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Return of Organization Exempt From Income Tax

2011

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
InspectionDepartment of the Treasury
Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning , 2011, and ending

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C

ST. MICHAELS FIRE DEPARTMENT, INC.
1001 SOUTH TALBOT STREET
ST MICHAELS, MD 21663

D Employer Identification Number

23-7393111

E Telephone number

(410) 745-9393

G Gross receipts \$ 1,146,901.

F Name and address of principal officer
SAME AS C ABOVE

H(a) Is this a group return for affiliates?

 Yes No

H(b) Are all affiliates included?

 Yes No

If 'No,' attach a list (see instructions)

I Tax-exempt status 501(c)(3) 501(c) (4) (insert no) 4947(a)(1) or 527

J Website: ► WWW.STMICHAELSF.D.ORG

H(c) Group exemption number ►

K Form of organization Corporation Trust Association Other ►

L Year of Formation

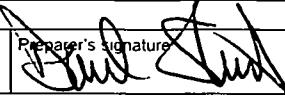
M State of legal domicile

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>PROVIDE FIRE AND AMBULANCE SERVICE</u>												
	----- -----												
Revenue	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.												
Expenses	3 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 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34												
	<table border="1"> <tr><td>3</td><td>12</td></tr> <tr><td>4</td><td>0</td></tr> <tr><td>5</td><td>0</td></tr> <tr><td>6</td><td>0</td></tr> <tr><td>7a</td><td>0.</td></tr> <tr><td>7b</td><td>0.</td></tr> </table>	3	12	4	0	5	0	6	0	7a	0.	7b	0.
3	12												
4	0												
5	0												
6	0												
7a	0.												
7b	0.												
Net Assets or Fund Balances	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)												
	<table border="1"> <tr><td>Prior Year</td><td>Current Year</td></tr> <tr><td>352,074.</td><td>556,399.</td></tr> <tr><td>8,616.</td><td>13,686.</td></tr> <tr><td>58,192.</td><td>13,007.</td></tr> <tr><td>22,258.</td><td>14,670.</td></tr> <tr><td>441,140.</td><td>597,762.</td></tr> </table>	Prior Year	Current Year	352,074.	556,399.	8,616.	13,686.	58,192.	13,007.	22,258.	14,670.	441,140.	597,762.
Prior Year	Current Year												
352,074.	556,399.												
8,616.	13,686.												
58,192.	13,007.												
22,258.	14,670.												
441,140.	597,762.												
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (A), line 25) <u>RECEIVED</u> 2,165.												
	<table border="1"> <tr><td>385,234.</td><td>426,121.</td></tr> <tr><td>385,234.</td><td>426,121.</td></tr> <tr><td>55,906.</td><td>171,641.</td></tr> </table>	385,234.	426,121.	385,234.	426,121.	55,906.	171,641.						
385,234.	426,121.												
385,234.	426,121.												
55,906.	171,641.												
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <u>OGDEN, UT</u> 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12												
	<table border="1"> <tr><td>Beginning of Current Year</td><td>End of Year</td></tr> <tr><td>2,920,550.</td><td>3,093,165.</td></tr> <tr><td>0.</td><td>0.</td></tr> <tr><td>2,920,550.</td><td>3,093,165.</td></tr> </table>	Beginning of Current Year	End of Year	2,920,550.	3,093,165.	0.	0.	2,920,550.	3,093,165.				
Beginning of Current Year	End of Year												
2,920,550.	3,093,165.												
0.	0.												
2,920,550.	3,093,165.												
	20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20												

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here		Date 5/3/12			
	► ROBERT MURRAY Type or print name and title	TREASURER			
Paid Preparer Use Only	Print/Type preparer's name DAVID L SHORT	Preparer's signature 	Date 5/2/12	Check <input type="checkbox"/> if self-employed	PTIN P01227509
	Firm's name ► WEAVER, MAVITY, SHORT ASSOCIATES, LLC	Firm's EIN ► 20-0539266			
	Firm's address ► 117 BAY STREET EASTON, MD 21601	Phone no (410) 820-8400			

May the IRS discuss this return with the preparer shown above? (see instructions)

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

TEEA0113L 08/18/11

Form 990 (2011)

6/17/2011

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III 1 Briefly describe the organization's mission:PROVIDE FIRE AND AMBULANCE SERVICE2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If 'Yes,' describe these new services on Schedule O

 Yes No3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If 'Yes,' describe these changes on Schedule O Yes No4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 reported4a (Code (Expenses \$ 402,895, including grants of \$) (Revenue \$))
PROVIDE FIRE PROTECTION AND AMBULANCE SERVICES TO ST MICHAELS AND SURROUNDING AREAS.4b (Code (Expenses \$, including grants of \$) (Revenue \$))4c (Code (Expenses \$, including grants of \$) (Revenue \$))4d Other program services (Describe in Schedule O)

(Expenses \$, including grants of \$) (Revenue \$)

4e Total program service expenses ► 402,895.

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	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	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? If 'Yes,' complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	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? If 'Yes,' complete Schedule D, Part IV	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	X
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11a	X
b 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	11b	X
c 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	11c	X
d 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? If 'Yes,' complete Schedule D, Part IX	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11e	X
f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	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? If 'Yes,' complete Schedule F, Parts II and IV	15	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? If 'Yes,' complete Schedule F, Parts III and IV	16	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? If 'Yes,' complete Schedule G, Part I (see instructions)	17	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? If 'Yes,' complete Schedule G, Part II	18	X
19 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
20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

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? If 'Yes,' complete Schedule I, Parts I and II	21	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? If 'Yes,' complete Schedule I, Parts I and III	22	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? If 'Yes,' complete Schedule J	23	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, 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	X
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	
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? If 'Yes,' complete Schedule L, Part I	25a	X
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	X
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	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	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)	28a	X
a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b	X
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28c	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	29	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	30	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	31	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	32	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	33	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? If 'Yes,' complete Schedule R, Part I	34	X
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	35a	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	36	
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	37	X
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	38	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O		

BAA

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V

	Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
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)? b If 'Yes,' enter the name of the foreign country ► See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	4a	X
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	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	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? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6a	X
7 Organizations that may receive deductible contributions under section 170(c).	6b	
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?	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?	7c	
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.	9a	
a Did the organization make any taxable distributions under section 4966?	9b	
b Did the organization make a distribution to a donor, donor advisor, or related person?		
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	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
If there are material differences in voting rights among members
of the governing body, or if the governing body delegated broad
authority to an executive committee or similar committee, explain in Schedule O

1b Enter the number of voting members included in line 1a, above, who are independent

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?

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?

4 Did the organization make any significant changes to its governing documents
since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members,
stockholders, or other persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by
SEE SCHEDULE O

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director or 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

	Yes	No
1a	12	
1b		
2		X
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b		X
9		X

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

10a Did the organization have local chapters, branches, or affiliates?

b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O

12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13

b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in
Schedule O how this is done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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

b Other officers of key employees of the organization

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?

b If 'Yes,' did the organization follow 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?

	Yes	No
10a		X
10b		
11a	X	
12a		X
12b		
12c		
13		X
14		X
15a		X
15b		X
16a		X
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

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 during the tax year.
SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
► ROBERT MURRAY 1001 S. TALBOT STREET ST MICHAELS MD 21663 (410) 745-9393

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

 Check if Schedule O contains a response to any question in this Part VII
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 organization's tax year

- 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, if any See instructions for definition of 'key employee'
- 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		or director	Individual trustee	Institutional trustee	Officer	Key employee			
(1) HOLLEY GUSCHKE PRESIDENT	0						0.	0.	0.
(2) JESSICA KASTEL VICE PRESIDENT	0						0.	0.	0.
(3) JAMES EASON TRUSTEE	0						0.	0.	0.
(4) DOMONIQUE STURGIS SECRETARY	0						0.	0.	0.
(5) J.D. PATRICK TRUSTEE	0						0.	0.	0.
(6) GENE MESSICK TRUSTEE	0						0.	0.	0.
(7) JOHN D. HADDAWAY TRUSTEE	0						0.	0.	0.
(8) PHIL JONES TRUSTEE	0						0.	0.	0.
(9) GUY REESER TRUSTEE	0						0.	0.	0.
(10) ROBERT MURRAY TREASURER	0						0.	0.	0.
(11) RICHARD JONES, SR. TRUSTEE	0						0.	0.	0.
(12) KEVIN HENCKEL TRUSTEE	0						0.	0.	0.
(13)									
(14)									

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describ- e hours for related organi- zations in Sch O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Former or director	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee		
(15)									
(16)									
(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									

1 b Sub-total	►	0.	0.	0.
c Total from continuation sheets to Part VII, Section A	►	0.	0.	0.
d Total (add lines 1b and 1c)	►	0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

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	1a Federated campaigns.	1a			
	b Membership dues	1b	105,129.		
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e	208,966.		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	242,304.		
	g Noncash contributions included in lns 1a-1f: \$				
	h Total. Add lines 1a-1f	►	556,399.		
PROGRAM SERVICE REVENUE		Business Code			
	2a EMS PROGRAM		8,869.	8,869.	
	b MISC INCOME		2,506.	2,506.	
	c REIMBURSEMENTS		2,249.	2,249.	
	d MEMBERSHIP DUES & ASSESSMENTS		62.		62.
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f	►	13,686.		
3 Investment income (including dividends, interest and other similar amounts)	►	17,909.			17,909.
4 Income from investment of tax-exempt bond proceeds	►				
5 Royalties	►				
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses	1,800.				
c Rental income or (loss)	2,416.				
d Net rental income or (loss)	►	-616.	-616.		
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses	451,687.				
c Gain or (loss)	456,589.				
d Net gain or (loss)	►	-4,902.	-4,902.		
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	103,736.			
b Less: direct expenses	b	89,414.			
c Net income or (loss) from fundraising events	►	14,322.			14,322.
9a Gross income from gaming activities See Part IV, line 19	a	1,684.			
b Less: direct expenses	b	720.			
c Net income or (loss) from gaming activities	►	964.			964.
10a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory	►				
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d	►				
12 Total revenue. See instructions	►	597,762.	8,106.	0.	33,257.

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)

Check if Schedule O contains a response to any question in this Part IX

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 United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	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				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	4,500.		4,500.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	2,386.		2,386.	
14 Information technology	1,684.	1,684.		
15 Royalties				
16 Occupancy	35,784.	35,784.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	226,479.	226,479.		
23 Insurance	31,422.	31,422.		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a LOSAP PAYMENTS	33,600.	33,600.		
b EQUIPMENT MAINTENANCE	25,214.	25,214.		
c UNIFORMS	13,974.	13,974.		
d INVESTMENT FEES	9,892.		9,892.	
e All other expenses	41,186.	34,738.	4,283.	2,165.
25 Total functional expenses Add lines 1 through 24e	426,121.	402,895.	21,061.	2,165.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
Check here ▶ <input type="checkbox"/> if following				
SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

		(A) Beginning of year		(B) End of year
A S S E T S	1 Cash – non-interest-bearing		1	
	2 Savings and temporary cash investments	264,010.	2	165,918.
	3 Pledges and grants receivable, net		3	
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 3,785,822.		
	b Less accumulated depreciation	10b 1,669,307.	10c 2,051,517.	2,116,515.
	11 Investments – publicly traded securities	605,023.	11	810,732.
	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		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	2,920,550.	16	3,093,165.
L I A B I L T I E S	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
N E T A S S E T S O R F U N D B A L A N C E S	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	301,885.	30	976,650.
	31 Paid-in or capital surplus, or land, building, or equipment fund	2,618,665.	31	2,116,515.
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,920,550.	33	3,093,165.
	34 Total liabilities and net assets/fund balances	2,920,550.	34	3,093,165.

BAA

Form 990 (2011)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

- 1 Total revenue (must equal Part VIII, column (A), line 12)
- 2 Total expenses (must equal Part IX, column (A), line 25)
- 3 Revenue less expenses Subtract line 2 from line 1
- 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))
- 5 Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O
- 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))

1	597,762.
2	426,121.
3	171,641.
4	2,920,550.
5	974.
6	3,093,165.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990 Cash Accrual Other _____

	Yes	No
1		
2a	X	
2b	X	
2c		
3a		X
3b		

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?

- 2b Were the organization's financial statements audited by an independent accountant?

- 2c 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

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

- 3b 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 (2011)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

OMB No 1545-0047

2011**Open to Public
Inspection**

Name of the organization

Employer identification number

ST. MICHAELS FIRE DEPARTMENT, INC.

23-7393111

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? Yes 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? Yes 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 education) 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
2a	
2b	
2c	
2d	

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, and not on a historic structure listed in the National Register

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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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 the 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

	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 current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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)	

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		90,480.		90,480.
b Buildings		820,542.	298,492.	522,050.
c Leasehold improvements		96,211.	32,806.	63,405.
d Equipment		2,728,187.	1,293,475.	1,434,712.
e Other		50,402.	44,534.	5,868.

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

2,116,515.

BAA

Schedule D (Form 990) 2011

Part VII Investments – Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) ►		

Part VIII Investments – Program Related. See Form 990, Part X, line 13. N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15. N/A

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ►	

2 FIN 48 (ASC 740) 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 (ASC 740)

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

Part 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
- 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12
 - a Net unrealized gains on investments
 - b Donated services and use of facilities
 - c Recoveries of prior year grants
 - d Other (Describe in Part XIV)
- 3 Add lines 2a through 2d
- 4 Subtract line 2e from line 1
- 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
 - b Other (Describe in Part XIV)
- 5 Add lines 4a and 4b
- 5 Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 1)*

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

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

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 XIV | Supplemental Information (continued)

Supplemental Information Regarding Fundraising or Gaming Activities

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

ST. MICHAELS FIRE DEPARTMENT, INC.

Employer identification number
23-7393111

Part I **Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Total

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2011

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 <u>SUMMER CARNIVA</u> (event type)	(b) Event #2 <u>FUNCTIONS-BBQS</u> (event type)	(c) Other events (total number)	(d) Total events (add column (a) through column (c))
	1 Gross receipts	61,893.	28,401.		90,294.
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	61,893.	28,401.		90,294.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	43,191.	36,177.		79,368.
	10 Direct expense summary Add lines 4 through 9 in column (d)				79,368.
	11 Net income summary. Combine line 3, column (d), and line 10				10,926.

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.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Combine lines 1, column (d) and line 7				

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

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If 'No,' explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If 'Yes,' explain _____

11 Does the organization operate gaming activities with nonmembers? Yes No

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

13 Indicate the percentage of gaming activity operated in

13a	%
13b	%

a The organization's facility

b An outside facility

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 contact with a third party from whom the organization receives gaming revenue? Yes No

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? Yes No

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 ► \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organization answered 'Yes'
on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

ST. MICHAELS FIRE DEPARTMENT, INC.

Employer identification number

23-7393111

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential	X	1	232,000.	
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If 'Yes,' describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2011

	Yes	No
30a	X	
31	X	
32a	X	

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

ST. MICHAELS FIRE DEPARTMENT, INC.

Employer identification number

23-7393111

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

SECRETARY RECORDS MINUTES AT BOARD MEETINGS

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

OFFICERS PROVIDED COPY FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO DOCUMENTS AVAILABLE TO THE PUBLIC.

2011

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

ST. MICHAELS FIRE DEPARTMENT, INC.

23-7393111

FORM 990, PART XI, LINE 5
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

PRIOR PERIOD ADJUSTMENT

TOTAL \$ 974.
\$ 974.

Depreciation and Amortization
(Including Information on Listed Property)

2011

Name(s) shown on return

ST. MICHAELS FIRE DEPARTMENT, INC.

Business or activity to which this form relates

FORM 990/990-PF

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1 Maximum amount (see instructions)	1		
2 Total cost of section 179 property placed in service (see instructions)	2		
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3		
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4		
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5		
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14
15 Property subject to section 168(f)(1) election.	15
16 Other depreciation (including ACRS)	16 223,331.

Part III MACRS Depreciation (Do not include listed property) (See instructions)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>

Section B – Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		44,092.	7	HY	S/L	3,148.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property		25 yrs			S/L	
h Residential rental property		27.5 yrs	MM	S/L		
i Nonresidential real property		27.5 yrs	MM	S/L		
		39 yrs	MM	S/L		
			MM	S/L		

Section C – Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year		12 yrs			S/L	
c 40-year		40 yrs	MM	S/L		

Part IV Summary (See instructions)

21 Listed property Enter amount from line 28	21
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations – see instructions	22 226,479.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23

Depreciation and Amortization
(Including Information on Listed Property)

2011

Name(s) shown on return

ST. MICHAELS FIRE DEPARTMENT, INC.

Business or activity to which this form relates

RENTAL ACTIVITY - RESIDENTIAL RENTAL 29357 HICKORY RIDGE R

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	12/01/11	141,520.	27.5 yrs	MM	S/L	215.
	12/01/11	15,624.	27.5 yrs	MM	S/L	24.
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property Enter amount from line 28	21	
22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations — see instructions.	22	239.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Realized Gain/(Loss) by Security



Prior Year

Bank of America Corporation

Security Description	Quantity	Acquisition Cost(\$)	Liquidation Amount(\$)	Realized Gain/(Loss)(\$)
				Total
ABERCROMBIE & FITCH CO	20	1,307	1,116	(143)
ADOBE SYS DEL PV\$ 0 001	52	1,532	1,723	144
AKAMAI TECHNOLOGIES INC	27	1,293	931	0
ALLEGHENY TECH INC	50	2,571	2,287	(362)
ALLERGAN INC	6	349	503	0
ALPHA NATURAL RESOURCES INC	18	991	809	(182)
ALTRIA GROUP INC	73	1,245	1,845	(3)
AMAZON COM INC COM	20	1,687	4,099	603
AMERICAN TOWER CORP CL A	51	2,129	2,592	2,412
AMERIPRISE FINL INC	19	825	883	462
AMGEN INC COM PV \$0 0001	25	1,370	1,387	0
ANALY CAP MGMT INC	112	1,671	1,919	0
AVAGO TECHNOLOGIES LTD	7	243	235	(8)
BAKER HUGHES INC	17	1,137	884	(283)
BAXTER INTERNL INC	35	1,471	1,853	383
BOEING COMPANY	11	713	731	0
BRIGHAM EXPL INC COM	42	1,370	1,527	45
BRITISH AMN TOBACO SPADR CANADIAN NATURAL RES LTD	71	2,282	2,184	(42)
CATERPILLAR INC DEL	25	1,808	2,433	624
CELGENE CORP COM	21	1,316	1,064	(251)
CENTURYLINK INC SHS	57	1,672	2,008	367
CF INDS HLDS INC	2	267	353	86
CHECK POINT SOFTWARE TECH	39	1,672	1,999	327
CHESAPEAKE ENERGY OKLA	22	553	776	0
CISCO SYSTEMS INC COM	50	1,238	938	(300)
CITRIX SYSTEMS INC COM	15	991	1,141	0
CME GROUP INC	6	1,813	1,583	(229)
COACH INC	21	1,072	1,390	0
COCA COLA COM	10	527	670	(300)
COCA COLA FEMSA SP ADR	10	815	774	0
COGNIZANT TECH SOLUTNS A	19	1,555	1,314	(241)
COLGATE PALMOLIVE	15	1,226	1,151	0
COMPASS GROUP PLC ADR	84	783	740	(23)
COMPUWARE CORP	93	1,023	949	0
COOPER COS INC COM NEW	18	984	1,277	(74)
COPA HOLDINGS S A CL A	7	408	397	0
CORE LAB NV COM	3	269	323	(293)
CORNING INC	89	1,633	1,800	0
COVIDIEN PLC SHS	18	914	957	(11)
CUMMINS INC COM	33	1,707	3,436	0
CYPRESS SEMICNDTR PV1CTS	13	226	254	(43)
DANAHER CORP DEL COM	31	1,056	1,434	0

Accounts included in this report: 72E-04014 (ENDOWMENTM) "OSAP ACCOUNT"

Report created April 18, 2012 for ST. MICHAEL'S FIRE DEPT

Realized Gain/(Loss) by Security



Prior Year

Bank of America Corporation

Security Description	Quantity	Acquisition Cost(\$)	Liquidation Amount(\$)	Realized Gain/(Loss)(\$)	Total
				Short	Long
DELHAIZE GROUP SPONS ADR	6	422	513	91	91
DEVON ENERGY CORP NEW	14	1,250	1,080	(171)	(171)
DIAMOND OFFSHORE DRILNG	49	3,773	3,127	(27)	(647)
É M C CORPORATION MASS	35	455	933	0	478
EMERGENCY MEDICAL SVS-A	16	853	1,037	184	184
A					
EOG RESOURCES INC	4	395	368	15	15
FHLMC GO 4877 06%2038	2,000	1,160	1,256	0	0
AMORTIZED VALUE 48305					
AMORTIZED FACTOR 0.57942					
FNMA PADD440 06%2039	2,000	1,495	1,486	0	0
AMORTIZED VALUE 68609					
FNMA P190391 06%2038	18,000	8,077	8,092	0	0
AMORTIZED VALUE 3694					
AMORTIZED FACTOR 0.41608					
FNMA P86579 06%2038	2,000	788	849	0	0
AMORTIZED VALUE 48305					
AMORTIZED FACTOR 0.39275					
FNMA P99033 06%2038	2,000	331	349	0	0
AMORTIZED VALUE 48305					
AMORTIZED FACTOR 0.1671					
FREEPRT-MCMRAN CPR & GLD	75	3,406	2,843	(428)	(355)
FRONTLINE LTD	15	469	393	(77)	(77)
FUJITSU LTD NEW ADR	16	525	446	(58)	(58)
F5 NETWORKS INC COM	5	530	468	(62)	(62)
GLAXOSMITHKLINE PLC ADR	32	1,576	1,329	(226)	(226)
GUESS INC COM	26	1,212	1,043	(169)	(169)
HANSEN NATURAL CORP	2	138	158	20	20
HERBALIFE LTD	24	911	1,364	454	454
HEWLETT PACKARD CO DEL	32	1,532	1,114	(416)	(416)
HOLLY CORP COM \$0.01	4	231	236	5	5
HOLLYFRONTIER CORP	37	1,093	1,023	(71)	(71)
HOSPIRA INC	21	1,160	1,193	33	33
HUANENG PWR INT'L SP ADR	19	426	344	(82)	(82)
HUNTINGTON INGALLS IND	4	118	158	0	0
INC					
IAC INTERACTIVECORP	36	1,101	1,041	(60)	(60)
IHS INC	3	229	254	25	25
ILLUMINA INC COM	7	488	266	0	0
INTEL CORP	74	1,438	1,752	0	313
INTUIT INC COM	19	888	858	(30)	(30)
INTUITIVE SURGICAL INC	3	1,200	1,153	(48)	(48)
NEW					
ITC HLDGS CORP	9	545	675	130	130
JOHNSON AND JOHNSON COM	19	1,089	1,210	0	121
JPMORGAN CHASE & CO	23	952	916	(5)	(5)
KIMBERLY CLARK	7	440	493	0	53

Accounts Included in this report: 72E-04014 (ENDOWMENTM) "LOSAP ACCOUNT"

For Informational Purposes Only - Account Statement is Official Record of Holdings, Balances and Security Values

Report created April 18, 2012 for ST. MICHAELS FIRE DEPT

Realized Gain/(Loss) by Security



Bank of America Corporation

Prior Year

Security Description	Quantity	Acquisition Cost(\$)	Liquidation Amount(\$)	Realized Gain/(Loss)(\$)	Short	Long	Total
KRAFT FOODS INC VA CLA	62	2,026	2,184	158	8	151	(158)
LABORATORY CP AMER HLDGS	14	1,315	1,151	(164)	0	0	(164)
LAS VEGAS SANDS CORP	9	402	333	(69)	0	0	0
LIMITED BRANDS INC	22	701	880	179	0	0	179
LUBRIZOL CORP	17	1,419	2,276	857	0	857	857
MARATHON OIL CORP	11	385	541	156	0	156	156
MARATHON PETROLEUM CORP	20	481	785	304	0	304	304
MCDONALDS CORP COM	25	1,681	1,838	157	0	0	157
METROPCS COMM INC	74	1,115	758	(357)	0	0	(357)
MICROSOFT CORP	23	583	581	0	(2)	0	(2)
MITSUI CO ADR	2	661	697	36	0	0	36
MSC IND'L DIRECT INC CLA	17	1,082	1,030	(52)	0	0	(52)
MSCI INC CLASS A	26	948	898	(51)	0	0	(51)
MYLAN INC	56	1,144	1,152	8	0	0	8
NETAPP INC	54	2,715	2,377	(266)	(56)	(322)	(322)
NETFLIX COM INC	17	2,541	2,921	346	34	380	380
NEW WORLD DEV SPNSRD ADR	126	454	378	(76)	0	0	(76)
NEW YORK CMNTY BANCORP	123	1,627	1,898	(34)	305	305	271
NEXEN INC CANADA COM	18	400	431	31	0	0	31
NIPPON YUSEN KABUSHIKI KAISHA SPON ADR	143	1,181	868	(312)	0	0	(312)
NITTO DENKO CORP ADR	5	222	309	88	0	0	88
NOKIA CORP SPON ADR	54	518	316	(202)	0	0	(202)
ORACLE CORP \$0.01 DEL	31	649	1,034	0	386	386	386
PANERA BREAD CO CLA	2	204	256	52	0	0	52
PARKER HANNIFIN CORP	12	1,016	856	(160)	0	0	(160)
PEARSON SPONSORED ADR	49	758	914	156	0	0	156
PEPSICO INC	7	440	449	9	0	0	9
PETRLEO BRAS VTG SPD ADR	12	416	458	42	0	0	42
PFIZER INC	112	1,830	2,286	0	456	456	456
PHARM PROD DEV INC	37	1,167	964	(203)	0	0	(203)
POTASH CORP SASKATCHEWAN	35	1,683	1,805	122	0	0	122
PROCTER & GAMBLE CO	33	1,948	2,108	(11)	170	170	160
RAYTHEON CO DELAWARE NEW	36	1,740	1,637	(103)	0	0	(103)
RED HAT INC	30	1,260	1,219	(32)	0	0	(32)
RENAISSANCE HLDGS LTD	13	802	874	73	0	0	73
ROCKWELL AUTOMATION INC	23	2,061	1,430	(621)	0	0	(621)
ROCKWELL COLLINS INC	23	1,372	1,065	(144)	(164)	(164)	(307)
ROVI CORP	19	1,061	1,077	17	0	0	17
SALESFORCE COM INC	19	1,852	2,708	377	479	857	857
SANDISK CORP INC	38	1,821	1,727	(94)	0	0	(94)
SARA LEE CORP COM	60	924	1,093	169	0	0	169
SCHLUMBERGER LTD	8	489	659	0	170	170	170

Accounts included in this report: 72E-04014 (ENDOWMENTM) "LOSAP ACCOUNT"

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Report created April 18, 2012 for ST. MICHAEL'S FIRE DEPT

Realized Gain/(Loss) by Security



Prior Year

Bank of America Corporation

Security Description	Quantity	Acquisition Cost(\$)	Liquidation Amount(\$)	Realized Gain/(Loss)(\$)
SIEMENS AG ADR	7	596	896	Short 58
SINA CORPORATION	20	1,843	1,661	Long 242
SKYWORKS SOLUTIONS INC	31	854	1,102	(154) 0
SM ENERGY CO SHS	15	807	1,028	248 0
SOUTHWESTERN ENERGY CO	24	1,175	896	221 0
SPX CORP COM	14	991	784	(279) (279)
STARBUCKS CORP	10	257	359	(207) 0
STARWOOD HOTELS AND RESORTS WORLDWIDE NE	9	517	449	102 0
STATOIL ASA SHS	21	459	576	(67) 0
STRYKER CORP	25	1,582	1,126	(455) 0
TARGET CORP COM	24	1,217	1,233	(6) 23
TELSTRA CORP ADR	27	376	365	(11) 0
TERADATA CORP DEL	19	794	1,057	263 0
TEXAS INSTRUMENTS	41	1,123	1,437	263 0
TRACTOR SUPPLY CO	27	1,325	1,687	314 0
TRANSCANADA CORP	10	374	386	362 0
TRIMBLE NAV LTD	30	1,326	1,079	12 0
TURKCELL ILETISIM ADR	23	396	367	(247) (247)
U.S. TRSY INFLATION NOTE 2.375% APR 15 2011	8,000	8,897	8,896	(0.02) (0.01)
ULTA SALON COSMETICS & FRAGRAN	20	1,396	1,301	(94) 0
UNITED TECHS CORP COM	13	744	1,088	0 343
UNITEDHEALTH GROUP INC	30	940	1,458	312 206
US TSY 2.375% JUL 31 20	6,000	6,113	5,828	(285) 0
US TSY 2.375% JUL 31 20 2.375% JUL 31 2017	5,000	4,954	4,857	(97) 0
US TSY 2.375% OCT 31 20	6,000	6,234	6,134	(100) 0
US TSY 2.500% JUN 30 20	1,000	1,032	978	(54) 0
US TSY 2.500% JUN 30 20 2.500% JUN 30 2017	1,000	1,000	978	(23) 0
V.F. CORPORATION	5,000	5,493	5,483	(51) 41
VALSPAR CORP COM	21	1,029	2,416	0 1,388
VARIAN MEDICAL SYS INC	24	812	912	100 0
VERISK ANALYTICS INC CLASS A	20	1,335	1,141	(194) 0
VERIZON COMMUNICATNS COM	30	1,022	990	(32) 0
VISA INC CLA SHRS	53	1,414	1,987	0 573
WABCO HOLDINGS INC	13	1,079	932	(147) 0
WAL-MART STORES INC	18	960	1,037	77 0
WEBMD HEALTH CORP	19	1,008	1,107	99 0
WSTN DIGITAL CORP DEL	21	1,133	741	(393) 0
	37	1,223	935	(288) 0

Accounts included in this report: 72E-04014 (ENDOWMENTM) "LOSAP ACCOUNT"

For Informational Purposes Only - Account Statement is Official Record of Holdings, Balances and Security Values

Report created April 18, 2012 for ST MICHAELS FIRE DEPT

Realized Gain/(Loss) by Security



Bank of America Corporation

Prior Year		Realized Gain/(Loss)(\$)			Realized Gain/(Loss)(\$)		
Security Description	Quantity	Acquisition Cost(\$)	Liquidation Amount(\$)	Short (70)	Long 0	Total (70)	
WYNDHAM WORLDWIDE CORP W	43	1,310	1,240				
WYNN RESORTS LTD	4		413		575	162	
YAMANA GOLD INC	18		228		269	42	
ZEBRA TECHNOLOGIES CRPA	33		1,285		1,049	(204)	
3M COMPANY	27		2,168		2,276	116	
Total Realized		(1,840)	12,932	(9)	0	11,092	

Mutual Fund Distributions

As Of Date 04/13/2012

ANNALY CAP MGMT INC

Account Number	Settlement Date	Long Term Capital Gain Distributions(\$)
72E-04014	04/27/2011	6
72E-04014	07/28/2011	2
72E-04014	10/27/2011	12
Total Distributions		21
Grand Total Distributions		21

The Realized Gain/(Loss) totals for this account do not include sales transactions where cost information is unavailable or data is insufficient to accurately calculate the Realized Gain/(Loss) figures

Note Acquisition Costs are not adjusted for stock splits, etc

The long-term capital gain distribution amounts may change due to income reclassification information provided by the issuer. In particular, distributions made by Mutual Funds, REITs and UITs often need to be reclassified as a different type of distribution (including long-term capital gain distributions) after the end of the year in which the distribution was originally paid