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CISJ4WMXLN

Form 98	90 (2010)				Page 2			
Part	III Stateme	ent of Program Service A	Accomplishments					
	Check if	Schedule O contains a re	sponse to any question in this Pa	ırt III				
1	Briefly describ	e the organization's mission	n:					
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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			
		ibe these new services on S						
3			, or make significant changes in	how it conducts, any program				
	services?				☐ Yes			
	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 \$	including grants of \$) (Revenue \$				
70	(OOOC.) (rybenses a	(including grants of 5) (Leveline 2)			
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4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$				
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4c	(Code:	\ (Evappess ¢	including grants of \$	\ (Revenue \$				
40	(Code.	(Expenses \$	including grants of \$) (Heveline 2)			
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4d	Other progran	n services. (Describe in Sch	edule O.)					
	(Expenses \$	including gr		ue\$)				
40		n service expenses >	0					

CISJ4WMXLN

SCHEDULE () (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

<u> 2010</u>

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	1) 18		Employer Identification number 46-03\$/807
Name of the organization Faulkton Fin	e siegi		46-038/00/
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FAULKTON VOLUNTEER FIRE DEPARTMENT INC PO BOX 372 FAULKTON SD 57438



025851

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of/offiger or trustee

Date

Title

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