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Department of the Treasury Internal Revenue Service

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 and its instructions is at www.irs gov/form990.

In beginning 01/01/17 and ending 06/30/17

OMB No 1545-0047 2016 Open to Public Inspection

_	<b>3</b> C	heck if applicable	C Name of organization	x year beginning O	cement Uni		· / - /	D Employe	r identification number				
ŀ	=	ddress change	Doing business as	naw Enior	cement oni	ted Inc		27-0	743821				
į	N	lame change		P O box if mail is not delive	red to street address)		Room/suite	E Telephon					
	Ir	nitial return	PO Box 140	097				757-	695-0517				
		inal return/ erminated	City or town state or p	province, country, and ZIP or	foreign postal code			1					
(	_		Chesapeake	<u> </u>	VA 23325			G Gross receipts \$ 845,82					
Į	ᆗ^	mended return	F Name and address of	principal officer									
l	^	Application pending	Wallace	W Chadwick	III		H(a) is this a gi	oup return for s	ubordinates? Yes No				
			1826 Rok	eby Ave			H(b) Are all su	subordinates included? Yes No					
			Chesapea	ke	VA 2	3327	If No	" attach a list	(see instructions)				
	1 7	Tax-exempt status	<b>X</b> 501(c)(3)	501(c) ( )	(insert no )	4947(a)(1) or 527							
	J 1	Website > W	ww.leunite	ed.org			H(c) Group ex	emption numbe	er <b>&gt;</b>				
	K I	Form of organization	X Corporation	Trust Association	Other ▶		L Year of formation 2	2009	M State of legal domicile VA				
	P	arti Su	ımmary										
		1 Briefly de	escribe the organizat	tion's mission or most	significant activit	ies							
	ابه	To r	aise awarene	ess of law en	forcement	officers who h	ave died in	the 1	ine of				
	Ĕ	duty	, and suppor	rt the surviv	ors left b	ehind.							
~	בַּ	_											
20%	Governance	2 Check th	is box ▶ ☐ if the o	organization discontinu	ued its operations	or disposed of more tha	n 25% of its net as	sets					
	Ŏ		_	of the governing body				3	14				
00	Activities &			g members of the gov		t VI. line 1h)		4	0				
<b>e</b>	ite					, line PaECEIVED	1	5	0				
<b>S</b>	<del>;</del>			estimate if necessary)	1	- INC FOLLOCIVILL	1	6	0				
Z	Ř			enue from Part VIII, c	1.	o	250-8	7a	0				
				ole income from Form			P	7b	0				
뷀.	$\dashv$	D Net unie	iated business taxab	ne income nom rom	990-1, line 54 (e	10.00	Prior Ye		Current Year				
SCANNED NOV		8 Contribut	tions and grants (Pa	rt VIII, line 1h)	1	Children U	1 00	5,741	821,098				
	Revenue	9 Program	service revenue (Pa	art VIII, line 2g)	, ,	CARLENC. U		2,213	16,094				
Š	è,	10 Investme	ent income (Part VIII,	, column (A), lines 3,	4, and 7d)			171	541				
1	œ			ımn (A), lines 5, 6d, 8		1e)	-	1,380	5,243				
			·	hrough 11 (must equa		•	1,06	9,505					
•				oaid (Part IX, column				2,000	600,300				
			•	ers (Part IX, column (/				·	0				
	ွ	15 Salaries,	other compensation	n, employee benefits (	Part IX, column (	A), lines 5–10)			0				
	Expenses			(Part IX, column (A),	-				0				
	pe		-	Part IX, column (D), lii		10,899							
	ώ			umn (A), lines 11a-11		•	46	9,111	466,242				
		18 Total exp	enses Add lines 13	–17 (must equal Part	IX, column (A), III	ne 25)		1,111	1,066,542				
				tract line 18 from line		,		8,394	-223,566				
•	៦ខ្ល					······································	Beginning of Cu		End of Year				
	Net Assets or Fund Balances	20 Total ass	sets (Part X, line 16)				69	6,861	472,468				
	d B	21 Total liab	oilities (Part X, line 26	6)				2,165	931				
	훒	22 Net asse	ts or fund balances	Subtract line 21 from	line 20		69	4,696	471,537				
	P	art II Si	gnature Block					<del></del>					
	Un	nder penalties of	perjury, I declare that I	have examined this retu	ırn, including accom	npanying schedules and stat	ements, and to the b	est of my kn	owledge and belief it is				
						Il information of which prepa		ge	_				
•			Bunid						1/03/2011				
	Sig	n 📝 s	ignature of officer					Date	7-01				
	Hei	1 4	Brian Woo	lever		Dire	ector of :	Financ	e				
			ype or print name and title										
		Print/Type	e preparer's name		Preparer's signature		Date	Check	If PTIN				
	Paic	Michae	el D. Gartman		Michael D (	Gartman	10/30	/17 self-em	ployed   P01436068				
	Prep	parer Firm's na	me Fin:	n Gartman I	lart, PLC			Firm's EIN	26-0000062				
	Use	Only	160	4 Hilltop V	Vest Exec	utive Ctr St			<del>_</del>				
		Firm's ad		ginia Beach		451		Phone no	757-425-1532				
	May			preparer shown abo					X Yes No				
	For			e the separate instructi		<del></del>			Form <b>990</b> (2016)				
	DAA								= = = (==)				

Form 990 (2016)	Law Enforcement	ent United Inc	27-0743821	Page <b>2</b>
Part III S	tatement of Progran	n Service Accomplishments		
		ontains a response or note to any	/ line in this Part III	
	ribe the organization's mis		ficers who have died	l in the line of
			of Police Survivors a	
Memoria.		101 00 00001	or round barvivors t	ma officer bown
2 Did the orga	anization undertake any się	gnificant program services during the yea	r which were not listed on the	
prior Form 9	990 or 990-EZ?			Yes X No
	scribe these new services			
services?		g, or make significant changes in how it c	onducts, any program	Yes X No
	scribe these changes on S		nree largest program services, as measure	od by
			the amount of grants and allocations to of	•
		y, for each program service reported	grand and an area area area area.	
4 (0:1:	\ /F	007 557	600 300 - 5	
4a (Code Bicycle	)(Expenses \$ rides from y	987,557 including grants o	f\$ 600,300 ) (Revenuents to Washington DC	
			no have died in the l	
			ce Survivors' Kids Ca	
		and other similar ch		• ,
<u></u>				
4b (Code	) (Expenses \$	including grants of	f\$ ) (Revenue	e \$ )
4c (Code	) (Expenses \$	including grants of	f\$ ) (Revenue	e \$ )
				,
Ad Other sees	am canucas (Dacarha :- f	Cohodulo ()		
(Expenses	am services (Describe in S \$	including grants of \$	) (Revenue \$	•
	ım service expenses ▶	987,557	/ (Nevendo w	

# Part IV Checklist of Required Schedules

	art a choomiet of require constants			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C.			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	•		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes."			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	i	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	İ	1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes" complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1	1	
	If "Yes," complete Schedule G, Part III	19	[	X

Part IV	Checklist	of Required	Schedules	(continued)
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	oncoknot of Required Contamaca)		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			1
	employees? If "Yes," complete Schedule J	_23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		]	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		i	l
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		i	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		L
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		1	1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1	1	i
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	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	Ì	]	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ļ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	<b> </b>	X
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	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		
	conservation contributions? If "Yes," complete Schedule M	_30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		1	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		i	.,
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<del></del>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	,,		v
25-	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			l
20	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			17
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<del> </del>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,  Part VI		}	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		^
JU	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	х	ĺ
		1 20		1

Pa	rt 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			Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 0	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
٥	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  2a  0			
b	Statements, filed for the calendar year ending with or within the year covered by this return  La 0  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<u> </u>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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	ļ	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	1		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<b>_</b> _		x
	and services provided to the payor?	7a 7b	<del> </del> -	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	''		
C	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]	-		
11_	Section 501(c)(12) organizations. Enter	1		
a	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources	1		
b	against amounts due or received from them )		İ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	į	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	į	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	· · · · · · · · ·	
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		$L_{-}$	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>_b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			000	•

Form	990 (2016) Law Enforcement United Inc 27-0743821			age <b>6</b>
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a	"No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O $$ Se	e ınstr	uctioi	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
		<del></del>	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14	_		
	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		ļ	
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 0	_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct		}	ĺ
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X
6	Did the organization have members or stockholders?	6	X	
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	X	L
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	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1 .		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		L
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ĺ
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ĺ
	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			ĺ
	organization's exempt status with respect to such arrangements?	16b		ĺ
Sec	tion C. Disclosure	100	L	
17	List the states with which a copy of this Form 990 is required to be filed ▶ VA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
. •	available for public inspection. Indicate how you made these available. Check all that apply			
	X Own website Another's website X 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 interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	aw Enforcement United, Inc. PO Box 2126			
		7-69	5-0	517
_				

Form 990 (2016) Law Enforcement United Inc

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
  organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
   List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest
  compensated employees, and former such persons

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x unle	Pos check ess pe nd a d	rson	than on is both a or/trustee	en e)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Wallace W Chadw:	ck III									
	0.00			ļ		1 1	ı			
Executive Director	0.00	X	ļ	X				0	0	0
(2) Steven Callow										
	0.00	1								
Asst. Exec. Dir.	0.00	X		X	ŀ	, ,		0	0	0
(3) Brian Woolever		T								
	0.00	1				1		•	p	
Director of Finance	0.00	X		X		1		0	0	0
(4) Allan Iverson										
	0.00	}		}		1				
Dir of Operations	0.00	X		X		1 1		0	0	0
(5) Mark Faust		T								
	0.00	1		1		1 1				
Dir of Outreach	0.00	X		X		1 1		O	0	0
(6) Nicole Chadwick										
•	0.00	1				1 1	l			
Dir of Communication	0.00	X		X		1 1		O	0	0
(7) John Mapes										<u></u>
	0.00					1 1				
VA Rep	0.00	X				1 1		o	0	0
(8) Brian Cilento					_					<u>_</u>
• •	0.00	{				{ {				
PA Rep	0.00	X				1 1		0	0	0
(9) David Heritage										
•	0.00	1				1	- 1			
NJ Rep	0.00	x				1	- }	o	0	0
(10) Scott Humphrey						1-1	_		<del></del>	
	0.00						}			
Ruff Ride Rep	0.00	x						o	0	0
(11) Rich Gallo								<del></del>		<u> </u>
	0.00						Í			
FLETC Rep	0.00	x					Ì	ol	0	0
DAA	<del></del>						_	<u> </u>		5 990 (2016)

Part VII Section A. Officers	, Directors, Tru	Stee	5, N	ey E	mpi	oyee	s, a	nd Highest Compensated	Employees (continuea)				
(A) Name and title	(B) Average hours per week (list any	bo	x, unie	Pos check ess pe	(C) Position eck more than one person is both an a director/trustee)			(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimat amount other compense	of ation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the organization and relations organizations organizations.	tion ted	
(12) Donald Fuller	0.00												
Trustee (13) Sam Frye	0.00	X	-	-	-	-		0	0	ļ			0
Trustee	0.00	x						0	0				0
(14) Tony Pletcher													
Trustee	0.00	x						0	o				0
										!			
										!			
1b Sub-total c Total from continuation shee	ets to Part VII,	Sect	ion A	<b>1</b>	I		<b>&gt; &gt;</b>						
d Total (add lines 1b and 1c)  Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 of				
3 Did the organization list any fo employee on line 1a? If "Yes,"								oyee, or highest compensa	ited		3	Yes	No X
4 For any individual listed on line organization and related organ individual	a 1a, is the sum	of re	port	able	com	pens	atio				4		x
5 Did any person listed on line 1 for services rendered to the or									ındıvıdual		5		x
Section B. Independent Contracto		U.J.	00111	picto		7 <u>0</u> 00		TOT SUCH PERSON					<u></u>
Complete this table for your five compensation from the organization.	zation Report c							dar year ending with or with	in the organization's tax ye	ear			
Name and	(A) business address						-	Descrip	(B) tion of services		Con	(C) npensab	on
		_	_				-						
				_			-						
2 Total number of independent of received more than \$100,000								se listed above) who	0				

Form 990 (2016) Law Enforcement United Inc 27-0743821

Pa	rt V	III Staten	nent of Reve	enue O conta	ains a response	or note to any line	in this Part VIII		
		Oncor	ii concadio			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ह ह	1a	Federated can	npaigns	1a					
	b	Membership d	-	1b	3,600	ol i			
E,S	c	Fundraising ev		1c		1			
الأيج	d	Related organi		1d					
SE SE	e	Government grants (		1e		1			
Ë	f	All other contribution				1			
돌림	_	and similar amounts		111	817,498	3			
ξŎ	g	Noncash contribution	ns included in lines 1a						
등	h	Total. Add line		•	•	821,098			
ē					Busn Code				
ē	2a	Particu	pant Apparel			16,094	16,094		•
Se l	b	7420-04,		-		1			
<u>8</u>	C								
ēr	d								
m S	٩					†			
gra	f	All other progr	am service reve	enue					
Program Service Revenue Contributions, Giffs, Grants	a	Total. Add line			<b>•</b>	16,094		· · · · · · · · · · · · · · · · · · ·	
_	3		come (including	dividend	is, interest,				
		and other simi	-		•	541	541	l	<u> </u>
	4	Income from II	nvestment of tax	x-exemp	t bond proceeds				
	5	Royalties			<u>•</u>				
		_	(ı) Real		(n) Personal				
	6a	Gross rents							
	ь	Less rental exps				]	•		
	С	Rental inc or (loss)				]			•
	_d	Net rental inco	me or (loss)		<u> </u>				
	7a	Gross amount from sales of assets	(i) Securities	5	(II) Other				
		other than inventory	 						
	b	Less cost or other		i					
		basis & sales exps							
	C	Gain or (loss)				_			<u> </u>
		Net gain or (lo		_	<u>&gt;</u>				
<u>a</u>	8a	Gross income fro	om fundraising eve	ents					į.
Other Revenue	[	(not including \$		1					
ě	ļ		eported on line 1c	;)			ł		
P. F		See Part IV, line		a	8,094				
£.	1	Less direct ex	•	bĹ	2,85	={			
_			(loss) from fund		events •	5,243			
	9a		om gaming activition	es					
	}	See Part IV, line		a _		4			,
		Less direct ex		ь[			<b>'</b>	,	
			(loss) from gan		vities •				ļ
	10a		f inventory, less	1					}
		returns and all		a		_{			
	l	Less cost of g		ρĹ	<del></del>	4			}
	<u> </u>		(loss) from sale						
	<del></del>		cellaneous Revenue		Busn Code	-			İ
	11a				<b> </b>	<del> </del>	<del> </del>	<del> </del>	
	b				<u> </u>	<del> </del>	<del></del>	<del> </del>	<b> </b>
	C	A (1) - A (5			<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
	d	All other reven			L	<del> </del>	<del> </del>	<del> </del>	<del> </del>
	e	Total. Add line			<b>.</b>	842,976	16,635	<del></del>	<del> </del>
	12	rotal revenue	. See instructio	113		<u>  072,3/0</u>	1 10,035	<u> </u> 0	<u>}</u> 0

### Law Enforcement United Inc Form 990 (2016)

Statement of Functional Expenses Part IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service expenses (D) Fundraising Do not include amounts reported on lines 6b. Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations 600,300 600,300 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (non-employees) Management b Legal 8,400 8,400 c Accounting Lobbying e Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 2,961 (A) amount, list line 11g expenses on Schedule O) 2,961 5,000 5,000 12 Advertising and promotion 5,255 5,255 13 Office expenses Information technology 14 15 Royalties 16,519 16,519 16 Occupancy 6,919 6,919 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,219 2,219 Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 3,319 3,319 22 Depreciation, depletion, and amortization 875 875 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) 311,064 311,064 Lodging during Ride а 32,918 32,918 Other Ride Expenses b Bank & Credit Card Fees 15,021 15,021 Rider Apparel 11,814 11,814 43,958 28,142 9,917 5,899 e All other expenses 1,066,542 987,557 68,086 Total functional expenses Add lines 1 through 24e 10,899 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)

Part :					
	Check if Schedule O contains a response or note to	any line in this Part X	(A)		(B)
			Beginning of year	1	End of year
1	Cash—non-interest bearing		657,547	1	373,26
2	Savings and temporary cash investments	Ţ.	20,150	2	39,01
3	Pledges and grants receivable, net	ľ		3	
4	Accounts receivable, net	Ţ	<del></del>	4	
5	Loans and other receivables from current and former office	ers directors			
"	trustees, key employees, and highest compensated employees				
Ì	Complete Part II of Schedule L	1	Ì	5	
6	Loans and other receivables from other disqualified perso	ins (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), a	· •		1	
- (	sponsoring organizations of section 501(c)(9) voluntary er	- · · · · · · · · · · · · · · · · · · ·			
,	organizations (see instructions) Complete Part II of Sche			6	
7	Notes and loans receivable, net	5000		7	<del></del>
2 8	Inventories for sale or use	ļ-		8	
9	Prepaid expenses and deferred charges	The state of the s	4,500	9	
	Land, buildings, and equipment cost or	1			
'00	other basis Complete Part VI of Schedule D	10a 32,264			
١,	Less accumulated depreciation	10b 12,957	14,664	10c	19,30
11	Investments—publicly traded securities	1001	2.700.	11	40,88
12	Investments—other securities See Part IV, line 11	ţ		12	10,00
13	Investments—program-related See Part IV, line 11	Ţ		13	<del></del>
14	Intangible assets	ţ		14	
15	Other assets See Part IV, line 11	ļ ,		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		696,861	16	472,46
17	Accounts payable and accrued expenses		2,165	17	93:
18	Grants payable	Ţ		18	
19	Deferred revenue	Ţ		19	
20	Tax-exempt bond liabilities	Ţ		20	
21	Escrow or custodial account liability Complete Part IV of	Schedule D		21	
100	Loans and other payables to current and former officers, of			-	<del></del>
22	trustees, key employees, highest compensated employee	·			
	disqualified persons Complete Part II of Schedule L	.,		22	
23	Secured mortgages and notes payable to unrelated third	parties		23	
24	Unsecured notes and loans payable to unrelated third par			24	<del> </del>
25	Other liabilities (including federal income tax, payables to				<del></del>
	parties, and other liabilities not included on lines 17-24) (	1	į	1	
-	of Schedule D	1		25	
26	Total liabilities. Add lines 17 through 25	<b>T</b>	2,165	26	93:
	Organizations that follow SFAS 117 (ASC 958), check	here ▶ X and			
ß	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets	<u> </u>	694,696	27	471,53
28	Temporarily restricted net assets			28	
29	Permanently restricted net assets	[		29	
2 }	Organizations that do not follow SFAS 117 (ASC 958),	check here ▶ ☐ and			
27 28 29 30 31 32	complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds	ł		30	
31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
32	Retained earnings, endowment, accumulated income, or	other funds		32	
33	Total net assets or fund balances		694,696	33	471,537
34	Total liabilities and net assets/fund balances		696,861	34	472,468

Form	990 (2016) Law Enforcement United Inc 27-0743821				Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				976
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,00	66,	542
3	Revenue less expenses Subtract line 2 from line 1	3	<u> </u>			566
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		69	94,	696
5	Net unrealized gains (losses) on investments	5				407
6	Donated services and use of facilities	6				
7	Investment expenses	7	L			
8	Prior period adjustments	8	<u> </u>			
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	1	1			
	33, column (B))	10		4	71,	<u>537</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	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			- 1		
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ļ	-		(
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain 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		- 1	1		1
	the Single Audit Act and OMB Circular A-133?		<u></u> ;	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		L
			_	Forr	n 990	(2016)

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public

Name of the organization

Law Enforcement United Inc

Employer identification number 27-0743821

Schedule A (Form 990 or 990-EZ) 2016

_ P2	ILL \$	Reas	on for Public Charity	Status (All organizations	must co	ompiete	this part ) See instruction	ns
The	orga	nization is not	a private foundation becaus	e it is (For lines 1 through 12, o	check only	y one box	)	
1		A church, cor	nvention of churches, or ass	ociation of churches described	ın sectior	170(b)(1	I)(A)(ı).	
2		A school des	cribed in section 170(b)(1)(	<b>A)(ii).</b> (Attach Schedule E (Forn	n 990 or 9	90-EZ))		
3		A hospital or	a cooperative hospital service	ce organization described in <b>se</b>	ction 170	(b)(1)(A)(	tit).	
4		A medical res	search organization operated	d in conjunction with a hospital o	described	ın sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,
	_	city, and state	e					
5		An organizati	on operated for the benefit of	of a college or university owned	or operat	ed by a g	overnmental unit described in	
		section 170(	b)(1)(A)(iv). (Complete Part	II)				
6	Ц	A federal, sta	ite, or local government or g	overnmental unit described in s	ection 17	'0(b)(1)(A	.)(v).	
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)						
8		A community	trust described in section 1	1 <b>70(b)(1)(A)(vi)</b> . (Complete Part	t II )			
9		•	_	cribed in section 170(b)(1)(A)(i			•	ge
		or university	or a non-land grant college o	of agriculture (see instructions)	Enter the	name, ci	ty, and state of the college or	
10	X	•	on that normally receives (1	I) more than 33 1/3% of its supp	nort from	contributi	one membership fees and are	nee
10		-	•	ipt functions—subject to certain			· · · · · · · · · · · · · · · · · · ·	555
		•		nd unrelated business taxable in	•	,	•	
		acquired by t	he organization after June 3	0, 1975 See section 509(a)(2)	. (Comple	te Part III	)	
11		An organizati	on organized and operated	exclusively to test for public safe	ety See s	ection 5	09(a)(4).	
12		•	•	exclusively for the benefit of, to	•			
			· · · · · · · · · · · · · · · · · · ·	tations described in section 50 and the section 50 and the secribes the type of support			, , , ,	•
	_		-	erated, supervised, or controlled			·	•
	а	·		ver to regularly appoint or elect	•			ng
		• • •	, , ,	omplete Part IV, Sections A a				
	b	Type II	A supporting organization su	pervised or controlled in connec	ction with	its suppo	rted organization(s), by having	
		control or	management of the suppor	ting organization vested in the s	same pers	ons that	control or manage the support	ed
			ion(s) You must complete	•				
	С			upporting organization operated tructions) You must complete				ıth,
	d			I. A supporting organization ope	-			n(s)
	_		• •	e organization generally must sa			• • •	, ,
		requirem	ent (see instructions) You n	nust complete Part IV, Section	ns A and	D, and P	art V.	
	e			eived a written determination fro			s a Type I, Type II, Type III	
			• •	n-functionally integrated suppor	ting organ	ıızatıon		
	† -	_	nber of supported organizati					L
	<u>g</u>		ollowing information about th		T ( ) ( II			
{1		e of supported	(u) EIN	(III) Type of organization (described on lines 1–10		organization or governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
		•		above (see instructions))		ment?	instructions)	instructions)
				————————————	Yes	No		
(A)						1		
				·	<u> </u>	<del> </del>		<del></del>
(B)					1	}		
(C)			<del> </del>		<del> </del>	<del> </del>	<del></del>	<del> </del>
(0)						Ì		
(D)								
					<b></b>	ļ		
(E)						{		
_								
Tota	1				<u> </u>	<b>.</b>		

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

Law Enforcement United Inc

27-0743821

Page 2

Pa	Support Schedule for O (Complete only if you che	cked the box of	n line 5, 7, or 8	of Part I or if the	ne organizatior	failed to q	A)(vi ualify	i) v under
	Part III If the organization	fails to qualify	under the tests	s listed below,	olease comple	te Part III)		
	tion A. Public Support_	T		<del>,</del>	<del></del>	<del>,</del>		
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	<u>}</u>	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support					<del></del>		
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	;	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on		1					
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc	,				Į	12	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, for	urth, or fifth tax yea	ar as a section 50°	I(c)(3)		
	organization, check this box and stop her							
Sec	tion C. Computation of Public Su	ipport Percent	tage		. <u> </u>			
14	Public support percentage for 2016 (line 6	, column (f) divided	by line 11, colum	n (f))		Ĺ	14	%
15	Public support percentage from 2015 Sch						15	
16a	33 1/3% support test—2016. If the organ				33 1/3% or more, o	check this		_
_	box and stop here. The organization qual		-					▶ [_]
þ	33 1/3% support test—2015. If the organ				5 is 33 1/3% or m	ore, check		. —
47.	this box and stop here. The organization		· · · · · · · · · · · · · · · · · · ·					▶ [_]
17a	10%-facts-and-circumstances test—201							
	10% or more, and if the organization meet							
	Part VI how the organization meets the "fa	icts-and-circumstai	nces" test. The org	janization qualifies	as a publicly sup	ported		. —
<b>L</b>	organization	F 164ba assassas		h 1 10 10				▶ ∐
b	10%-facts-and-circumstances test—201							
	15 is 10% or more, and if the organization				•			
	Explain in Part VI how the organization me supported organization	reis the Tacts-and-	circumstances" te	si ine organizatio	m quaimes as a pi	nolicià		<b>⊾</b> □
18	Private foundation. If the organization did	d not check a boy o	on line 13 165 161	h 17a or 17h oho	ack this boy and as			▶ [
	instructions	a not officer a pox (	iiii 63, 104, 101	υ, ττα, ΟΙ Τ/D, CΠΕ	ON UND DOX AND SE	- C		▶ □

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	<del></del>		<del> </del>	<del></del>	<del></del>	
Caler	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	467,804	611,339	706,979	1,034,092	921 009	2 641 212
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	407,004	611,339	700,919	1,034,092	821,098	3,641,312
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	467,804	611,339	706,979	1,034,092	845,827	3,666,041
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b  Public support. (Subtract line 7c from						
Soc	line 6)	L					3,666,041
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	467,804	611,339	706,979	1,034,092	845,827	3,666,041
10a	Gross income from interest, dividends,	301,003	912,333	7007313	2,034,032	013,021	3,000,041
IVa	payments received on securities loans, rents, royalties and income from similar sources	57	37	20	53	171	338
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	57	37	20	53	171	338
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		13,806				13,806
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)	467,861	625,182	706,999	1,034,145	845,998	3,680,185
14	First five years. If the Form 990 is for the						3,000,103
• •	organization, check this box and stop her	_		, 0 , 00		(0)(0)	▶ □
Sec	tion C. Computation of Public Su	ipport Percent	age				
15	Public support percentage for 2016 (line 8	, column (f) divided	by line 13, colum	n (f))		15	99.62%
16	Public support percentage from 2015 Sch	edule A, Part III, line	e 15			16	%
Sec	tion D. Computation of Investme	ent Income Per	centage				
17	Investment income percentage for 2016 (I	ine 10c, column (f)	divided by line 13.	column (f))		17	%
18	Investment income percentage from 2015		-			18	1 %
19a	33 1/3% support tests—2016. If the orga						, ভি
	17 is not more than 33 1/3%, check this b		=	•	· · · · · ·		► X
b	33 1/3% support tests—2015. If the orga						. 🗀
20	line 18 is not more than 33 1/3%, check the <b>Private foundation</b> . If the organization did		=			-	
20	Filvate foundation. If the organization dis	a not check a box of	n into 14, 198, 0f	i au, check this dox	and see mstruction	ulis	

### Supporting Organizations Part IV

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

_				_	
Se	ction	A. AII	Support	na Orgai	nizations
	~~	, ,, , ,,,	O-PPO-	9 0.94.	

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I. answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes." describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings )

		Yes	No
	1		
	2		_
	3a		
	<u>.</u>		
	3b		ļ
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		 
	6		
	7		) 
	8		
			<del> </del>
	9a		
	9b		
	9с		<u></u>
	10a		! 
	10b		
A (F	orm 99	0 or 990-	EZ) 2016

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Schedu	le A (Form 990 or 990-EZ) 2016 Law Enforcement United Inc	_	27-07438	3 <b>21</b> Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v 20, 1	970 (explain in Part VI) Se	e
	instructions. All other Type III non-functionally integrated supporting organizations mus	t comp	lete Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
			(7) Thorreal	(optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5_	Depreciation and depletion	5		
	Portion of operating expenses paid or incurred for production or			
	lection of gross income or for management, conservation, or			
ma	intenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
ins	tructions for short tax year or assets held for part of year)			
	Average monthly value of securities	1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other			
	factors (explain in detail in Part VI)	L		··
	Acquisition indebtedness applicable to non-exempt-use assets	2		
3_	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	{		
$\overline{}$	e instructions)	4		
5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6_	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount Subtract line 5 from line 4, unless subject to			
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally integrated I	Type III	supporting organization (se	ee

Section D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt purpor			
_ <u>-</u>	Amounts paid to perform activity that directly furthers exempt purposes			
_	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations		
4	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
_ <del></del> _	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organizations	ation is responsive		
0	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6	<del></del>		
10	Line 8 amount divided by Line 9 amount			
10	Line o amount divided by Line o amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	instructions	<u> </u>	<del></del>	
3	Excess distributions carryover, if any, to 2016			
a				
b				
c	From 2013			<del></del>
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)	<del></del>		
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from			
	Section D, line 7 \$		·	
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4	<del>                                     </del>		
5	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions	<u> </u>		
7	Excess distributions carryover to 2017. Add lines 3j and 4c			,
8	Breakdown of line 7		.,	
a				
	Excess from 2013		· · · · · · · · · · · · · · · · · · ·	
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
		<del></del>		<del></del>

Law Enforcement United Inc

27-0743821

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on 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 6 Open to Public

Inspection

Name of the organization

Employer identification number

L	aw Enforcement United Inc		27-0	743821
	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or		
	Complete if the organization answered "Yes" on			
		(a) Donor advised funds	(b	) Funds and other accounts
1	Total number at end of year			<del>·</del>
2	Aggregate value of contributions to (during year)			<del></del>
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			<del></del>
5	Did the organization inform all donors and donor advisors in writing that	ut the assets hold in depart advised		<del></del>
3	funds are the organization's property, subject to the organization's exc			□ Vaa □ Na
	Did the organization inform all grantees, donors, and donor advisors in	<b>G</b>		Yes No
6				
	only for charitable purposes and not for the benefit of the donor or don	or advisor, or for any other purpose		
	conferring impermissible private benefit?	<del></del>		Yes No
Pā	Conservation Easements. Complete if the organization answered "Yes" on	Form 990. Part IV. line 7		
1	Purpose(s) of conservation easements held by the organization (check			
•	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically imp	ortant land	Larga
	Protection of natural habitat	Preservation of a certified historic		
	Preservation of open space	Freservation of a certified historic	c Structure	
2	Complete lines 2a through 2d if the organization held a qualified conse	ariation contribution in the form of a conce	nation	
2	easement on the last day of the tax year	evaluation contribution in the form of a conse		Held at the End of the Tax Year
а	Total number of conservation easements			neid at the End of the Tax Tear
-			2a	
b	Total acreage restricted by conservation easements	luded in (a)	2b	<del></del>
C	Number of conservation easements on a certified historic structure inc	• •	2c	
d	` ' .	706, and not on a		
_	historic structure listed in the National Register	A	2d	
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	tion auring	tne
	tax year >	lanated No.		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mor	litoring, inspection nandling of		
_	violations, and enforcement of the conservation easements it holds?	Constitution and a Constitution		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	or violations, and enforcing conservation e	asements	during the year
_	A	lations and automorphisms		41
7	Amount of expenses incurred in monitoring, inspecting, handling of vio	lations, and enforcing conservation easen	nents durir	ng the year
_	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)(i	)	О., О.,
_	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation easem	•	•	
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	organization's financial statements that d	escribes ti	ne
- D-		Historical Transcript on Other (	Cincile -	<u> </u>
ra	<b>Organizations Maintaining Collections of Art,</b> Complete if the organization answered "Yes" on		Similar /	Assets.
40		<del></del>		
14	If the organization elected, as permitted under SFAS 116 (ASC 958), reverse of art, historical treasures, or other similar assets held for public			leet
	works of art, historical treasures, or other similar assets held for public		erance or	
	public service, provide, in Part XIII, the text of the footnote to its finance			
D	If the organization elected, as permitted under SFAS 116 (ASC 958), t			
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of	
	public service, provide the following amounts relating to these items			•
	(i) Revenue included on Form 990, Part VIII, line 1		<b>•</b>	\$
_	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treasures, or	• • • • • • • • • • • • • • • • • • • •	ovide the	
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items	-	_
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b>	\$
<u>b</u>	Assets included in Form 990, Part X		▶	

Schedule D (Form 990) 2016 Law Enfo				-0743821	Page 2
Part III Organizations Maintaini	ng Collections of	Art, Historical T	reasures, or O	ther Similar Assets	s (continued)
3 Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	is, check any of the fol	lowing that are a si	gnificant use of its	
a Public exhibition	d 🗌	Loan or exchange pro	grams		
<b>b</b> Scholarly research	e 🗍	Other			
c Preservation for future generations					
4 Provide a description of the organization's	collections and explai	n how they further the	organization's exen	npt purpose in Part	
XIII					
5 During the year, did the organization solicit				•	
assets to be sold to raise funds rather than		part of the organization	n's collection?		Yes No
Part IV Escrow and Custodial A	_				
Complete if the organization	on answered "Yes	" on Form 990, Pa	art IV, line 9, or i	reported an amount	on Form
990, Part X, line 21	dian or other internal	ton for contributions			<del></del>
1a Is the organization an agent, trustee, custo included on Form 990, Part X?	odan or other intermed	alary for contributions of	or other assets not		□ v □ v-
b If "Yes," explain the arrangement in Part X	III and complete the fo	llowing toblo			Yes No
b it les, explain the arrangement in Part A	in and complete me it	mowning table		<del></del>	Amount
c Beginning balance				1c	711100111
d Additions during the year				1d	
e Distributions during the year				1e	
f Ending balance				1f	
2a Did the organization include an amount on	Form 990, Part X, line	e 21, for escrow or cus	todial account liabil		Yes No
b If "Yes," explain the arrangement in Part X				•	
Part V Endowment Funds.					
Complete if the organization	on answered "Yes	" on Form 990, Pa	irt IV, line 10		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
<b>b</b> Contributions		<u> </u>			<u> </u>
c Net investment earnings, gains, and			l		
losses					
d Grants or scholarships					<del></del>
e Other expenditures for facilities and				]	
programs		<del> </del>	<del> </del>		<del></del>
f Administrative expenses		<del> </del>	<del> </del>	<del>-  </del>	
g End of year balance		- (luna 4 a - a luna - (a))	<u> </u>		
2 Provide the estimated percentage of the ci a Board designated or guasi-endowment ▶	ment year end balanc %	e (line 1g, column (a))	neid as		
<ul> <li>a Board designated or quasi-endowment ►</li> <li>b Permanent endowment ►</li> </ul>					
c Temporarily restricted endowment	, %				
The percentages on lines 2a, 2b, and 2c si					
3a Are there endowment funds not in the poss		ation that are held and	administered for th	e	
organization by	<b></b>				Yes No
(i) unrelated organizations					3a(ı)
(ii) related organizations					3a(ii)
b If "Yes" on line 3a(ii), are the related organ	izations listed as requ	red on Schedule R?			3b
4 Describe in Part XIII the intended uses of t	he organization's endi	owment funds			
Part VI Land, Buildings, and Eq				_	
Complete if the organization	on answered "Yes	<u>" on Form 990, Pa</u>	rt IV, line 11a S	See Form 990, Part	X, line 10
Description of property	(a) Cost or other		l	(c) Accumulated	(d) Book value
	(investment)	) (oth	er)	depreciation	
1a Land					
b Buildings					<del></del>
c Leasehold improvements	<del></del>	<del></del>		11 004	44 000
d Equipment	<del> </del>	<del></del>		11,294	-11,294
e Other  Total. Add lines 1a through 1e (Column (d) mus	t equal Form 990 Por	t X column (P) line 1		1,663	
Town, Aug mes to unough to (Ochunin (U) MUS	Lequal i Ollii 330, Fal	CA, COMMINICOL INC.	JU J	▶ 1	-12.93 <i>l</i>

Part VII	orm 990) 2016 Law Enforcement Unite Investments—Other Securities.		27-0743821	Page
1 410 711	Complete if the organization answered "Yes" or	n Form 990, Part IV, I	line 11b See Form 990, Part X,	line 12
<del></del>	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year market v	alue
(1) Financial	derivatives			
• •	eld equity interests			
(3) Other	sid equity interests	<del></del>		· <del></del>
(A)				
(B)		<del></del>	<del>- </del>	
(C)		<del> </del>	<del></del>	<del> </del>
(D)				
(E)				
(F)			<del></del>	
(G)			<del>-   </del>	
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12 ) ▶	<u> </u>		
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11c See Form 990, Part X,	line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market v	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		<del></del>		
(7)		<del></del>		
(8)				
(9)	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
Partix	Complete if the organization answered "Yes" or	line 11d See Form 000 Part X	line 15	
	(a) Description	iri omi 330, i aitiv,		(b) Book value
	(a) Description	<del></del>	<del></del>	D) Book Value
(1)				
(2)				
_(3)			<del>-</del>	
_(4)				
(5)				
(6)				<del></del>
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11e or 11f. See Form 990, F	Part X,
	line 25			
1.	(a) Description of liability	(b) Book value		
(1) Federa	Income taxes			
(2)				
(3)				
(4)			_	
(5)			_	
		<del></del>		
(6)		<del></del>		
(7)		+		
(8)	<del></del>	<del></del>		
(9)	(h)	<del> </del>		
LOTAL /Colum	nn (b) must equal Form 990. Part X. col (B) line 25)	i		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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1,066,542

Part XIII Supplemental Information (continued)

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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No 1545-0047 2016

Inspection

Employer identification number

27-0743821

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance Law Enforcement United Inc

Part !

2 X (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance Fund programs Fund programs Fund programs Yes noncash assistance (g) Description of 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 450,300 100,000 50,000 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 52-1354370 501c3 54-2002597 501c3 45-2685219 501c3 (b) EIN the selection criteria used to award the grants or assistance? (1) Concerns of Police Survivors, Inc. 3950 Chain Bridge Rd., Suite 112 VA 22030 MO 65020 (3) The Spirit of Blue Foundation NY 14450 (a) Name and address of organization (2) Officer Down Memorial Page P.O. Box 3199, South Hwy 5 or government 54 Enwright Dr. Camdenton Fairport Fairfax € (5) 9 3 8 6

Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

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Part IV

9

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.

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

| Employer identification number

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Law Enforcement United Inc

27-0743821

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Law Enforcement United Inc.

Law Enforcement United Inc.

Exec. Dir.

Comm. Dir.

Husband/Wife are officers

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

Each year, members pay dues, and then have the privilege to participate in
the Organization's program service bicycle ride to raise awareness of
fallen officers and their families.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

At annual meeting in May of each year, the members elect the officers of each division.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
At annual meeting in May of each year, the members approve of any by-law changes.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The Treasurer reviews the draft Form 990 and clears any issues or questions with the CPA who prepares the return. The 990 is then reviewed and approved by the board.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Officer and board are required to review the conflict of interest policy on

Page 2

Name of the organization

Employer identification number

Law Enforcement United Inc

27-0743821

an annual basis and report any conflicts of interest that exist.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents and audited financial statements are available upon request.