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SCANNED MAY 0 2 2013,

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For Paperwork Reduction Act Notice, see the separate instructions.

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000

Open to Public Inspection

OMB No. 1545-1150

20**12**

Department of the Treasury at the end of the year may use this form. Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2012 calendar year, or tax year beginning , 2012, and ending , 20 C Name of organization D Employer identification number B Check if applicable Address change 72-0407023 International Association of Firefighters Local 1051 Room/suite Number and street (or P O box, if mail is not delivered to street address) E Telephone number Name change Initial return 318-773-4963 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Number ▶ Application pending Bossier City, Louisiana 71171-6479 G Accounting Method: ☐ Cash ✓ Accrual H Check ► if the organization is not Other (specify) ▶ I Website: ▶ required to attach Schedule B (Form 990, 990-EZ, or 990-PF). ☐ 527 if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I . . . 1 2 2 Program service revenue including government fees and contracts 3 3 Membership dues and assessments . . . 64165 4 Investment income 4 332 Gross amount from sale of assets other than inventory . - . 5a 5я b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . C Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than 6a Gross income from fundraising events (not including \$ 12640 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b 6c Less: direct expenses from gaming and fundraising events . . . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 5511 7a Gross sales of inventory, less returns and allowances Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c C 8 8 9 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 70008 10 10 Benefits paid to or for members 11 11 12 12 Salaries, other compensation, and employee benefits 8261 Professional fees and other payments to independent contractors . . . 13 13 14 14 15 15 356 16 16 85120 17 17 Total expenses. Add lines 10 through 16 93737 18 18 -23729 Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 Net 20 20 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 18 through 20 21

9-5

BNE

Form **990-EZ** (2012)

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	Instructions for Part V) Check if the organization used Schedule O to respond to any question in this	rait	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	103	\ <u>\</u>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		1
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved	38a		✓
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	ļ	1
41	List the states with which a copy of this return is filed ► Louisiana			
42a		318-77	3-496	3
_	Located at ► ZIP + 4 ►		124	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No ✓
	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.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	• •	Yes	No No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	105	N 0
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		√
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		√

Form 99	10-EZ (2	012)							P	age 4
46	Did tl	ne organization engage, directly or in	ndirectly, in political c	ampaign activities	on behalf	of or i	n opposit	ion	Yes	No
	to ca	ndidates for public office? If "Yes," of	complete Schedule C	, Parti				. 46		1
Part		Section 501(c)(3) organizations								
		All section 501(c)(3) organization	s must answer que	stions 47–49b ar	nd 52, and	l com	plete the	e tables f	or line	es
		50 and 51								_
		Check if the organization used Sch	nedule O to respond	l to any question i	n this Part	: VI		<u></u>		
				E 504(b) -t	. A	4 1.		<u></u>	Yes	No
47		he organization engage in lobbying						ı	1	,
year? If "Yes," complete Schedule C, Part II								 	1	
								,	┼	\ <u>\</u>
49a b		s," was the related organization a se	-	-				. 49b		1
50		olete this table for the organization's								d key
		oyees) who each received more than								
	(-)	Name and title of each ampleyee	(b) Average	(c) Reportable		ealth b		(a) Estimate	ad amai	int of
	(a) Name and title of each employee paid more than \$100,000		hours per week devoted to position	compensation (Forms W-2/1099-MIS	benefit p	contributions to employed benefit plans, and deferred compensation				
					<u> </u>					
					İ					
				-						
										
							1			
f	Total	number of other employees paid over	er \$100,000	. ▶			<u> </u>			
51	Com	plete this table for the organization	s five highest compe	ensated independe	ent contrac	tors v	who each	received	more	than
	\$100,	000 of compensation from the orga	nization. If there is no	one, enter "None."						
(a)	Name a	nd address of each independent contractor pa	id more than \$100,000	(b) Type of :	service		(c)	Compensat	ion	
	_					-		···		
				1						
				1		1				
								 		-
	Total	number of other independent contra	ectors each receiving	over \$100,000	. •					
52		ne organization complete Schedule A	-		ons and 49	47(a)(1)			
-		xempt charitable trusts must attach						► 🗌 Yes		No
Under p	enalties	of perjury, I declare that I have examined this r	etum, including accompan	ying schedules and stat	ements, and t	o the b	est of my kn	owledge and	d belief,	ıt ıs
true, cor	rect, an	d complete, Declaration of preparer (other than	officer) is based on all info	mation of which prepar	rer has any kn	owledg	je (
C:		Jones Ca- Yourer	<u>, (</u>			Date	Macch	6,20	213	
Sign Here	- Cignatato di Ginedi									
11010	İ	David A. Powell/ Secretary Type or print name and title								
<u></u>		Print/Type preparer's name	Preparer's signature		Date		Check	,f PTIN		
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Preparent Use (Firm's name ▶				Firm's	EIN ▶			
		Firm's address ▶				Phone				
March	SOI DE	discuss this return with the preparer	ehown above? See :	netri ictione					. i 🗆 t	NΛ

Federal Statement

International Association of Firefighters Local 1051

EIN 72-0407023

2012

Statement #1

(Other Expenses)

1. Conference conventions meetings	406.39
2. Travel Conventions Meetings	9813.12
3. Per Capita	36822.26
4. Land Payments	38079.35

Statement #2

(Organizations primary exempt purpose)

To provide a fraternal exempt organization for the Welfare of the members of the International Association of Firefighters Local 1051