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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

A	For the	2013 cale	ndar year, or tax year beginning May1 , 2013, and ending	April	30	, 20 14			
В	Check if a	applicable	s C	D Employer identification number					
	Address of	change	Doing Business As Virginia Professional Fire Fighters			546065170			
	Name cha	ange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E	Telephor	ne number			
$\overline{\sqcap}$	Initial retu	_	455 Hidden Country Lane	i		540-890-1394			
$\overline{\Box}$	Terminate		City or town, state or province, country, and ZIP or foreign postal code			340-030-1334			
\exists	Amended			į,	Gross re	cointe \$ 466517.70			
\exists			Hardy, VA 24101 F Name and address of principal officer R. Michael Mohler		_				
Ч	Application			-		subordinates? Yes No			
_						s included? Yes No			
!	Tax-exem	·	☐ 501(c)(3) ☐ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			list. (see instructions)			
<u>;</u>	Website:				p exemption number ► 0160				
_		rganization		1955	M State	of legal domicile VA			
Η.	art I	Summ							
	1	Briefly de	escribe the organization's mission or most significant activities: To protect	and provid	de for th	e health, safety and			
9] 1	financial :	security of all VPFF members and their families while continuing to enhance pu	ublic safety	<u>l:</u>				
Activities & Governance	1 .		·						
ě	2 (Check th	is box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed of $f m$	nore than 2	25% of	its net assets.			
ĝ	3	Number (of voting members of the governing body (Part VI, line 1a)		3	54			
ಷ	4	Number (of independent voting members of the governing body (Part VI, line 1b)		4	0			
ë	1		nber of individuals employed in calendar year 2013 (Part V, line 2a)		5	10			
ξ			nber of volunteers (estimate if necessary)		6	50			
ğ			elated business revenue from Part VIII, column (C), line 12		7a				
•			lated business touchts we save from False 200 T. I'm 24		7b	.00.			
		iver dille	ated business taxable income from Form 990-1, line 34	Prior Year		.00 Current Year			
Revenue	١.,		tions and greats (Dort VIII line 4h)						
	1		tions and grants (Part VIII, line 1h)	318	8089.16	407731.42			
	1	-	service revenue (Part VIII, line 2g)						
ě	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)	38	8551.65	49901.28			
_			renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17	7500.00	8880.00			
		Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	374	4140.81	466512.70			
	13 (Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		.00	.00			
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		.00	.00			
Ø	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	55	5644.59	56012.43			
Expenses			onal fundraising fees (Part IX, column (A), line 11e)		.00	.00			
ē	1		draising expenses (Part IX, column (D), line 25)						
ŭ			penses (Part IX, column (A), lines 11a-17d-11f-24e)	253	2217.09	306959.96			
			penses. Add lines 13–17 (must equal Part IX, column (A), line (25)		7861.68				
	1		less expenses. Subtract line 18 from line 12			362972.39			
_ 5		10101100		nning of Curr	6279.13 ent Year	103540.31 End of Year			
ots o	20	Total acc	ets (Part X, line 16)						
LSS8 Bals	24 .				1541.67	805081.98			
Net Assets or Fund Balances	21				.00	.00			
			ts or fund balances. Subtract line 21 from line 20	70	<u> 1541.67</u>	805081.98			
	art II		ture Block	 -					
Ur	nder penalt	ties of perju	ry, I declare that I have examined this retum, including accompanying schedules and statemen lete. Declaration of preparer (other than officer) is based on all information of which preparer has	its, and to the	e best of n	ny knowledge and belief, it is			
			cid. Coolaration of preparer (other than onice) is based on all unormation of which preparer has	ally kilowick	age				
			Ischaf N. Stofm		5/16	109			
Sig	- 1	Sign	atuge of officer	Date	. / /				
He	re		YICHAGE W. HANKS Secretary Treasu	ires					
Type or print name and title									
Pa	id	Print/Ty	pe preparer's name Preparer's signature Date		Check	PTIN			
		_			self-emp	bloyed			
	eparer	I	ame >	Firm's	EIN ▶				
US	se Only	,	ddress ▶	Phone					
Ma	v the IR		s this return with the preparer shown above? (see instructions)	, ,		Yes No			
_			ction Act Notice, see the separate instructions.	1282Y		Form 990 (2013)			

Part!	V Checklist of Required Schedules			raye C
			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		1
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	ļ	/
J	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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			,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		✓
-	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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	 	ļ	
7	"Yes," complete Schedule D, Part I	6		1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		1
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			,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		√
	VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
С	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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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	-	1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120	_	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓_
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
	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.	441		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	14b		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
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)			,
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.	17	_	V
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		*
	If "Yes," complete Schedule G, Part III	19		/
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	11 1 35 to 110 200, did the organization attach a copy of its addited illiancial statements to this return?	20b	ກ 990	(2013)
		, 011		

Part I	V Checklist of Required Schedules (continued)		2	
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		į
22	Did the organization report more than \$5,000 of grants or 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		1
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		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
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		√
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	-	1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		1
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):	* 65.4		•
а	A current or former officer, director, trustee; or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	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	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		√
31	conservation contributions? If "Yes," complete Schedule M	30		√
32	Part I	31		✓
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	32		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1			√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		▼
b	If "Yes" to line 35a, 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	35b		▼
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	36		1
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	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and-19? Note. All Form 990 filers are required to complete Schedule O	38	, i	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. \square
:			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	1		
p.	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		1
С	Did, the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		ļ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		├
Za			ŀ	
b	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	1	
J	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	V	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	-	\ <u> </u>
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)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			\vdash
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
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 as charitable contributions?	6a	/	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		,	
7	gifts were not tax deductible?	6b	-	├
7 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		1
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.	7.5	,	
	required to file Form 8282?	7c -		V
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
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		ļ	ļ
_	organization, have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.		ļ	ļ
a b	Did the organization make any taxable distributions under section 4966?	9a 9b	-	-
10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders	İ		ļ
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)			
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.			L
·a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
þ,	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
U	The graphization is licensed to page muclified beauty place]	
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	 	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins		
	Check if Schedule O contains a response or note to any line in this Part VI			_ V
Secti	on A. Governing Body and Management			1
_			Yes	·No
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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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?	2		1
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?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	\	
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?	7a	√	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u>_</u>	
40-	Colline annual authority of the first of the		Yes	No _
10a	Did the organization have local chapters, branches, or affiliates?	10a	✓	
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?	10b	✓	-
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 40-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b		
13	describe in Schedule O how this was done	12c		
14	Did the organization have a written whistleblower policy?	13		✓_
15	Did the organization have a written document retention and destruction policy?	14	✓	
-	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		1
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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			·
17	List the states with which a copy of this Form 990 is required to be filed ▶ Virginia			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(c)(3)s	only)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the)	
	organization: ► Michael W. Hanks, 455 Hidden Country Lane, Hardy, VA 24101			

Form	990	(2013)	

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

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 no	r any relate	d org	aniz	zatic	on c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
				(C)					
(A)	(B)	١			ition			(D)	(E)	(F)
Name and Title	Average	1 '				e than d		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	익물) j	Q	7	9.=	7	from the	related organizations	other compensation
	related	물통	ž	Officer	y e	le de le	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ct al	tion	Γ.	쀨	yee yee	1	(W-2/1099-MISC)		organization
	line)	Individual trustee or director	함	}	Key employee	ğ			i	and related organizations
		itee	Institutional trustee		"	l ens			- ,	0. gai
<u> </u>	-		8		ŀ	Highest compensated employee		-	-	-
									1 '	y
(1) R. Michael Mohler	30				١,					•
7816 Marconi Court, Springfield, VA 22153				✓				13847.16	-	
(2) Michael W. Hanks	30									
455 Hidden Country Lane, Hardy, VA 24101	_	Ĺ	L	1				13847.16		
(3) James Poindexter	10									
1828 Pembrook Drive, Vinton, VA 24179				1				2475.69		
(4) Robert Bragg, III	10									
8238 Faber Road, Faber, VA 22938			L	✓				2475.69		
(5) Craig Evans	10									
P.O. Box 3004, Fairfax, VA 22038				1				2475.69		
(6) Paul Nichols	10									
237 Lane Crescent, Smithfield, VA 23430				1		· .	L	2475.69		
(7) Scott Spencer	10									
914 Floral Avenue, Colonial Heights, VA 23834			L	1			<u> </u>	2475.69		
(8) Max Gonano	10]								
1877 Haverhill Drive, Virginia Beach, VA 23453				✓	<u>. </u>			2475.69		
(9) Arthur Lipscomb	25									·
111 Ivylea Drive, Forest, VA 24551					✓	✓		10373.40		
(10) Mitch Nason	5									
17 Ryland Road, Stafford, VA 22556			ł		✓			1384.40		
(11)	-									
(12)	 		-	-	-		-			
(12)	†	1	-							
(13)										
(14)				_			_			
<u> </u>	†	1								

	hours pe		(B) Average nours per sek (list any						(D) Reportable compensation from	(E)	ble on from	(F) Estima amoun othe	mated ount of	•
	-	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N		comp fro orga and	ensation m the nization related nizations	
(15)								_		-				
(16)								_					_	
(17)								_			_			
(18)													<u></u>	
(19)			-		-	-		-	•					
(20)								_		_		<u> </u>		
			_											
(21)												_		
(22)														
(23)							·							
(24)							-			<u> </u>		,		
(25)												,		
1b c d	Sub-total . Total from continuation sheets to Part Total (add lines 1b and 1c)			•	•	 	•	 	54582.68 .00					
2	Total number of individuals (including but reportable compensation from the organic							e) w	54582.68 ho received me	ore than \$1	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer, direc						emp	loyee, or high	est compe	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	oortal	ole d	com	nper	nsatio					4		<u>√</u>
5	Did any person listed on line 1a receive of for services rendered to the organization											5		<u> </u>
	n B. Independent Contractors											.!		
1	Complete this table for your five highest of compensation from the organization. Repyear.	compensate	ed inc nsatio	n fo	endo or th	ent (ne ca	alend	acto ar y	ear ending wit	h or within	n \$100, the orga	000 of anizatio	on's ta	×
	(A) Name and business add	ress							. (B) Description of s	ervices	- C	(C) compens	ation	
			_					_					-	
									-					_
2	Total number of independent contractor													

Far	VIII	Statement of Revenue				
		Check if Schedule O contains a response or note to				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a				
iz a	ь	Membership dues 1b 404431.60				1
, E	С	Fundraising events 1c				1
ar /	d	Related organizations 1d	1			
S, E	e	Government grants (contributions) 1e				
ë ë	f	All other contributions, gifts, grants,				İ
	•	and similar amounts not included above 1f 3299.82			İ	İ
걸	_ ا	Nanagah pentrihutiana ingludad in linea 1a 1f. C				
Contributions, Gifts, Grants and Other Similar Amounts	g	Total. Add lines 1a-1f	407704 40			
	-''-	Business Code	407731.42			
Ž	20					
ě	2a					
ë	b					
Ž	C					
နို	d					
raff	e	All all				
Program Service Revenue	T	All other program service revenue .			<u> </u>	
	<u>g</u> 3	Total. Add lines 2a–2f			T	
	3	and other similar amounts)				
		l l	49901.28			
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	C-		ļ			
	6a	Gross rents				
•	b.	Less: rental expenses			-	
	C	Rental income or (loss)		····		
	d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other assets other than inventory				
	b	Less: cost or other basis and sales expenses				
	_					
	C	Gain or (loss) .			ļ	
	d	Net gain or (loss)			1	
Other Revenue	8a	Gross income from fundraising events (not including \$				
er Re		of contributions reported on line 1c). See Part IV, line 18 a				
₹	1	Less: direct expenses b				
		Net income or (loss) from fundraising events . ▶			<u> </u>	
	9a	Gross income from gaming activities.	1			
		See Part IV, line 19 a				
		Less: direct expenses b				ļ
	1	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				
	1	returns and allowances a				
		Less: cost of goods sold b				
	<u>c</u> _	Net income or (loss) from sales of inventory				<u>.</u>
-		Miscellaneous Revenue Business Code				
		Convention, Seminar Registration 900099	8880.00		<u> </u>	
-	þ				ļ. ——	
	C				 	
	d	All other revenue				
	e	Total. Add lines 11a–11d	8880.00		 	
	12	Total revenue. See instructions	466612.70		1	1

	IX Statement of Functional Expenses		· · · · · · · · · · · · · · · · · · ·		£
Section	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	ns must complete c	olumn (A).
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	54582.68		-	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			1-	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			-	1
9 -	Other employee benefits				
10	Payroll taxes	1429.75		_	
11	Fees for services (non-employees):	112070	-		
а	Management				
b	Legal	44505.40			
-		14505.13			
C	Accounting		•	•	
d	Lobbying	33174.49		i	-
e	Professional fundraising services. See Part IV, line 17				7, ,1
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	
	- · · · · · · · · · · · · · · · · · · ·		<u>, </u>	<u></u>	
13	Office expenses	16660.62			
14	Information technology				
15	Royalties				
16	Occupancy	9076.94			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	132333.97			
20	Interest	•			`
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
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.)				
а	Donations Scholarships	101209.01			
b		101208.91			
C					- · ·
d		-	· · ·		
	All other evenesses		 		
^ е	All other expenses				<u> </u>
25	Total functional expenses. Add lines 1 through 24e	362972.39			
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 if following SOP 98-2 (ASC 958-720)		;		

201363.66

805081.98

Form 990 (2013)

201363.66 10c

701541.67

11

12

13

14

15

16

17

18

Form 990 (2013) Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 1 45036.24 1 30228.27 2 2 Savings and temporary cash investments 455141.77 573490.05 3 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other 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 6 Assets 7 7 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a

10b

Less: accumulated depreciation

Investments-other securities. See Part IV, line 11

Investments-program-related. See Part IV, line 11

Accounts payable and accrued expenses

Total assets. Add lines 1 through 15 (must equal line 34)

Investments—publicly traded securities

b

11

12

13

14

15

16

17

18

	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	,
Se	22	Loans and other payables to current and former officers, directors,			
ij		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
ב	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	.00	26	.00
,,		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
ce		complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
<u>p</u>	29	Permanently restricted net assets		29	
Ξ.		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			ĺ
9		complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	01363.66	31	201363.66
Net Assets or Fund Balances	32		00178.01	32	603718.32
Š	33		01541.67	33	
_	34	Total liabilities and net assets/fund balances	01541.67	34	805081.98

Form 990 (2013)

1 Total revenue (must equal Part VIII, column (A), line 12) 1 466512.70 2 Total expenses (must equal Part IX, column (A), line 25) 2 362972.33 3 Revenue less expenses. Subtract line 2 from line 1 3 103540.3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 701541.6 5 Net unrealized gains (losses) on investments 5 .0 6 Donated services and use of facilities 6 .0 7 Investment expenses 7 .0 8 .0	Part	XI Reconciliation of Net Assets			•				
Total revenue (must equal Part VIII, column (A), line 12)		Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u></u> .				
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). Net unrealized gains (losses) on investments Donated services and use of facilities Net unrealized gains (losses) on investments Investment expenses Prior period adjustments Net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	1	Total revenue (must equal Part VIII, column (A), line 12)	1						
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2		3629	72.39			
Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	3	Revenue less expenses. Subtract line 2 from line 1	3		1035	40.31			
6 Donated services and use of facilities	4		4		7015	41.67			
7 1.00 8 Prior period adjustments	5	5 Net unrealized gains (losses) on investments							
8 Pror period adjustments 8	6	Donated services and use of facilities	6			.00			
Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	7	Investment expenses ,	7			.00			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	8	Prior period adjustments	8			.00			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	9		9			.00			
Check if Schedule O contains a response or note to any line in this Part XII	10								
Check if Schedule O contains a response or note to any line in this Part XII	_	33, column (B))	10		8050	81.98			
Accounting method used to prepare the Form 990: Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	Part								
1 Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?		Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	<u></u>				
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?					Yes	No			
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1			_					
2a Were the organization's financial statements compiled or reviewed by an independent accountant?			lain	in .	, -				
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?]			
reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	2a				ļ	✓			
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?			led o	or					
b Were the organization's financial statements audited by an independent accountant?		·							
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		·							
•	Ь					✓			
separate basis, consolidated basis, or both:		·	i on	a					
·		•							
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				.	 	<u> </u> _			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	C								
of the audit, review, or compilation of its financial statements and selection of an independent accountant?					1	✓			
If the organization changed either its oversight process or selection process during the tax year, explain in			lain	in					
Schedule O.				.	ļ				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	3a		orth						
the Single Audit Act and OMB Circular A-133?		G	•			✓			
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	b			I .					
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	aits.	3b	1	<u> </u>			

Form **990** (2013)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

lizaini	Professional Fire Finhans		
Par	Professional Fire Fighters	or Advised Funds or Other Similar Fur	54-6065170
ıaı		vered "Yes" to Form 990, Part IV, line 6.	ids of Accounts.
	Complete if the organization answ	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(2) 25:15: 45:1555 14:155	(a) i dilab dilab dilab dilab
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 h	eld in donor advised:
•	funds are the organization's property, subje		
6	Did the organization inform all grantees, do		uuuu
_	only for charitable purposes and not for the		
	conferring impermissible private benefit?		
Par	Conservation Easements.		
	Complete if the organization answ	vered "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 o	f an historically important land area
	 Protection of natural habitat 	☐ Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а		· <i>· ·</i> · · · · · · · · · · · · · ·	<u>2a</u>
b	Total acreage restricted by conservation eas	•	
. d	Number of conservation easements on a ce Number of conservation easements include		
u	historic structure listed in the National Regis		1
3	Number of conservation easements modifie		minated by the organization during the
•	tax year ▶	a, transferred, followed, extringuished, or terr	milated by the organization during the
4	Number of states where property subject to	conservation easement is located ▶	
5	Does the organization have a written po		spection, handling of
	violations, and enforcement of the conserva	tion easements it holds?	· · · · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservation	easements during the year
	>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ease	ements during the year
_	▶ \$		
8	Does each conservation easement reported		
_			· · · · · · · □ Yes □ No
9	In Part XIII, describe how the organization rebalance sheet, and include, if applicable, the		
	organization's accounting for conservation		ianciai statements that describes the
Pari		ections of Art, Historical Treasures, or	Other Similar Assets
		vered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted un		s revenue statement and balance sheet
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text	of the footnote to its financial statements tha	t describes these items.
b	If the organization elected, as permitted u	nder SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other		ducation, or research in furtherance of
	public service, provide the following amount	_	_
	(i) Revenues included in Form 990, Part VIII(ii) Assets included in Form 990, Part X	, line 1	> \$
_	(II) Assets included in Form 990, Part X .		· · · · > \$
2	If the organization received or held works following amounts required to be reported to		
_	following amounts required to be reported u	inder ormo TTO (MOC 908) relating to these I	tenis.
a	Assets included in Form 990, Part Y	ne 1	

_	-
Page	4

Part	Organizations Maintaining C	Collections of A	Art, His	torical T	reasures	, or O	ther Similar As	sets (contin	ued)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and otl	her reco	rds, chec	k any of th	e follov	ving that are a si	gnificant use	of its
а	☐ Public exhibition		d	☐ Loan	or exchang	je prog	rams		
b	☐ Scholarly research							•	
С	☐ Preservation for future generations							,	
4	Provide a description of the organizatio XIII.	n's collections a	ınd expla	ain how th	ney further	the org	ganization's exem	npt purpose in	n Part
5	During the year, did the organization sassets to be sold to raise funds rather the] No
Part	IV Escrow and Custodial Arran	gements.							
	Complete if the organization a 990, Part X, line 21.						•		m ——
1a	Is the organization an agent, trustee, or included on Form 990, Part X?] No
b	If "Yes," explain the arrangement in Par	t XIII and comple	ete the fo	llowing ta	able:		, Ar	nount	
C	Beginning balance					10	;		
d	Additions during the year					10			
е	Distributions during the year					16			
f	Ending balance					11	•		
2a	Did the organization include an amount					. –		☐ Yes ☐	No
b	If "Yes," explain the arrangement in Par	•							<u></u>
Par						p. 0	<u> </u>		
	Complete if the organization a	nswered "Yes'	' to For	n 990. P	art IV. line	10.			
		(a) Current year		or year	(c) Two yea		(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							1.	
е	Other expenditures for facilities and programs		-	-	-		-	-	
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the	e current year en	d balanc	e (line 1a	, column (a)) held	as:	- 	
а	Board designated or quasi-endowment	•	%	` •	,	•			
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	·· %							
	The percentages in lines 2a, 2b, and 2c	should equal 10	0%.						
3a	Are there endowment funds not in the			zation tha	at are held	and ad	ministered for the	е	
	organization by:	-	J - J -			•		Yes	No
	(i) unrelated organizations							3a(i)	1
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organization							3b	
4	Describe in Part XIII the intended uses of					• •		[00]	
Part			7110 01101		J. 100.				
ı arı	Complete if the organization a		" to Eor	~ 000 P	art IV line	115	See Form 990	Part Y line 1	n
	Description of property	(a) Cost or ot			or other basis		Accumulated	(d) Book valu	
		(investme		1 ' '	ther)	ď	epreciation		
1a	Land			 					<u>50000</u>
b	Buildings			 				1513	<u>63.66</u>
C	Leasehold improvements			ļ <u>-</u>	-				
d	Equipment			ļ					
e	Other			L	 	l			
Total.	Add lines 1a through 1e. (Column (d) mu	ist equal Form 9	90, Part	X, column	(B), line 10	D(c).)	<u>.</u> ▶	2013	63.66

Part VII	Investments—Other Securities		<u></u>	_	
	Complete if the organization ans			1	
	(a) Description of security or categor (including name of security)	y 	(b) Book value		od of valuation: of-year market value
(1) Financial					
• •	eld equity interests				
(3) Other		·			•
(A)					<u> </u>
(B)		·····			-
(C)			ļ 		
(D)					
(E) (F)			 		
(G)		·			<u> </u>
(H)					
	b) must equal Form 990, Part X, col (B) line 12.) ▶				
Part VIII	Investments—Program Relate	d.	<u></u>	<u> </u>	
T GIT VIII	Complete if the organization ans		m 990. Part IV. line	e 11c. See Form 9	990 Part X line 13
-	(a) Description of investment		(b) Book value	(c) Meth	nod of valuation of-year market value
(1)					
(2)					
(3)		<u> </u>			
(4)			<u> </u>		
(5)					
(6)					
(7)					
(8)		····			
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.) 🕨				
Part IX	Other Assets.			-	
	Complete if the organization ans		m 990, Part IV, line	e 11d. See Form	
 		(a) Description	 .		(b) Book value
_(1)					
(2)		_ _		···	
(3)					
(4)					
(5)		 			
<u>(6)</u> <u>(7)</u>	·				
(8)					
(9)			·		
	mn (b) must equal Form 990, Part X, c	col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization and line 25.	swered "Yes" to For	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value	· T		
(1) Federal II	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		ļ			
	b) must equal Form 990, Part X, col. (B) line 25.)				
	runcertain tax positions. In Part XIII, prov				
organization	s liability for uncertain tax positions unde	er FIN 48 (ASC 740). Ch	eck here if the text of	the footnote has beer	n provided in Part XIII

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	Return.	4
1	Total revenue, gains, and other support per audited financial statements	1	466517.70
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	 	400317.70
a	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII.)	┥ ┃	
е	Add lines 2a through 2d	2e	.00
3	Subtract line 2e from line 1	3	466517.70
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		400017.70
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1	
С	Add lines 4a and 4b	4c	.00
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	466517.70
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	362977.39
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
C	Other losses	1	
d	Other (Describe in Part XIII.)	1	
е	Add lines 2a through 2d	2e	.00
3	Subtract line 2e from line 1	3	362977.39
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1]	
С	Add lines 4a and 4b	4c	.00.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	362977.39
2; Par	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2i XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional ir	nformation.	
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Schedule D (For		Page \$
Part XIII	Supplemental Information (continued)	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2013
Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Name of the organization **Employer identification number**

Schedule O (Form 990 or 990-EZ) (2013)	Page
Name of the organization	Employer identification number
Virginia Professional Fire Fighters	54-6065170
Section VI Line 6 - Members are IAFF members whose locals affiliate with the VPFF	
Section VI Line 7a - Members elect officers every two years at Convention through elected delegates	
Section VI Line 7b - Officers operate under the directives of members given at the Convention and Tri-a	nnual Board meetings
Section VI Line 8a/b - Minutes are taken at meetings and submitted at the subsequent meeting for appr	oval
Section VI Line 10a - Locals are IAFF locals who affiliate with VPFF	
Section VI Line 10b - VPFF operates under Constitution and By-Laws approved by IAFF. It also operate	s under its own policy manual.
Section VI Line 11a - This form is submitted at the annual May meeting during the audit process. Board	(local affiliates) are presented the
audit report with form 990 for their approval.	
Section VI Line 19 - Records are kept by Secretary Treasurer (currently Michael Hanks at 455 Hidden Co	ountry Lane, Hardy, VA 24101)
Financial reports and meeting minutes are presented tri-annually at board meetings attended by locals	represented by the VPFF for
their approval. Audits are done annually by the Trustees and a report is submitted to the International	Association of Fire Fighters.
Additionally the records are made available to the general public upon request.	