

2008

Open to Public Inspection

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

Department of the Treasury
Internal Revenue Service

A For the 2008 calendar year, or tax year beginning , 2008, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Brevard Intergroup, Inc.		D Employer identification number 59 : 2413928	
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 720 E. New Haven Avenue 3		E Telephone number (321) 724-2247	
		City or town, state or country, and ZIP + 4 Melbourne, FL 32901		F Group Exemption Number ▶	

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).
G Accounting method Cash Accrual
 Other (specify) ▶

I Website: ▶ www.aaspacecoast.org
H Check ▶ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

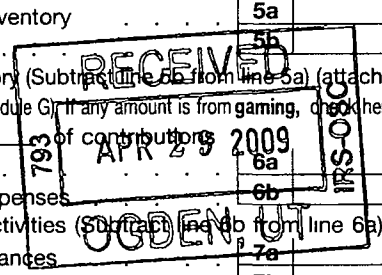
J Organization type (check only one) – 501(c) () ◀ (insert no) 4947(a)(1) or 527

K Check ▶ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **79,934**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21																	
Revenue	1	Contributions, gifts, grants, and similar amounts received															18,901																												
	2	Program service revenue including government fees and contracts																																											
	3	Membership dues and assessments																																											
	4	Investment income															239																												
	5a	Gross amount from sale of assets other than inventory																																											
	5b	Less: cost or other basis and sales expenses																																											
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)																																											
	6	Special events and activities (complete applicable parts of Schedule G. If any amount is from gaming, check here) <input type="checkbox"/>																																											
	6a	Gross revenue (not including \$ of contributions reported on line 1)															17,580																												
	6b	Less: direct expenses other than fundraising expenses															14,292																												
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)															3,288																													
7a	Gross sales of inventory, less returns and allowances															43,107																													
7b	Less: cost of goods sold															31,520																													
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)															11,587																													
8	Other revenue (describe ▶ see statement 1)															107																													
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.															34,122																													
Expenses	10	Grants and similar amounts paid (attach schedule)															269																												
	11	Benefits paid to or for members																																											
	12	Salaries, other compensation, and employee benefits															28,110																												
	13	Professional fees and other payments to independent contractors																																											
	14	Occupancy, rent, utilities, and maintenance															9,528																												
	15	Printing, publications, postage, and shipping															1,491																												
	16	Other expenses (describe ▶ see statement 2)															1,019																												
17	Total expenses. Add lines 10 through 16.															40,417																													
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9).															-6,295																												
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return).															30,327																												
	20	Other changes in net assets or fund balances (attach explanation)																																											
	21	Net assets or fund balances at end of year. Combine lines 18 through 20.															24,032																												



Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	19,228	14,036
23	Land and buildings	5,335	4,160
24	Other assets (describe ▶ see statement 3)	9,724	9,055
25	Total assets	34,286	27,251
26	Total liabilities (describe ▶ see statement 4)	4,223	3,218
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	24,456	24,032

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Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		✓
35b	b If "Yes," has it filed a tax return on Form 990-T for this year?		✓
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
37b	b Did the organization file Form 1120-POL for this year?		✓
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 unpaid at the start of the period covered by this return?		✓
38b	b If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations. Enter.		
39a	a Initiation fees and capital contributions included on line 9		
39b	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 ▶		
40b	b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		✓
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
40d	d Enter amount of tax on line 40c reimbursed by the organization ▶		
40e	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		✓
41	List the states with which a copy of this return is filed. ▶		
42a	The books are in care of ▶ <u>Penny Doyle, Office Manager</u> Telephone no ▶ (<u>321</u>) <u>724-2247</u> Located at ▶ <u>720 E. New Haven Ave, Ste 3, Melbourne, FL</u> ZIP + 4 ▶ <u>32901</u>		
42b	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		✓
42c	c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 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 ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- | | Yes | No |
|------------|-----|----|
| 46 | | ✓ |
| 47 | | ✓ |
| 48 | | ✓ |
| 49a | | ✓ |
| 49b | | |
- 46** 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
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization(s) a section 527 organization?
- 50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$100,000 ▶				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors each receiving over \$100,000 . ▶		

Under penalties of perjury, I declare that I have examined this return, and believe it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has knowledge.

Sign Here

▶ *Phyllis Brannen*
Signature of officer

▶ **Phyllis Brannen, Chairperson**
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶

May the IRS discuss this return with the preparer shown above? S

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

Employer identification number

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(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 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 1-3						
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.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33% support test—2008. If the organization did not check the box on line 13, and line 14 is 33% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33% support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,517	19,604	15,129	19,826	18,977	87,977
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	49,886	44,665	42,492	49,616	43,107	229,766
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 1-5	64,403	64,269	57,621	69,442	62,008	317,743
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						317,743

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	64,403	64,269	57,621	69,442	62,008	317,743
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47	150	298	417	239	1,151
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	47	150	298	417	239	1,151
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	127	143	78	94	107	549
13 Total support. (Add lines 9, 10c, 11, and 12)						319,443

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	99.4678 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99.2594 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	.0036 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	.0023 %

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

see statement 1

Dotted lines for supplemental information.

BREVARD INTERGROUP INC
59-241392
FYE 12/31/2008

Schedule

Form 990-EZ, Part I, Line 6 - Special Events Schedule

	EVENT A	EVENT B	
	NEW YEAR'S DINNER/DANCE	SPACECOAST ROUND UP	TOTAL
Gross Receipts	3,919 00	13,661 00	17,580.00
Less Contributions	0 00	0 00	0.00
Gross Revenue	3,919.00	13,661.00	17,580.00
Less Direct Expenses	4,118 00	10,174 00	14,292.00
Net Income (Loss)	-199 00	3,487 00	3,288.00

BREVARD INTERGROUP INC
59-241392
FYE 12/31/2008

Schedule

Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid Schedule

REFUNDS	CONTRIBUTIONS	
50 00	218 50	
	TOTAL	268 50

12:28 PM

Line 10 990EZ

04/09/09

Accrual Basis

Brevard Intergroup, Inc.
Tax Line By Account
January through December 2008

Type	Date	Num	Name	Memo	Account	Clr	Split	Amount	Balance
6900 - Contributions									
Check	6/28/2008	3856	Rosenfeld	refund of me	6900 Contributions		1055 Riversi	50 00	50 00
Check	7/1/2008	3848	District 12 GSR Co	donation to D	6900 Contributions		1055 Riversi	43 70	93 70
Check	7/1/2008	3849	District 15 GSR Co	donation to D	6900 Contributions		1055 Riversi	43 70	137 40
Check	7/1/2008	3850	District 23 GSR Co	donation to D	6900 Contributions		1055 Riversi	43 70	181 10
Check	7/1/2008	3851	NFACAA	donation to A	6900 Contributions		1055 Riversi	43 70	224 80
Check	7/1/2008	3852	General Service Off	donation to G	6900 Contributions		1055 Riversi	43 70	268 50
Total 6900 Contributions								268 50	268 50
TOTAL								268.50	268.50

Federal Statements

Statement 1 – Form 990-EZ, Part I, Line 8 – Other Revenue

Description	Amount
Other	46
Sales Tax Commission	51
Opening Balance Equity	<u>10</u>
TOTAL	107

Statement 2 – Form 990-EZ, Part I, Line 16 – Other Expenses

Description	Amount
Internet Expenses	632
Insurance	178
License & Taxes	<u>209</u>
TOTAL	1,019

Statement 3 – Form 990-EZ, Part II, Line 24 – Other Assets

Description	Beginning of Year	End of Year
Account Receivable	959	1,153
Inventories for Sale or Use	<u>8,765</u>	<u>7,902</u>
TOTAL	9,724	9,055

Statement 4 – Form 990-EZ, Part II, Line 26 – Other Liabilities

Description	Beginning of Year	End of Year
Accounts Payable and Accrued Expenses	26	490
Copier Lease	3,464	1,865
Payroll Taxes Payable	498	500
Sales Tax Payable	<u>235</u>	<u>363</u>
TOTAL	4,223	3,218

Federal Statements

Statement 5 – Form 990-EZ, Part III – Organization’s Primary Exempt Purpose

The purpose of Brevard Intergroup Inc. is to establish and maintain a central Alcoholics Anonymous (A.A.) service office and telephone answering service to carry the message of AA to those who suffer from alcoholism; to act as a central clearing house for providing information and literature to AA groups and to the community in accordance with the Twelve Traditions of AA and the guidelines issued by the General Service Office; to promote unity through service among member groups and to aid the groups in their common purpose of carrying the message to the alcoholic who still suffers.

Statement 6 – Form 990-EZ, Part III, Line 28 – Statement of Program Service Accomplishments

The accomplishments of Brevard Intergroup Inc. are maintaining a central Alcoholics Anonymous (A.A.) service office and 24-hour telephone hotline service, coordinating county-wide fundraising events, providing information and literature to A.A. groups and to the community, purchasing and selling books, pamphlets and other recovery materials, publishing and distributing a monthly newsletter and directory of meeting places and times for area A.A. groups.

BREVARD INTERGROUP
59-2413928
FYE 12/31/2008

Federal Statements

Statement 8 – Schedule A, Part IV-A, Line 22 – Other Income

<u>Description</u>	<u>Amount</u>
Rebates/Refunds	46
Sales Tax Commission	<u>51</u>
TOTAL	97

BREVARD INTERGROUP INC
59-2413928
FYE 12/31/2008

Federal Statements

Statement 7 - Form 990 EZ, Part IV - Officers, Directors, Trustees and Key Employees

TITLE	NAME	ADDRESS	COMP	BENEFITS	EXPENSES	AVER HRS
CHAIRPERSON	Bill Pepper	2010 Hallwood Place Melbourne, FL 32901	0	0	0	VARIABLE
VICE CHAIRPERSON	Phyllis Brannen	146 San Juan Circle Melbourne, FL 32935	0	0	0	VARIABLE
TREASURER	Joe Warren	2956 Finisterwald Dr Titusville, FL 32780	0	0	0	VARIABLE
SECRETARY	Janis Clark	675 Tobias St , SE Palm Bay, FL 32909	0	0	0	VARIABLE
DIRECTOR - Phone Hotline	Shane Cassis	580 Banana Blvd Merritt Island, FL 32952	0	0	0	VARIABLE
DIRECTOR - Social Events	Leslie Jordan	418 Lincoln Ave Cape Canaveral, FL 32920	0	0	0	VARIABLE
OFFICE MANAGER	Penny Doyle	1262 Highland Ave Melbourne, FL 32935	21,120	0	0	40 WEEKLY
ASST MANAGER	Bob Hume	1775 Old Glory Blvd Melbourne, FL 32940	4,512	0	0	8 WEEKLY
PER DIEM EMPLOYEE	Frank Casey	3490 Chancellorsville Ave Melbourne, FL 32934	512	0	0	VARIABLE

Brevard Intergroup, Inc
 59-2413928
 FYE: 12/31/2008

TAX ASSET DETAIL
 1/01/08 - 12/31/08

Asset	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current=c	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depreciation	Tax Net Book Value	Tax Method	Tax Period
Group Office Equipment										
1	Brothers Pnnter HL1440 2/27/03		249.98	0.00	241.66	8.32	249.98	0.00	S/L	5
2	CopyStar CS3035 Copier 2/03/05		7,201.75	0.00	4,201.02	1,440.35	5,641.37	1,560.38	S/L	5
GRAND TOTAL			7,451.73	0.00	4,442.68	1,448.67	5,891.35	1,560.38		