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A For the 2012 calendar year, or tax year beginning 10-01-2012

C Name of organization

NEW LONDON FIREFIGHTERS 1522 IAFF

DLN: 93492048006214

OMB No 1545-1150

Short Form Return of Organization Exempt From Income Tax

and ending 09-30-2013

Form 990-EZ

Department of the Treasury Internal Revenue Service

B Check if applicable

Address change

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 at the end of the year may use this form

Open to Public

Inspection

Inspection

D Employer identification number

06-6045365

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

	lame c nitial re Termina	eturn	Number and street (or P O box, if mail is not delivered to street address) Room, PO BOX 969	/suite	E Telepho	ne num	ber		
	mende	ed return sion pending	City or town, state or country, and ZIP + 4 NEW LONDON, CT 06320		F Group Exemption Number ►				
ΙW	ebsite	e: F newlondonfire	Cash Accrual Other (specify) ►	require	► If the d to attach 990, 990-E	Sched			
norr ınst	nally ructio	not more than ons) But If the	anization is not a section 509(a)(3) supporting organization or a secti \$50,000 A Form 990-EZ or Form 990 return is not required though organization chooses to file a return, be sure to file a complete return	Form 990-N (e	e-postcard)	may b	e required (see		
			7b, to line 9 to determine gross receipts If gross receipts are \$200, \$500,000 or more, file Form 990 instead of Form 990-EZ	000 or more, o		sets (F 25,46	•		
	art I	Revenue	e, Expenses, and Changes in Net Assets or Fund Balan e organization used Schedule O to respond to any question in this Pa		ınstructions	for Pa	art I)		
	1	Contributions	s, gifts, grants, and similar amounts received			1	45,563		
	2	Program serv	vice revenue including government fees and contracts			2			
	3	Membership	dues and assessments			3	63,389		
	4	Investmentı	ncome			4	13,178		
	5a	Gross amoun	nt from sale of assets other than inventory	5a	3,335				
ē	ь	Less cost or	rother basis and sales expenses	5b	2,048				
Revenue	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5	Sa)		5c	1,287		
	6	Gaming and f							
	a	Gross income	e from gaming (attach Schedule G if greater than \$15,000)	6a					
	ь	Gross income from fundrais	e from fundraising events (not including \$of contributi ing events reported on line 1) (attach Schedule G if the 🕏	ons					
		sum of such	gross income and contributions exceeds \$15,000)	6b	0				
	c	Less direct	expenses from gaming and fundraising events	6c	0				
	d	Net income o	or (loss) from gaming and fundraising events (add lines 6a and 6b and	subtract line 6	c)	6d			
	7a	Gross sales	of inventory, less returns and allowances	7a					
	ь	Less cost of	fgoods sold	7b	0				
	c	Gross profit o	or (loss) from sales of inventory (Subtract line 7b from line 7a) .			7c			
	8		ue (describe in Schedule O)			8			
	9		e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	123,417		
	10		ımılar amounts paid (list in Schedule O)			10	22,004		
	11		to or for members			11			
_	12	•	er compensation, and employee benefits			12			
Expenses	13		fees and other payments to independent contractors			13	35,510		
per.	14		rent, utilities, and maintenance			14			
Ä	15	=	lications, postage, and shipping			15	188		
	16	•	ses (describe in Schedule O)		_	16	38,484		
	17		es. Add lines 10 through 16			17	96,186		
<u>8</u>	18					18	27,231		
Ass	19		r fund balances at beginning of year (from line 27, column (A)) (must				242722		
NetAssets			igure reported on prior year's return)			19	312,700		
_	20	_	·		_	20	18,851		
	21	Net assets o	r fund balances at end of year Combine lines 18 through 20			21	358,782		

Part II Balance Sheets (see the Check if the organization used		any question in th	nis Pa	rt II		
		Γ	(A)	Beginning of year		(B) End of year
22 Cash, savings, and investments .				312,700	22	403,902
23 Land and buildings				•	23	, , , , , , , , , , , , , , , , , , ,
24 Other assets (describe in Schedule O					24	
25 Total assets				312,700	25	403,902
26 Total liabilities (describe in Schedule	0)			•	26	45,120
27 Net assets or fund balances (line 27 o	f column (B) must agree wit	th line 21)		312,700	27	358,782
Check if the organization used What is the organization's primary exempt UNION MEMBERSHIP REPRESENTATION Describe the organization's program service measured by expenses In a clear and control benefited, and other relevant information for	d Schedule O to respond to purpose? N e accomplishments for eac cise manner, describe the s	any question in the	hıs Pa est pr	rt III	(c)(org 494	Expenses equired for section 501 (3) and 501(c)(4) anizations and section 47(a)(1) trusts, ional for others)
28 DONATIONS & SCHOLARSHIPS (Grants \$ 18,268) If the	s amount includes foreign (grants, check here	e .	▶ ┌	28a	
29 ORGANIZE, REPRESENT, AND SERVIGRIEVANCES		RS INCLUDING	NEGO	TIATIONS AND	29a	
31 Other program services (describe in Sc	s amount includes foreign of hedule O) s amount includes foreign of	`		<u> </u>	30a	
· · · · · · · · · · · · · · · · · · ·		•			31a 32	35,41
22 Total program service expenses (add lin Part IV List of Officers, Directors, Tru Check if the organization used	stees, and Key Employees		not con	pensated (see the instr	uctions	for Part IV)
(a) Name and title	(b) A verage hours per week devoted to position	(c)Reportabl compensatio (Forms W-2/10 MISC) (if not p enter -0-)	n 99- paid,	(d) Health benef contributions t employee benefit p and deferred compensation	o olans,	(e) Estimated amoun of other compensatio
ERIC GROUSE Secretary	0		0			
KEVIN IANNANTUONO Treasurer	0		0			
JONATHAN PAIGE Vice President	0		0			
ROCCO BASILICA President	0		0			

	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part	v		<u>Г</u>
			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		No
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		No
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		No
Ь	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		Νo
С	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	35c		No
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		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 🕨			
b	Did the organization file Form 1120-POL for this year?	37b		Νo
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Νo
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9 39a 0			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	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		
c	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			
e	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		Νo
41	List the states with which a copy of this return is filed 🕨			
42a	The organization's books are in care of ► KEVIN IANNANTUONO Telephone no	(86	0)739-	9194
	Located at F 6 OLD BLACK POINT ROAD NIANTIC, CT ZIP + 4	<u>06</u>	357	
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 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.			
C	At any time during the calendar year, did the organization maintain an office outside the U S $^{\circ}$	42c		Νo
	If "Yes," enter the name of the foreign country			
	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			▶ Г
			Yes	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		Νo
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		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		Νo
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		Νo
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Νo
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		No

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

orm 990-EZ ((2012)						Page 4
						Yes	No
16 Did the o	rganization engage, directly es for public office? If "Yes,"	or indirectly, in political c complete Schedule C, Pai	ampaign activities on rt I 📆	behalf of or in opposition t		Yes	
Part VI S	Section 501(c)(3) orga	nizations only					
	All section 501(c)(3) orgai and 51	nızatıons must answer	questions 47-49b a	nd 52, and complete t	he tables	for li	nes 50
	theck if the organization used	d Schedule O to respond t	o any question in this	Part VI		<u></u>	Г
						Yes	No
	organization engage in lobbyir complete Schedule C, Part I		ction 501(h) election i	n effect during the tax yea	r? 47		
18 Is the or	ganızatıon a school as descri	ibed in section 170(b)(1)((A)(II)? If "Yes," comp	lete Schedule E .	. 48		
19a Did the o	organization make any transfe	ers to an exempt non-chai	rıtable related organıza	ation?	. 49a		
b If"Yes,"	was the related organization	a section 527 organization	on?		. 49b		
	e this table for the organizations) who each received more t						•
(a) Name and	title of each employee paid re than \$100,000	(b) A verage hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099- MISC)	(d) Health benefits, contributions to	(e) Es	tımated	l amount ensatior
IONE				- Companion			
				_			
of compe (a) Name	e this table for the organization in the control of	n If there is none, enter "	None "	(b) Type of service		an \$10 Compen	•
ONE							
52 Did the	umber of other independent o e organization complete Sche empt charitable trusts must a	edule A? NOTE: All Section	n 501(c)(3) organizati	ons and 4947(a)(1)	. ▶	┌ Ye	s ┌ No
	of perjury, I declare that I have belief, it is true, correct, and co						
	*****			2014-02-17			
lara I	Signature of officer			Date			
18.	Type or print name and title						
	Print/Type preparer's name	Preparer's signatur SHANNON HEAP	re Da	I CHECK I II I	N 0042060		
Paid Proparor	Firm's name 🕨 Aldrich Perkir		L	Firm's EIN 🕨			
Preparer Jse Only	Firm's address ► 567 Vauxhall	St Ext Ste 330		Phone no (860) 44	7-2825		
	Waterford, CT	Г 06385					
lov the IDC di	scues this roturn with the pre	anarar shawa ahaya Saa	Instructions		<u> </u>	T	- No

Political Campaign and Lobbying Activities

DLN: 93492048006214

OMB No 1545-0047

Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NEW LONDON FIREFIGHTERS 1522 IAFF 06-6045365 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a 0 separate political organization If none, enter -0-(1) NEW LONDON FIREFIGHTERS PAC PO BOX 969 06-6045365 1,308 FUND NEW LONDON, CT 06320

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2			
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768				
_	under section 501(h)).		Link in Doub TV an						
A	Check F if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)								
<u>B</u>	Check Frifthe filing organization checked box		ol" provisions app	oly					
	Limits on Lobbying E (The term "expenditures" means an		l.)		(a) Filing organization's totals	(b) Affiliated group totals			
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)						
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)						
c	Total lobbying expenditures (add lines 1a and 1b	o)							
d	Other exempt purpose expenditures								
е	Total exempt purpose expenditures (add lines 10	c and 1d)							
f	Lobbying nontaxable amount Enter the amount f	rom the following table	ın both						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:						
	Not over \$500,000	20% of the amount on lir	ne 1e						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000					
	Over \$17,000,000	\$1,000,000							
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				1			
_	Subtract line 1g from line 1a If zero or less, ente	•							
i	Subtract line 1f from line 1c If zero or less, ente								
i	If there is an amount other than zero on either lir		organization file	Form 4720 rep	ortina				
-	section 4911 tax for this year?					├ Yes ├ No			
	4 Van A		Indon Coation	F01/b)					
	(Some organizations that made a columns below. See the		ection do not	: have to cor		ne five			
	Lobbying Expe	enditures During	4-Year Avera	ging Period		I			
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total			
2a	Lobbying nontaxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots nontavable amount								

30110	state & (offin 550 of 550 EZ) Z01Z				г	iye 🐱
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	TOM				
		(8	a)		(b)	
ror e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	/	A moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	_				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c))(5), c	or s		
	Were substantially all (000) an array due as a deductible by a substantial			_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		-	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	-01/-	\ <u>\</u>	3		
Pal	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	, , , , , , , , , , , , , , , , , , , ,					

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

Name of the organization NEW LONDON FIREFIGHTERS 1522 IAFF **Employer identification number**

06-6045365

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1007	Total Liabilities 1007	Secured Mortgages and Notes Payable - Beginning \$0 Secured Mortgages and Notes Payable - Ending \$45120
Form 990-EZ, Part I, Line 16 11	Other Expenses 11	WEBSITE EXPENSES \$389
Form 990-EZ, Part I, Line 16 10	Other Expenses 10	PRESIDENTS EXPENSES \$400
Form 990-EZ, Part I, Line 16 9	Other Expenses 9	BANK FEES \$403
Form 990-EZ, Part I, Line 16 8	Other Expenses 8	SUBSCRIPTIONS \$544
Form 990-EZ, Part I, Line 16 7	Other Expenses 7	TELEPHONE \$719
Form 990-EZ, Part I, Line 16 6	Other Expenses 6	SICK COMMITTEE \$737
Form 990-EZ, Part I, Line 16 5	Other Expenses 5	TELEVISION \$2633
Form 990-EZ, Part I, Line 16 4	Other Expenses 4	MISCELLANEOUS \$2641
Form 990-EZ, Part I, Line 16 3	Other Expenses 3	DONATIONS \$6668
Form 990-EZ, Part I, Line 16 2	Other Expenses 2	KITTY EXPENSES \$7960
Form 990-EZ, Part I, Line 16 1	Other Expenses 1	SCHOLARSHIPS \$11600
Form 990-EZ, Part I, Line 16 1007	Other Expenses 1007	Conferences, Conventions, and Meetings \$3071
Form 990-EZ, Part I, Line 16 1002	Other Expenses 1002	Office Expenses \$719
Form 990-EZ, Part I, Line 10 3	Payments to Affiliates 3	Name INTERNT'L ASSOC FIRE FIGHTERS Address 1750 NEW YORK AVE N W WASHINGTON, DC 20006 Purpose of payment DUES Amount \$9925
Form 990-EZ, Part I, Line 10 2	Payments to Affiliates 2	Name UNIFORMED PROF FF ASSOC OF CT Address 30 SHERMAN ST WEST HARTFORD, CT 06110 Purpose of payment DUES Amount \$11062