	(a) 2005 539 928	(b) 2006	(c) 2007	(d) 2008 479 664	(e) 2009 408 111	(f) Total 2 586 410
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	539,928.	509,283.	649,424.	479,664.	408,111.	2,586,410.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	539,928. 4,914.		649,424. 820.	479,664. 1,562.	408,111. 2,195.	2,586,410. 10,737.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	539,928.	509,283.	649,424.	479,664.	408,111.	2,586,410. 10,737.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	539,928. 4,914.	1,246.	649,424. 820.	479,664. 1,562.	408,111. 2,195.	2,586,410. 10,737. 0. 10,737.
9 10 a t	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	539,928. 4,914.	1,246.	649,424. 820.	479,664. 1,562.	408,111. 2,195.	2,586,410. 10,737. 0. 10,737. 0.
9 10 a 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12)	4,914. 4,914.	1,246. 1,246.	820. 820.	1,562. 1,562.	2,195. 2,195.	2,586,410. 10,737. 0. 10,737. 0. 2,597,147.
9 10 a 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12)	4,914. 4,914.	1,246. 1,246.	820. 820.	1,562. 1,562.	2,195. 2,195.	2,586,410. 10,737. 0. 10,737. 0. 2,597,147.
9 10 a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	539, 928. 4, 914. 4, 914.	1,246.	820. 820.	1,562. 1,562.	2,195. 2,195.	2,586,410. 10,737. 0. 10,737. 0. 2,597,147.
9 10a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put	4, 914. 4, 914. s for the organization here	1,246. 1,246. ation's first, secondercentage	820. 820.	1,562. 1,562.	2,195. 2,195. 2,195.	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) ► □
9 10 a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	4, 914. 4, 914. 4, 914. stop the organization here blic Support P	1,246. 1,246. 1,246. ation's first, secondercentage n (f) divided by line	820. 820.	1,562. 1,562.	2,195. 2,195. 2,195. a section 501(c)	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) ► □
9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from 20	4, 914. 4, 914. 4, 914. stop here blic Support P 09 (line 8, column 2008 Schedule A,	1,246. 1,246. 1,246. ation's first, secondercentage (f) divided by line Part III, line 15	820. 820.	1,562. 1,562.	2,195. 2,195. 2,195.	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) ► □
9 10a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage from 20 Public support percentage from 21 tion D. Computation of Inv	539, 928. 4, 914. 4, 914. 4, 914. Stop here blic Support Polic Support S	1,246. 1,246. 1,246. ation's first, secondercentage (f) divided by line Part III, line 15 ne Percentage	820. 820.	1,562. 1,562. r fifth tax year as	2,195. 2,195. 2,195. 3 a section 501(c) 15 16	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6%
9 10a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from a tion D. Computation of Inv	4, 914. 4, 914. 4, 914. 4, 914. Is for the organization here blic Support Police 109 (line 8, column 2008 Schedule A, estment Incon or 2009 (line 10c,	1,246. 1,246. 1,246. 1,246. ation's first, secondercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided	820 . 820 . d, third, fourth, o	1,562. 1,562. r fifth tax year as	2,195. 2,195. 2,195. 3 a section 501(c) 15 16	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6% 0.4%
9 10a 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from 2 Investment income percentage fines	4, 914. 4, 914. 4, 914. 4, 914. Stop here blic Support Properties of the organization of the organiza	1,246. 1,246. 1,246. 1,246. 1,000 ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line	820. 820. 820.	1,562. 1,562. r fifth tax year as	2,195. 2,195. 2,195. 2,195. 15 16	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6% 0.4% 0.4%
9 10a 11 12 13 14 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage from 20 public support percentage from 21 investment income percentage from 23-1/3 support tests – 2009. If the comore than 33-1/3%, check this box	4, 914. 4, 914. 4, 914. 4, 914. Is for the organization here blic Support Polic S	1,246. 1,246. 1,246. 1,246. 1,000 ation's first, second ercentage in (f) divided by line Part III, line 15 ince Percentage column (f) divided e A, Part III, line check the box on line The organization	d, third, fourth, of the 13, column (f)) I by line 13, column (f) and line 15 is qualifies as a put	1,562. 1,562. 1,562. r fifth tax year as more than 33-1/3 olicly supported control of the sup	2,195. 2,195. 2,195. 2,195. 15 16 17 18 %, and line 17 is no organization	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6% 0.4% 0.4% 0.4%
9 10a 11 12 13 14 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20 Public support percentage from 21 tion D. Computation of Investment income percentage filinestment income perce	1539, 928. 4, 914. 4, 914. 4, 914. 4, 914. 15 for the organization did not ox and stop here. 16 organization did not ox and stop here. 17 need to recover the organization did not ox and stop here. 18 need to reganization did not ox and stop here. 19 need to reganization did not ox and stop here. 19 need to reganization did not ox and stop here.	1,246. 1,246. 1,246. 1,246. 1,246. 1,000 attories first, second ercentage of the first, second ercentage of the first first, second ercentage of the first fi	d, third, fourth, of the 13, column 17 ne 14, and line 15 is qualifies as a put on line 14 or 19a	1,562. 1,562. 1,562. r fifth tax year as more than 33-1/3 blicly supported control and line 16 is more than 18 is more than	2,195. 2,195. 2,195. 2,195. 15 16 17 18 %, and line 17 is no organization more than 33-1/3%	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4%
9 10a 11 12 13 14 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage from attion D. Computation of Investment income percentage finds: 33-1/3 support tests – 2009. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3%, check this bits 33-1/3 support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% support tests – 2008. If the comore than 33-1/3% sup	4, 914. 4, 914. 4, 914. 4, 914. 4, 914. 914. 109 (line 8, column 2008 Schedule A, estment Inconor 2009 (line 10c, rom 2008 Schedule organization did not look and stop here. The organization did not this box and stop the stop and stop here.	1,246. 1,246. 1,246. 1,246. 1,246. 1,000 percentage In (f) divided by line perce	d, third, fourth, of the 13, column 17 ne 14, and line 15 is qualifies as a put on line 14 or 19a zation qualifies as	1,562. 1,562. 1,562. r fifth tax year as more than 33-1/3 olicly supported contains a publicly supported contains a publicl	2,195. 2,195. 2,195. 2,195. 15 16 17 18 %, and line 17 is no organization more than 33-1/3% orted organization	2,586,410. 10,737. 0. 10,737. 0. 2,597,147. (3) 99.6% 99.6% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4% 0.4%

Part IV	Supplemer Part II, line	990-E2) 20 ntal Inform 17a or 1	nation. Col 7b; and Pa	mplete this art III, line	part to pro 2. Provide	ovide the ex any other a	planations radditional inf	equired by Pa formation. Se	art II, line 10 e instructior	Page 4 0; ns.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

MERIDIAN POLICE ACTIVITIES LEAGUE

Employer Identification number

PILI	MIDIAN FOLICE ACTIVITIES LEAGE	, <u>.</u>	82-0484108
Pa	rt Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	and or resource complete in
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		**
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in	donor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	rs, and donor advisors in writing that grant fu	unds may be
Pai	rt II Conservation Easements Comple	ete if the organization answered 'Yes	s' to Form 990. Part IV. line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., r		n of an historically important land area
	Protection of natural habitat		n of certified historic structure
	Preservation of open space		
2	<u> </u>	on held a qualified conservation contribution	in the form of a conservation easement on the
			Held at the End of the Year
4	Total number of conservation easements .		2 a
ı	Total acreage restricted by conservation ease	ments .	2 b
•	Number of conservation easements on a certi	fied historic structure included in (a)	2c
•	Number of conservation easements included i	n (c) acquired after 8/17/06 .	2 d
3	Number of conservation easements modified,	transferred, released, extinguished, or termin	nated by the organization during the tax
	year ►		, -
4	Number of states where property subject to co	onservation easement is located 🟲	
5	Does the organization have a written policy re and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitoring the year		
7	Amount of expenses incurred in monitoring, in during the year ►	nspecting, and enforcing conservation easem	\$
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	section Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements.		
Pai	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, In	or Other Similar Assets e 8.
1 2	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial stateme	lic exhibition, education, or research in furthe	ement and balance sheet works of art, historical erance of public service, provide, in Part XIV,
ı	b If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items.	lic exhibition, education, or research in furthe	erance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1	►\$ ►\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets 116 relating to these items.	s for financial gain, provide the following
•	a Revenues included in Form 990, Part VIII, line	e 1 .	▶ \$
1	Assets included in Form 990, Part X .		► \$

Part III Organizations Mainta	ining Collection	ns of Art, Histo	<u>orical Treasures, o</u>	r Other Similar Ass	ets (contin	ued)
3 Using the organization's acquisit items (check all that apply):	ion accession and	_		that are a significant us	se of its collect	lion
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e [_] Other	,			
c Preservation for future gener						
4 Provide a description of the orga Part XIV.					se in	
5 During the year, did the organiza assets to be sold to raise funds					Yes	No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangements unt on Form 99	s Complete if on the complete of the complet	organization answe 21.	red 'Yes' to Form 9	90, Part IV,	line
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian, or	other intermedian	y for contributions or other	her assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and co	implete the follow	ing table.			
					Amount	
c Beginning balance .	•			1c		
d Additions during the year .				1d		
 Distributions during the year 				1 e		
f Ending balance .	•	••		1f		
2a Did the organization include an a		0, Part X, line 21	?		Yes	No
b if 'Yes,' explain the arrangement			107 11 5 07	20 D 10/1 10		
Part V Endowment Funds Co	<u> </u>				1	
	(a) Current year	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four yea	rs back
1 a Beginning of year balance	<u> </u>	_				
b Contributions				- 		
c Net Investment earnings, gains, and losses						
d Grants or scholarships						
 Other expenditures for facilities and programs 						<u> </u>
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentag	e of the year end b	alance held as:				
a Board designated or quasi-endov	wment ►	%				
b Permanent endowment •	%					
c Term endowment ►	 8					
3a Are there endowment funds not	in the possession o	of the organization	that are held and adm	inistered for the		-
organization by:	,	J			Yes	No
(i) unrelated organizations		•			3a(i)	↓
(ii) related organizations	•	•	•	• •	3a(ii)	ļ
b If 'Yes' to 3a(II), are the related (•	•			3b	
4 Describe in Part XIV the intende						
Part VI Investments-Land, B						
Description of investment		ost or other basis (investment)	basis (other)	(c) Accumulated Depreciation	(d) Book V	
1 a Land .			800,000.		800	,000.
b Buildings	<u> </u>		·			
c Leasehold improvements	<u> </u>		151,431.	19,929.		,502.
d Equipment .	<u> </u>		26,184.	16,833.		, 351.
e Other	L_		107,028.	78,016.		,012.
Total. Add lines 1a through 1e (Column	n (d) must equal F	orm 990, Part X, c	column (B), line 10(c))	<u> </u>		<u>, 865.</u>
BAA				Sched	lule D (Form 9	90) 2009

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Part VII	Investments-Other Securities See	Form 990, Part X, line	e 12. N/A	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	ation ket value
Financial d				
	ld equity interests .			
Other				
				
				
	-			
				 -
				·····
		-		
Total. (Colui	mn (b) must equal Form 990 Part X, col (B) line 12.)	-		·
	Investments-Program Related (See	Form 990, Part X, Jir	ne 13) N/A	
<u> </u>	(a) Description of investment type	(b) Book value	(c) Method of valua	ntion
. <u> </u>	(2) Description of investment type	(B) Book value	Cost or end-of-year mar	ket value
Total. (Colum	nn (b) must equal Form 990, Part X, Col (B) line 13.)			
Part IX	Other Assets (See Form 990, Part X	(, line 15) N/A		
	(a) [Description		(b) Book value
		. <u>.</u>		
				
		 		
		- <u></u> -		
			······································	
	lumn (b) must equal Form 990, Part X, col (B)			
Part X	Other Liabilities (See Form 990, Par	t X, line 25)	- 	
	(a) Description of Liability	(b) Amount		
Federal Inc	come Taxes			
PAYROL	L TAXES	984	4.	
				ı
	<u> </u>			
Total. (Colun	nn (b) must equal Form 990, Part X, col. (B) line 25)	984	4.	
2. FIN 48 F	controle in Part XIV provide the text of the fo	otnote to the organization'	s financial statements that reports the	organization's liability

Schedule D (Form 990) 2009 MERIDIAN POLICE ACTIVITIES LEAGUE

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

82-0484108

Page 3

Sche	edule D (Form 990) 2009 MERIDIAN POLICE ACTIVITIES LEAGUE	82-048	34108	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities .			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
1	Total revenue, gains, and other support per audited financial statements .	1		·
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments . 2a			
	Donated services and use of facilities 2b	_		
	Recoveries of prior year grants . 2c	7		
	Other (Describe in Part XIV)	7]		
	Add lines 2a through 2d.	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investments expenses not included on Form 990, Part VIII, line 7b.			
	O Other (Describe in Part XIV)	┪		
	Add lines 4a and 4b	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p		rn N/A	
1	Total expenses and losses per audited financial statements	1 1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities]]		
	Prior year adjustments	\dashv \mid		
	Other losses 2c	⊣		
	Other (Describe in Part XIV)	ㅋ		
	Add lines 2a through 2d.	2e		
	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	<u> </u>	* * * * * * * * * * * * * * * * * * * *	
·	Investments expenses not included on Form 990, Part VIII, line 7b.			
	Other (Describe in Part XIV)	7		
	Add lines 4a and 4b	4c		
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		-
	t XIV Supplemental Information		A	
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this mation.	IV, lines part to p	1b and 2b, Parovide any ad	art V, ditional
		. 		
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TEEA3304L 02/02/10

Schedule **D** (Form 990) 2009

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Schedule D (Form 990) 2009 MERIDIAN POLICE ACTIVITIES LEAGUE Part XIV Supplemental Information (continued)	82-0484108	Page 5
PartXIV Supplemental Information (continued)		
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SCHEDULE O (Formi 990)

Supplemental Information to Form 990

OMB No. 1545-0047

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

► Attach to Form 990.

2009 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 82-0484108 MERIDIAN POLICE ACTIVITIES LEAGUE <u> FORM 990, PART III. LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS</u> _SOCCER_ THE SOCCER LEAGUE SERVED OVER 2,700 PARTICIPANTS DURING THE FALL AND SPRING SEASONS. THE ORGANIZATION OPERATED SOCCER PROGRAMS FOR CHILDREN FROM AGES 4 THROUGH 17, DIVIDED INTO DIFFERENT AGE GROUPS. WHILE THE PRIMARY EMPHASIS IS ON RECREATIONAL <u>SOCCER AND RELATED DEVELOPMENT OF SKILLS, TEAMSMANSHIP, SPORTSMANSHIP AND OTHER</u> QUALITIES, THE ORGANIZATION ALSO OPERATES A LEAGUE FOR MORE ADVANCED PLAYERS AND FOR COMPETITIVE PLAYERS IN THE TREASURE VALLY SOCCER LEAGUE. THE LATTER LEAGUE REQUIRES PLAYERS TO TRAVEL WITHIN THE STATE OF IDAHO TO REGIONAL EVENTS. GAMES ARE PLAYED ON SATURDAYS FOR THE RECREATIONAL AND ADVANCED LEAGUES AND ON _ _ _ WEEKENDS AND SOME WEEKDAYS IN THE COMPETITIVE LEAGUE. IN ORDER TO IMPROVE THE SKILLS OF ALL PLAYERS, SOCCER CAMPS AND PROFESSIONAL COACHES ARE PROVIDED TO ALL SOCCER COACHES. THE COACHES ARE ENCOURAGED TO OBTAIN COACHING <u>LICENSES WHICH REQUIRES THEM TO ATTEND TRAINING CAMPS RANGING FROM 20 HOURS TO OVER</u> 40 HOURS OF INSTRUCTION. PASSING A BACKGROUND CHECK COORDINATED THROUGH THE STATE POLICE IS REQUIRED OF ALL COACHES, BOARD MEMBERS AND OTHER ADULTS WHO HAVE CONTACT WITH THE SOCCER __PARTICIPANTS. FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS BASEBALL THE BASEBALL PROGRAM SERVED OVER 725 PARTICIPANTS BETWEEN THE AGES OF 3 AND 8.

MERIDIAN POLICE ACTIVITIES LEAGUE	82-0484108
FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS (CON	TINUED)
PRINCIPAL FOCUS IS ON TEACHING THE FUNDAMENTALS OF BASEBALL THE	ROUGH A RECREATIONAL
PROGRAM. THE LEAGUE USES BOTH T-BALL AND PITCHING MACHINES FOR	R THE YOUNGER
CHILDREN. MANY OF THE PLAYERS CONTINUE ON TO OTHER BASEBALL PR	ROGRAMS OFFERED IN THE
TREASURE VALLEY. THE BASEBALL SEASON BEGINS IN MAY AND CONTINU	JES INTO JUNE, FOR A
TOTAL OF ABOUT 7 WEEKS.	
	.
PASSING A BACKGROUND CHECK COORDINATED THROUGH THE STATE POLICE	IS REQUIRED OF ALL
COACHES, BOARD MEMBERS AND OTHER ADULTS WHO HAVE CONTACT WITH I	THE BASEBALL
PARTICIPANTS.	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	
REAL ESTATE ACQUISITION FUND	
FUNDRAISING EXISTS WITHIN THE ORGANIZATION TO SUPPORT THE PROGE	RAMS IF THEY NEED
ADDITIONAL FUNDING THAT DOES NOT COME FROM THE PROGRAMS THEMSEL	VES. FUNDRAISING
ALSO HELPS TO SUPPORT THE ADMINISTRATIVE FUNCTION OF THE ORGANI	ZATION AND THE
INTEREST PAYMENTS THAT ARE DUE ON THE LAND THAT WAS PURCHASED.	FUNDRAISING ALSO
GOES TOWARDS HEROES PARK IMPROVEMENTS	
IN-LINE HOCKEY	
THE IN-LINE HOCKEY PROGRAM OPERATES A SUMMER OUTDOOR LEAGUE DUE	RING THE MONTHS OF
JUNE AND JULY. CHILDREN FROM AGES 6 THROUGH 12 CAN PARTICIPATE	IN THE PROGRAM. THE
PROGRAM SERVED ABOUT 65 CHILDREN THIS YEAR. IN-LINE HOCKEY GEN	NERALLY FOLLOWS THE
SAME SET OF RULES AS ICE HOCKEY, EXCEPT THAT CHECKING IS NOT AI	LOWED. THE PRIMARY
FOCUS OF THE PROGRAM IS RECREATIONAL GAMES PLAYED SOLELY WITHIN	THE LEAGUE.

Schedule 0 (Form 990) 2009		age 2
Name of the organization MERIDIAN POLICE ACTIVITIES LEAGUE	Employer identification number 82-0484108	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CONTINUED)	
PASSING A BACKGROUND CHECK COORDINATED THROUGH THE STATE POLI	CE IS REQUIRED OF ALL	
COACHES, BOARD MEMBERS AND OTHER ADULTS WHO HAVE CONTACT WITH	THE IN-LINE HOCKEY	
PARTICIPANTS.		-
BASKETBALL		
KARATE		
THE KARATE PROGRAM SERVED APPROXIMATELY 40 CHILDREN THIS YEAR	. THE ORGANIZATION	
TEAMED UP WITH A LOCAL MARTIAL ARTIST WHO PROVIDES THE INSTRU	CTION. THE ACTIVITY IS	<u>s</u>
ONGOING THROUGHOUT THE YEAR. THE KARATE PROGRAM IS DESIGNED	TO INSTILL THE	
TRADITIONAL ASPECTS OF MARTIAL ARTS IN THE PARTICIPANTS.		
PASSING A BACKGROUND CHECK COORDINATED THROUGH THE STATE POLI	CE IS REQUIRED OF ALL	
COACHES, BOARD MEMBERS AND OTHER ADULTS WHO HAVE CONTACT WITH	THE WRESTLING AND	
KARATE PARTICIPANTS.		
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS		
NO REVIEW WAS OR WILL BE CONDUCTED.		
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DAA	Schodulo O (Form 990)	2000

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
MERIDIAN POLICE ACTIVITIES LEAGUE	82-0484108
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