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DLN: 93492019005146

OMB No 1545-1150

Form 990-EZ

Department of the Treasury

Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax 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-EZ and its instructions is at $\underline{www.irs.gov/form990}$.

Open to Public Inspection

			r year, or tax year beginning 10-01-2014 , and ending 09-30-2015			
		applicable change	C Name of organization New London Firefighters 1522 IAFF	D Employ	er id	entification number
	lame ch		Number and street (or P O box, if mail is not delivered to street address) Room/suite	06-604		
	nitial re		PO Box 969	E Telepho		
┌╒						460-8489
return/terminated City or town, state or province, country, and ZIP or foreign postal code New London, CT 06320 F Group Exem Number I						
		on pending				
GΔ	ccount	tina Method		eck 🕨 🔽 ıf the quired to attach	_	
		_	(Fc	orm 990, 990-E		
		www newlondo				
J Tax	k-exem	pt status(check o	nly one) - 501(c)(3) 501(c)(5) 4(insert no) 4947(a)(1) or 527			
		=	Corporation Trust Association Other			
			7b to line 9 to determine gross receipts If gross receipts are \$200,000 or mor) or more, file Form 990 instead of Form 990-EZ	e, or if total ass. \$ 1 \		•
• •	art I		, Expenses, and Changes in Net Assets or Fund Balances (see	<u>'</u>		
			e organization used Schedule O to respond to any question in this Part I \ldots .			
	1	Contributions	, gifts, grants, and similar amounts received		1	42,150
	2	Program serv	ice revenue including government fees and contracts		2	0
	3	Membership o	lues and assessments		3	46,056
	4	Investment in			4	12,681
	5a		from sale of assets other than inventory 5a			
e Z	Ь		other basis and sales expenses	0		
Revenue	С		from sale of assets other than inventory (Subtract line 5b from line 5a) $$		5c	0
ď	6	_	undraising events			
	а	Gross income	from gaming (attach Schedule G if greater than \$15,000) . 6a	0		
	b		from fundraising events (not including \$of contributions ng events reported on line 1) (attach Schedule G if the			
		sum of such g	ross income and contributions exceeds \$15,000)	3,099		
	С	Less direct e	xpenses from gaming and fundraising events 6c	0		
	d	Net income oi	r (loss) from gaming and fundraising events (add lines 6a and 6b and subtract li	ıne 6c)	6d	3,099
	7a	Gross sales o	f inventory, less returns and allowances			
	b	Less cost of	goods sold	0		
	С	Gross profit o	r (loss) from sales of inventory (Subtract line 7b from line 7a)		7 c	0
	8	O ther revenue	e (describe in Schedule O)		8	
	9	Total revenue	Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	9	103,986
	10		mılar amounts paıd (lıst ın Schedule O)		10	32,350
	11	Benefits paid	to or for members		11	
	12	Salaries, othe	r compensation, and employee benefits		12	200
5 0 5	13		ees and other payments to independent contractors		13	36,126
Expenses	14		ent, utilities, and maintenance		14	3,682
Ě	15		cations, postage, and shipping		15	157
	16		es (describe in Schedule O)		16	38,534
	17		es. Add lines 10 through 16	<u> ►</u>	17	111,049
<u>ه</u>	18	•	ficit) for the year (Subtract line 17 from line 9)		18	-7,063
etAssets	19		fund balances at beginning of year (from line 27, column (A)) (must agree with			
let.			gure reported on prior year's return)		19	384,752
Z	20	_	s in net assets or fund balances (explain in Schedule O)		20	-20,134
	21	Net assets or	fund balances at end of year Combine lines 18 through 20	· · · · •	21	357,555

	see the instructions for Part II) ion used Schedule O to respond to	o any question in this Pa	rt II		
		(A)	Beginning of year		(B) End of year
22 Cash, savings, and investmen	ts		420,848	22	384,627
23 Land and buildings				23	
24 Other assets (describe in Sch	edule O)			24	
25 Total assets			420,848	25	384,627
26 Total liabilities (describe in Se	chedule O)		36,096	-	27,072
27 Net assets or fund balances (ine 27 of column (B) must agree w	vith line 21)	384,752	27	357,555
Part III Statement of Pro Check if the organizat What is the organization's primary	ion used Schedule O to respond t		· —		Expenses equired for section 501 (3) and 501(c)(4)
Union membership representation					anizations, optional for ers)
Describe the organization's progra measured by expenses In a clear benefited, and other relevant inform	and concise manner, describe the nation for each program title	services provided, the r	number of persons	Oth	
28 Scholarship awards to depender immortalize the memory of lost fire institution of higher education					
(Grants \$)	If this amount includes foreign		,	28a	12,600
29 ORGANIZE, REPRESENT, AND GRIEVANCES	SERVICE LOCAL UNION MEMB	BERS INCLUDING NEGO	OTIATIONS AND		
(Grants \$)	If this amount includes foreign	grants, check here .	▶┌	29a	49,439
30 RAISE AWARENESS BY SPON		S AND EVENTS, PARTIO	CIPATE AND/OR		
DONATE TO COMMUNITY FUND (Grants \$)	If this amount includes foreign	grants, check here .	▶┌	30a	11,857
31 Other program services (descri	be ın Schedule O)		•		11,037
(Grants \$)	If this amount includes foreign	grants, check here .	<u> ▶ ┌ </u>	31a	
32 Total program service expenses	(add lines 28a through 31a) tors, Trustees, and Key Employees			32	73,896
	ion used Schedule O to respond to				
		1 235	1		le > =
(a) Name and title	(b) A verage hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099- MISC) (if not paid, enter -0-)	(d) Health beneficent contributions to employee benefit pand deferred compensation	o olans,	(e) Estimated amoun of other compensation
ROCCO BASILICA	2 00	0	Compensation	1	
President					
TODD JOHNSON Vice President	2 00	0			
KEVIN IANNANTUONO Treasurer	4 00	0			100
ERIC FOSTER Secretary	4 00	0			100
MICHAEL COLEMAN Executive Board	1 00	0			
HARRY REED Executive Board	1 00	0			
MICHAEL LEONARD Executive Board	1 00	0			
		+			

	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part	V		<u>l</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
b	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		
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 🕨 37a			
ь	Did the organization file Form 1120-POL for this year?	37b		No
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? \cdot .	38a		No
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			
b	Gross receipts, included on line 9, for public use of club facilities			
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), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		No
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			-8489
	Located at F 6 Old Black Point Rd Niantic, CT ZIP + 4	<u> </u>	6357	
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	N.
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	165	No No
	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
c	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		No
	If "Yes," enter the name of the foreign country			
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
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		No
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
С	Did the organization receive any payments for indoor tanning services during the year?	44c		No
	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? <i>If "No," provide an</i>			
	explanation in Schedule O	44d		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
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

Form 990-EZ (2014	,						Yes	Page (
46 Did the organiz	zation ongago, directly	or indirectly, in political c	ampaign activities on b	obalf of	or in appacition to		163	140
		complete Schedule C, Pa			· · · · ·	46		
Part VI Section	on 501(c)(3) orga	anizations only				<u> </u>		
All sec		ınızatıons must answer	questions 47-49b an	id 52, a	and complete the	tables	for li	nes 50
		d Schedule O to respond t	o any question in this P	art V I				Г
							Yes	No
47 Did the even			ation EO1(h) alaation in	offo o + o				
	lete Schedule C, Part	ing activities or have a sec II			-	47		
48 Is the organiza	ition a school as desc	ribed in section 170(b)(1)	(A)(II)? If "Yes." comple	te Sch	edule E	48		
_		ers to an exempt non-cha				49a		
						49b		
		n a section 527 organizati						
		ion's five highest compens than \$100,000 of comper						
	e of each employee	(b) A verage hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-	(d) co emplo	Health benefits, ontributions to oyee benefit plans,	(e) Es	tımated r comp	
			MISC)		and deferred compensation			
of compensation	on from the organization	ion's five highest compens on If there is none, enter " ess of each independent c	None "		who each received i	T	an \$10 Compen	
d Total number	of other undersendent		- over #100 000					
		contractors each receiving						
	nızatıon complete Sch	contractors each receiving edule A? NOTE. All Section					┌ Ye	s ┌ No
Did the orga completed S	nization complete Sch chedule A	edule A? NOTE. All Section	n 501(c)(3) organization	ns must	t attach a			
Did the orga completed S Inder penalties of per nowledge and belief,	nization complete Sch chedule A jury, I declare that I hav		n 501(c)(3) organization	ns must	t attach a		est of my	,
Did the orga completed S Under penalties of per cnowledge and belief,	nization complete Sch chedule A jury, I declare that I hav it is true, correct, and c	edule A? NOTE. All Section	n 501(c)(3) organization	ns must	t attach a		est of my	,
Did the orga completed Solution of personal pers	nization complete Sch chedule A jury, I declare that I hav it is true, correct, and c	edule A? NOTE. All Section	n 501(c)(3) organization	ns must	attach a		est of my	,
Did the orga completed Solution of personal design to the complete solution of personal design to the complete solution of the complete solution o	nization complete Sch chedule A jury, I declare that I ha it is true, correct, and c	edule A? NOTE. All Section ve examined this return, inclication of pre	n 501(c)(3) organization	ns must	nd statements, and to all information o		est of my	,
Did the orga completed S Inder penalties of per mowledge and belief, mowledge. Sign Here KEVIN Type of Prince Type of Prince Type of	nization complete Sch chedule A rjury, I declare that I hav it is true, correct, and contact and contact are of officer IANNANTUONO TREASUREI or print name and title int/Type preparer's name	edule A? NOTE. All Section ve examined this return, inclication of pre	uding accompanying scheoarer (other than officer)	edules a is based	nd statements, and to all information o		est of my	,
Did the orga completed S Under penalties of per knowledge and belief, knowledge. Sign Here Paid Paid	nization complete Sch chedule A jury, I declare that I hav it is true, correct, and contact re of officer IANNANTUONO TREASUREI r print name and title nt/Type preparer's name of E WAWRZYNOWICZ CPA	ve examined this return, incl complete. Declaration of prep	uding accompanying scheoarer (other than officer)	edules a	nd statements, and to all information o		est of my	,
Did the orga completed S Under penalties of per thousedge and belief, snowledge. Sign ***** Signation KEVIN Type of KI	nization complete Sch chedule A jury, I declare that I have it is true, correct, and contains the correct of t	ve examined this return, incl complete. Declaration of preparer's signatur	uding accompanying scheoarer (other than officer)	edules a is based	nd statements, and to all information of 2016-01-07 Date Check if self-employed Firm's EIN	f which	est of my	,
Did the organ completed Sunder penalties of per throwledge and belief, throwledge. Sign Here KEVIN Type of KI	nization complete Sch chedule A jury, I declare that I hav it is true, correct, and contact re of officer IANNANTUONO TREASUREI r print name and title nt/Type preparer's name of E WAWRZYNOWICZ CPA	ve examined this return, incl complete. Declaration of preparer's signatur	uding accompanying scheoarer (other than officer)	edules a is based	nd statements, and to all information o	f which	est of my	,

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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.

Political Campaign and Lobbying Activities

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then

	Section 501(c)(4), (5), or (6) org	ganizations Complete Part III					_		
	nme of the organization w London Firefighters 1522 IAFF			Employer	Employer identification number				
				06-6045					
ar	t I-A Complete if the o	rganization is exempt und	er section 501(c)	or is a section	527	orga	anizatio	<u>n.</u>	
1	Provide a description of the o	rganization's direct and indirect pe	olitical campaign activ	rities in Part IV					
2	Political expenditures			▶		\$		2,048	
3	Volunteer hours							0	
Par	TER Complete if the o	rganization is exempt und	er section 501(c)	1(3).					
1		se tax incurred by the organization		/(J):	>	\$			
2	•	se tax incurred by organization ma		4955	.	¢ —			
3	•	section 4955 tax, did it file Form	_			* —	┌ Yes		
- 4a	Was a correction made?		, ,				Yes	, No	
Ь							,	,	
		rganization is exempt und	er section 501(c), except section	50	1(c)(3).		
1	·	pended by the filing organization fo			>	\$	•		
2	Enter the amount of the filing exempt function activities	organization's funds contributed t	o other organizations t	for section 527	-	\$			
3	Total exempt function expend	litures Add lines 1 and 2 Enter h	ere and on Form 1120	-POL, line 17b	-	\$			
4	Did the filing organization file	Form 1120-POL for this year?					┌ Yes	✓ No	
5	organization made payments amount of political contribution	and employer identification numbe For each organization listed, ente ons received that were promptly a a political action committee (PAC	er the amount paid from and directly delivered to	n the filing organization o a separate political	on's 1 orga	unds nızatıc	Also ente on, such a	rthe	
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fr filing organization funds If none, ente 0-	ı's	cont a dire		ered to a olitical If none,	
(1)	New London Firefighters PAC Fund	PO Box 969 New London, CT 06320	06-6045365					675	

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b					
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1					
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000 20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000			00		
	Over \$17,000,000 \$1,000,000					
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	r-0-				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	filed Form 5/68 (election under section 501(h)).		a)		(b)	
For ea activi		gh 11 below, provide in Part IV a detailed description of the lobbying	Yes	No	-	Moun	t
a b c	legislation, including any attempt through the use of Volunteers?	anization attempt to influence foreign, national, state or local to influence public opinion on a legislative matter or referendum, e compensation in expenses reported on lines 1c through 1i)?					
d e f g h i j 2a b c d	Rallies, demonstrations, seminar Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause If "Yes," enter the amount of any If "Yes," enter the amount of any If the filing organization incurred	adcast statements? lobbying purposes? neir staffs, government officials, or a legislative body? s, conventions, speeches, lectures, or any similar means? the organization to be not described in section 501(c)(3)?	501(c)(5),	or se	ectio	
1 2		ore) dues received nondeductible by members? n-house lobbying expenditures of \$2,000 or less?		 	1 2	Yes Yes	No
3 Par	Did the organization agree to car	ry over lobbying and political expenditures from the prior year? ganization is exempt under section 501(c)(4), section 5 ither (a) BOTH Part III-A, lines 1 and 2, are answered "					
1 2 a b	Dues, assessments and similar a	mounts from members obying and political expenditures (do not include amounts of political	2a 2b				
c 3 4	If notices were sent and the amo does the organization agree to ca political expenditure next year?	ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the excess irryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions)	2c 3 4				
	rt IV Supplemental Info						
Pro	vide the descriptions required for	Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou e 1 Also, complete this part for any additional information	ıp lıst),	Part I	I-A,I	ines 1	and
	Return Reference	Explanation					
Pt I-	A Line 1	The Organization collects political contributions via payroll deduction T the separate segregated bank account as required	hese c	leposit	s are	made	ınto

	<u>'</u>	· •	
Part IV	Supplemental Info	ormation (continued)	
Ret	turn Reference	Explanation	

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93492019005146

OMB No 1545-0047

2014

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SCHEDULE O (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 990-EZ or to provide any additional information.

► 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.

Name of the organization New London Firefighters 1522 IAFF Employer identification number

06-6045365

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990EZ, Part I, Line 10	
Form 990EZ, Part I, Line 16	BROKERAGE FEES 3830 CONFERENCES, CONVENTIONS, MEETINGS 5014 DONATIONS 8758 DUES & SUBSC RIPTIONS 928 KITTY 7275 MISCELLANEOUS 1687 OFFICE SUPPLIES 107 POLITICAL 2048 PRESIDE NTS EXPENSE 600 SICK COMMITTEE 1589 WEBSITE 449 BEREAVEMENT 3150 MDA FILL THE BOOT EXPENSES 3099
Form 990EZ, Part I, Line 20	UNREALIZED LOSSES ON INVESTMENTS -20134
Form 990EZ, Part II, Line 26	EDF LOAN PAYABLE 36096 27072