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Return of Organization Exempt From Income Tax

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)

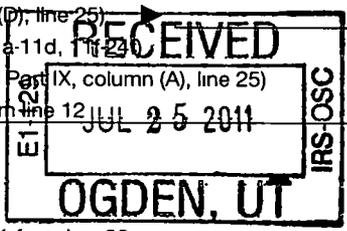
Open to Public Inspection

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 OCT 1, 2009 and ending SEP 30, 2010

B Check if applicable: Address change, Name change, Initial return, Terminated return, Amended return, Application pending. C Name of organization: ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE. D Employer identification number: 23-1523015. E Telephone number: (202) 547-2900. G Gross receipts \$: 1,146,249. H(a) Is this a group return for affiliates? Yes No. H(b) Are all affiliates included? Yes No. H(c) Group exemption number: 3610. I Tax-exempt status: 501(c)(8). J Website: OSIA.ORG. K Form of organization: Corporation. L Year of formation: 1905. M State of legal domicile: DC.

Part I Summary. Table with columns: Activities & Governance, Revenue, Expenses, Net Assets or Fund Balances. Rows 1-22 detailing mission, revenue, expenses, and assets.



Part II Signature Block. Includes signature of Philip Piccigallo, Exec. Director, dated 07/20/11. Preparer's signature: Paul Drake, CPA, dated 07/05/11. Firm name: NADEN/LEAN, LLC, 10626 YORK ROAD, SUITE H, HUNT VALLEY, MD 21030. Phone: (410) 453-5500.

SCANNED AUG 05 2011

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

P 6

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

FATERNAL ORGANIZATION-PROMOTE AND CONDUCT HUMANITARIAN WORKS AND CULTURE, GOVERN AND UNITE THE STATE AND LOCAL LODGES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes 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 services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code:) (Expenses \$ 131,027. including grants of \$) (Revenue \$) "ITALIAN AMERICA" - ORGANIZATION'S NATIONAL MAGAZINE

4b (Code:) (Expenses \$ 571,181. including grants of \$) (Revenue \$) NATIONAL BYLAWS AND ORGANIZATION OF LOCAL LODGES, NATIONAL CONVENTION

4c (Code:) (Expenses \$ 77,911. including grants of \$ 77,911.) (Revenue \$) CHARITABLE & EDUCATIONAL PROGRAMS

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 3,690. including grants of \$) (Revenue \$)

4e Total program service expenses \$ 783,809.

**ORDER SONS OF ITALY IN AMERICA -
SUPREME LODGE**

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)? <i>If "Yes," complete Schedule A</i>		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		
5	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? <i>If "Yes," complete Schedule C, Part III</i>		
6	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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quas-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VII</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• 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 16? <i>If "Yes," complete Schedule D, Part IX</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	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? <i>If "Yes," complete Schedule F, Part I</i>		X
15	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? <i>If "Yes," complete Schedule F, Part II</i>		X
16	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? <i>If "Yes," complete Schedule F, Part III</i>		X
17	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? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	X	
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

ORDER SONS OF ITALY IN AMERICA -

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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>		X
24a 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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction 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>		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>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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		5
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b		1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		6
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		X
	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	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)?		X
	4a		
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.		
	4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		
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?		X
	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	6b		
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 services provided to the payor?		X
	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	7f		
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		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
	9b		
10	Section 501(c)(7) organizations. Enter.		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
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		

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
1a	Enter the number of voting members of the governing body		
1a			62
b	Enter the number of voting members that are independent		
1b			62
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
8a			
b	Each committee with authority to act on behalf of the governing body?	X	
8b			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12b			
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
12c			
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
15a			
b	Other officers or key employees of the organization	X	
15b			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► DC, NY
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ► PHILIP R. PICCIGALLO, EXEC DIR - (202) 547-2900
219 E STREET, NE, WASHINGTON, DC 20002-4922

ORDER SONS OF ITALY IN AMERICA -

Form 990 (2009)

SUPREME LODGE

23-1523015 Page 9

Part 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	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,837.			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		6,837.			
	Program Service Revenue	2 a LODGE MEMBERSHIP DUES	Business Code 900099	995,448.	995,448.	
		b				
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			995,448.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,417.		1,417.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less. rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less. cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	45,351.			
		b Less. direct expenses	b	12,282.		
c Net income or (loss) from fundraising events			33,069.		33,069.	
9 a Gross income from gaming activities. See Part IV, line 19	a	85,700.				
	b Less. direct expenses	b	41,293.			
	c Net income or (loss) from gaming activities		44,407.		44,407.	
10 a Gross sales of inventory, less returns and allowances	a	11,496.				
	b Less. cost of goods sold	b	7,297.			
	c Net income or (loss) from sales of inventory		4,199.	4,199.		
Miscellaneous Revenue		Business Code				
11 a						
	b					
	c					
	d All other revenue					
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		1,085,377.	999,647.	0.	78,893.	

ORDER SONS OF ITALY IN AMERICA -

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 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	77,911.	77,911.		
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	147,813.	118,250.	29,563.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	199,058.	178,546.	20,512.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	11,550.	9,933.	1,617.	
9 Other employee benefits				
10 Payroll taxes	24,668.	21,214.	3,454.	
11 Fees for services (non-employees).				
a Management				
b Legal	5,301.		5,301.	
c Accounting	42,692.		42,692.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	488.		488.	
13 Office expenses	9,507.	8,176.	1,331.	
14 Information technology				
15 Royalties				
16 Occupancy	60,000.		60,000.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	79,184.	79,184.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,934.		2,934.	
23 Insurance				
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.)				
a "ITALIAN AMERICA" MAGAZ	131,027.	131,027.		
b PROFESSIONAL FEES/ CONS	73,645.	69,481.	4,164.	
c INSURANCE	39,270.	33,772.	5,498.	
d WEB SITE EXPENSES	20,734.	20,734.		
e OFFICE EQUIPMENT RENTAL	15,113.		15,113.	
f All other expenses	59,447.	35,581.	23,866.	
25 Total functional expenses. Add lines 1 through 24f	1,000,342.	783,809.	216,533.	0.
26 Joint costs. Check here <input type="checkbox"/> 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				

**ORDER SONS OF ITALY IN AMERICA -
SUPREME LODGE**

Form 990 (2009)

23-1523015 Page 11

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	151,429.	2	93,221.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	240,424.	4	234,603.	
	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		
	8 Inventories for sale or use	24,385.	8	25,264.	
	9 Prepaid expenses and deferred charges	14,309.	9	8,641.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 253,439.			
	b Less: accumulated depreciation	10b 247,376.	6,654.	10c	6,063.
	11 Investments - publicly traded securities	60,986.	11	68,219.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	10,272.	15	0.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	508,459.	16	436,011.		
Liabilities	17 Accounts payable and accrued expenses	239,487.	17	44,788.	
	18 Grants payable		18		
	19 Deferred revenue	14,584.	19	24,223.	
	20 Tax-exempt bond liabilities		20		
	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		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities Complete Part X of Schedule D	3,033.	25	24,712.	
	26 Total liabilities. Add lines 17 through 25	257,104.	26	93,723.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	251,355.	27	342,288.	
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	251,355.	33	342,288.	
34 Total liabilities and net assets/fund balances	508,459.	34	436,011.		

Form 990 (2009)

ORDER SONS OF ITALY IN AMERICA -
 SUPREME LODGE

Form 990 (2009)

23-1523015 Page 12

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash 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?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

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 in the Single Audit Act and OMB Circular A-133?

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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE** Employer identification number **23-1523015**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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 art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items.

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		253,439.	247,376.	6,063.
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 6,063.

**ORDER SONS OF ITALY IN AMERICA -
SUPREME LODGE**

Schedule D (Form 990) 2009

23-1523015 Page 4

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,085,377.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,000,342.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	85,035.
4	Net unrealized gains (losses) on investments	4	5,898.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	5,898.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	90,933.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	1,091,275.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	5,898.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	5,898.
3	Subtract line 2e from line 1	3	1,085,377.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,085,377.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,000,342.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,000,342.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,000,342.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 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 part to provide any additional information

PART X: THE FINANCIAL ACCOUNTING STANDARDS BOPARD (FASB)

ISSUED FASB ACS 740-10 (FORMERLY FASB INTERPERTATION NO. (FIN) 48)

"ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES", AN INTERPERTATION OF FASB
STATEMENT NO. 109 THAT CLARIFIES THE ACCOUNTING AND RECOGIITION FOR INCOME
TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE ORDER SONS OF ITALY IN
AMERICA - SUPREME LODGE'S (OSIA) INCOME TAX RETURNS. THE OSIA HAS ADOBTED
THIS STANDARD. THE OSIA'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY THE
INTERNAL REVENUE SERRVICE. OPEN AUDIT PERIODS ARE THE FICCAL YEARS ENDING

Part XIV Supplemental Information *(continued)*

SEPTEMBER 30, 2007, 2008, 2009 AND 2010. THE ADOPTION OF FASB ACS 740-10
HAD NO MATERIAL EFFECT ON THE FINANCIAL STATEMENT FOR THE YEAR ENDED
SEPTEMBER 30, 2010.

Multiple horizontal lines for supplemental information.

ORDER SONS OF ITALY IN AMERICA -

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		ITALY TRAVEL PROGRAM		4		
Revenue		(event type)	(event type)	(total number)		
1	Gross receipts	16,491.		28,860.	45,351.	
2	Less: Charitable contributions					
3	Gross income (line 1 minus line 2)	16,491.		28,860.	45,351.	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	12,282.			12,282.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(12,282)
11	Net income summary. Combine line 3, column (d), and line 10				33,069.	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
		1	Gross revenue			85,700.
Direct Expenses	2	Cash prizes			40,455.	40,455.
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses			838.	838.
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				(41,293)	
8	Net gaming income summary. Combine line 1, column (d), and line 7				44,407.	

9 Enter the state(s) in which the organization operates gaming activities: DC

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		X
10a		X
11		X
12		X

ORDER SONS OF ITALY IN AMERICA -

13 Indicate the percentage of gaming activity operated in.

a The organization's facility

13a %

b An outside facility

13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a

X

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer

Employee

Independent contractor

17 Mandatory distributions.

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a

X

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

SCHEDULE I (Form 990)
 Department of the Treasury Internal Revenue Service
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

Name of the organization: **ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE**
 Employer identification number: **23-1523015**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Part II Grants and Other Assistance to Governments and Organizations in the United States

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMISSION FOR SOCIAL JUSTICE 219 E STREET, N.E. WASHINGTON, DC 20002	23-1928638	501(C)(3)	77,911.	0.			EDUCATION

2 Enter total number of section 501(c)(3) and government organizations: ..

3 Enter total number of other organizations: ..

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

ORDER SONS OF ITALY IN AMERICA -
SUPREME LODGE

Employer identification number
23-1523015

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STATE AND LOCAL LODGES

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

STUDENT EDUCATIONAL SUMMIT / SPECIAL EVENTS

EXPENSES \$ 3690. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 IS PROVIDED TO THE ORGANIZATIONS'S EXECUTIVE BOARD PRIOR TO FILING. THE EXECUTIVE BOARD EXECUTIVE BOARD RECEIVES COPIES OF THE FINANCIAL STATEMENTS, FORM 990 AND DETAIL REPORTS OF REVENUES AND EXPENSES FOR REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES IS REVIEWED AND APPROVED BY THE EXECUTIVE BOARD.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S DOCUMENTS ARE AVAILABLE UPON REQUEST. COPY OR ELECTRONIC FILE OF FORM 990 IS AVAILABLE AT THE OFFICE DURING REGULAR BUSINESS HOURS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S DOCUMENTS ARE AVAILABLE UPON REQUEST. COPY OR ELECTRONIC FILE OF FORM 990 IS AVAILABLE AT THE OFFICE DURING REGULAR BUSINESS HOURS.

FORM 990, PART XI, 2

FINANCE COMMITTEE - OVERSIGHT OF AUDITORS AND AUDITED FINANCIAL STATEMENT

THE FOUNDATION HAS A BUDGET AND FINANCE COMMITTEE THAT IS RESPONSIBLE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization	ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE	Employer identification number 23-1523015
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FOR THE OVERSIGHT OF THE AUDITED FINANCIAL STATEMENT AND SELECTION OF
AUDITOR. THE FINANCE COMMITTEE'S REPORT AND SELECTION OF AUDITOR ARE
APPROVED BY THE GOVERNING BOARD.

**ORDER SONS OF ITALY IN AMERICA -
SUPREME LODGE**

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)	SONS OF ITALY FOUNDATION-SHARED OFFICE-RENT PAID	J	60,000.
(2)	SONS OF ITALY FOUNDATION-SHARED EMPLOYEES REIMBURSED COSTS PAYROLL & TAXES	N	114,788.
(3)	COMMISSION FOR SOCIAL JUSTICE-SHARED EMPLOYEES REIMB COST PAYROLL & TAX	N	17,572.
(4)			
(5)			
(6)			

ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE

SUPPORTING INFORMATION

2009 FORM 990 - YEAR ENDED SEPTEMBER 30, 2010

**PART VII - OFFICERS, DIRECTORS, TRUSTEES, EMPLOYEES
SUBORDINATE AND STATE GRAND LODGES - 09/01/09 - 08/31/11**

<u>TITLE</u>	<u>LAST NAME</u>	<u>FIRST NAME</u>
National President	Di Trapani	Joseph
National 1st Vice President	Baratta	Anthony J
National 2nd Vice President	Caria	Kevin A
National 3rd Vice President	Longo	Daniel J
National 4th Vice President	Spaziani	Anthony F M
National 5th Vice President	Girolami	Vera
Nat'l Immed Past President 07-09	Affinito	Alfred A
National Orator	Dettore, JR	Raymond
National Recording Secretary	Robak	Rita L Maletta
National Financial Secretary	Panessa	Frank J
National Treasurer	Quinn	Nancy Di Fiore
National Historian	Fumosa	Sam
National Chaplain	Forno	Rev R Adam
Nat'l Past President 05-07	Sarno	Vincent
Nat'l Past President 03-05	Sciame	Joseph
Nat'l Past President 01-03	Messa	Robert A
Nat'l Past President 99-01	Boncore	Philip R
Nat'l Past President 97-99	De Santis	Frank J
Nat'l Past President 95-97	Polo	Paul S
Nat'l Past President 93-95	Strollo	Joanne L
Nat'l Past President 91-93	Zuzolo	Peter R
Nat'l Past President 89-90	Riccelli, Sr	Albert J
Nat'l Past President 87-89	Avara	S Joseph
Nat'l Past President 77-81	Montemuro, Jr	Frank J
Nat'l Past President 75-77	Spatuzza	John G
Nat'l Past President 73-75	Gay	Peter B
Nat'l Past President 61-65	Ottaviano, Jr	John
CSJ President	Haemmerle	Santina
OSIC National President	Cumbo	Josie
National Executive Director	Piccigallo	Philip R
Editor of OSIA Publications	De Sanctis	Dona
Office Manager	Beach	Andrea K
Director Of Development	Crespy	Diane E
Program Assistant	Milner	Zac
Administrative Assistant	Petrine	Amy
National Trustee-NY	Principe-O'Neill	Maryann
National Trustee-PA	Turco	Vincent A
National Trustee-PA	Cerato	Sam
National Trustee-NJ	Sconyo	Philip R
National Trustee-FL	D'Alessandro	Salvatore
National Trustee-CT	Carlozzi, Jr	Carlo
National Trustee-MA	Robak	Walter "Sonny"
National Trustee-MA	DePinto	John F

ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE

SUPPORTING INFORMATION

2009 FORM 990 - YEAR ENDED SEPTEMBER 30, 2010

PART VII - OFFICERS, DIRECTORS, TRUSTEES, EMPLOYEES SUBORDINATE AND STATE GRAND LODGES - 09/01/09 - 08/31/11

<u>TITLE</u>	<u>LAST NAME</u>	<u>FIRST NAME</u>
National Trustee-RI	Restivo	Edmund
National Trustee-MD	Cipriotti	Frances A
National Trustee-CA	LaBanca	Joeeph
National Trustee-OH	Franchina	Francesca
National Trustee-NY	Ment	Michele
National Trustee-NW	Palazzo	Marlene
State President-AZ	Protocollo	John
State President-CA	Pagnati	Maria Fassio
State President-CO	Carochi	John
State President-CT	Garofalo	Marc
State President-DE	Facciolo	Joseph
State President-FL	Mottola, Jr	Edward
State President-IL	Della Croce	Richard R
State President-MA	DiStefano	James
State President-MD	Zaccaria	Vincent A
State President-MI	Graham	Ronald
State President-NE	Turco	Charles
State President-NJ	Bergbauer, Jr	Thomas A
State President-NW	Scillo	Diane
State President-NY	Lanzilotta	Salvatore
State President-OH	Siebieda	Larry
State President-PA	Foradora	Hon John
State President-RI	Fratus	Jopseph
State President-VA	Siebeking	Marie F
State President-WV	Ameli, Jr	Nick

FEDERAL ID #
23-1523015

ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE
2009 FORM 990 - PARTS X & SCHEDULE D PART IV
09/30/10

ASSET	METHOD LIFE	COST 09/30/09	COST 09/30/10	ACCUM. DEP. 09/30/09	DEPREC. 10/1/09-9/30/10	ACCUM. DEP. 09/30/10
TELEPHONES	S/L 7 YRS	7,685	7,685	7,685	0	7,685
COMPUTERS	S/L 5 YRS	105,385	107,728	101,284	2,159	103,443
EQUIPMENT	S/L 7 YRS	67,140	67,140	65,787	427	66,214
FURNITURE	S/L 7 YRS	70,886	70,886	69,686	348	70,034
TOTALS		251,096	253,439	244,442	2,934	247,376

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II		Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing your return See instructions	Name of exempt organization	Employer identification number	
	ORDER SONS OF ITALY IN AMERICA - SUPREME LODGE	23-1523015	
	Number, street, and room or suite no. If a P.O. box, see instructions.	219 E STREET, N.E.	
	City, town or post office, state, and ZIP code For a foreign address, see instructions.	WASHINGTON, DC 20002	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of PHILIP R. PICCIGALLO, EXEC DIR - 219 E STREET, NE - WASHINGTON, DC 20002-4922
Telephone No (202) 547-2900 FAX No (202) 546-8168

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until AUGUST 15, 2011.

5 For calendar year _____, or other tax year beginning OCT 1, 2009, and ending SEP 30, 2010.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title CPA Date

