

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)

OMB No 1545-1150

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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 \$500,000 and total assets less than \$1,250,000 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

A For the 2009 calendar year, or tax year beginning , and ending

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 POLICE ATHLETIC LEAGUE, Inc.		D Employer identification number 59-3238965
		Number and street (or P O box, if mail is not delivered to street address) Room/suite Telephone number 1100 USA BOULEVARD 323-268-8771		
		City or town, state or country, and ZIP + 4 TITUSVILLE FL 32780		F Group Exemption Number
				G Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify)

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

I Website: ▶ www.titusvillepal.org

J Tax-exempt status (check only one) — 501(c)(3) ◀ (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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 151,894

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															58,988													
	2	Program service revenue including government fees and contracts															10,536													
	3	Membership dues and assessments																												
	4	Investment income																												
	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)																												
	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 \$ _____ contributions reported on line 1)																												
	6b	Less: direct expenses other than fundraising expenses																												
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																													
7a	Gross sales of inventory, less returns and allowances																													
7b	Less: cost of goods sold																													
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																													
8	Other revenue (describe ▶ See Statement 1)																													
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																													
Expenses	10	Grants and similar amounts paid (attach schedule)																												
	11	Benefits paid to or for members																												
	12	Salaries, other compensation, and employee benefits																												
	13	Professional fees and other payments to independent contractors																												
	14	Occupancy, rent, utilities, and maintenance																												
	15	Printing, publications, postage, and shipping																												
	16	Other expenses (describe ▶ See Statement 2)																												
17	Total expenses. Add lines 10 through 16																													
Net Assets	18	Excess or deficit for the year (Subtract line 17 from line 9)																												
	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)																												
	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																												

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 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	90,608	8,658
23	Land and buildings		
24	Other assets (describe ▶ See Statement 3)	249,385	238,453
25	Total assets	339,993	247,111
26	Total liabilities (describe ▶ See Statement 4)	250	4
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	339,743	247,107

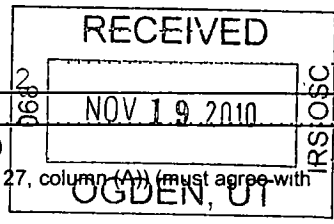
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2009)

SCANNED DEC 16 2010 Revenue

EXPRESS EVALUATION

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others)

What is the organization's primary exempt purpose?

Intervention programs for youth.

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

28 Gibson Gym: Facility dedicated to providing a safe and supervised place for youth ages 10-18 to dance, play sports, games and socialize with law enforcement.

(Grants \$) If this amount includes foreign grants, check here

218,144

29 (Grants \$) If this amount includes foreign grants, check here

29a

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

218,144

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated. (See the instructions for Part IV)

(a) Name and address	(b) Title and average number of hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Cheryl Lawson-Young	Exec Director 20.00	26,096	0	0
Mike Witcher	Officer Manager 20.00	11,869	0	0
Alan Loud	Exec V.P. 20.00	0	0	0
Susan Tindall	Secretary 10.00	0	0	0
Donna Marie Lilley	President 10.00	0	0	0
Major Mel Williams	Treasurer 2.00	0	0	0
Rob Whatley	Vice Pres. 2.00	0	0	0

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EXPRESS EVALUATION

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

		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		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		X
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 why the organization did not report the income on Form 990-T		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
35b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr. <input type="text" value="37a"/>		
37b	b Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
38b	b If "Yes," complete Schedule L, Part II and enter the total amount involved <input type="text" value="38b"/>		
39	Section 501(c)(7) organizations Enter		
39a	a Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
39b	b Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <input type="text" value="40a"/> , section 4912 <input type="text" value="40a"/> , section 4955 <input type="text" value="40a"/>		
40b	b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
40c	c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text" value="40c"/>		
40d	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on the net amount reimbursed by the organization <input type="text" value="40d"/>		
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		X
41	List the states with which a copy of this return is filed <input type="text" value="FL"/>		
42a	The organization's books are in care of <input type="text" value="Ret. Partner PA CPA's"/> Telephone no <input type="text" value="321-267-2190"/> <input type="text" value="1415 S Washington Ave"/> Located at <input type="text" value="Titusville, FL"/> ZIP + 4 <input type="text" value="32780"/>		
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 <input type="text" value=""/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
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. <input type="text" value=""/>		X
43	Section 4947(a)(1) none-exempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> <input type="text" value="43"/>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
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		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- 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?
- 49b If "Yes," was the related organization a section 527 organization?

	Yes	No
46		X
47		X
48		X
49a		X
49b		

50 Complete this table for the organization's 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
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's 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
None		

d Total number of other independent contractors each receiving over \$100,000

Sign Here

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

Signature of officer: *[Signature]*

Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: *[Signature]*

Firm's name (or yours if self-employed), address, and ZIP + 4: Retz Baker, PA, CPA
1415 South Washington
Titusville, FL 327

May the IRS discuss this return with the preparer shown above? See instructions.

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

POLICE ATHLETIC LEAGUE, Inc.

Employer identification number

59-3238965

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: (For lines 1 through 11, check only one box.)

- 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).
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 513 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).
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 supported organization(s)

Table with 2 columns: Yes, No and 3 rows: 11g(i), 11g(ii), 11g(iii)

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (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 US?, (vii) Amount of support. Includes a Total row at the bottom.

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

Schedule A (Form 990 or 990-EZ) 2009

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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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % 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—2009. 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—2008. 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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	86,108	63,631	69,028	81,861	58,988	359,616
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	102,165	74,500	95,116	134,879	92,906	499,566
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	188,273	138,131	164,144	216,740	151,894	859,182
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	97,165	69,500	90,116	129,879		386,660
c Add lines 7a and 7b	97,165	69,500	90,116	129,879		386,660
8 Public support (Subtract line 7c from line 6)						472,522

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	188,273	138,131	164,144	216,740	151,894	859,182
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	568	884	839	238		2,529
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	568	884	839	238		2,529
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				0	0	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)	188,841	139,015	164,983	216,978	151,894	861,711

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 2009 (line 8, column (f) divided by line 13, column (f))	15	54.84%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	42.83%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. 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—2008. 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Express Evaluation

EVALUATION: Compressor Add-on

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **POLICE ATHLETIC LEAGUE, Inc.** Identifying number **59-3238965**

Business or activity to which this form relates
Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	250,000
2	Total cost of section 179 property placed in service (see instructions)	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	800,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	
6	(a) Description of property (b) Cost (business use only) (c) Elected cost	
7	Listed property Enter the amount from line 29	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	
9	Tentative deduction. Enter the smaller of line 5 or line 8	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 9 (see instructions)	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instr.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	
15	Property subject to section 168(f)(1) election	
16	Other depreciation (including ACRS)	13,770

Part III MACRS Depreciation (Do not include listed property) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	703
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	

Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs		S/L	
h	Residential rental property		27.5 yrs	MM	S/L	
i	Nonresidential real property		39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs		S/L	
c	40-year		40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	14,473
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	

For Paperwork Reduction Act Notice, see separate instructions.

EVALUATION: Compressor Add-on

Special Events Schedule

Form **990**

2009

For calendar year 2009, or tax year beginning , and ending

Name

Employer Identification Number

POLICE ATHLETIC LEAGUE, Inc.

59-3238965

	(A)	(B)	(C)	Others	Total
Gross receipts	16,997	14,061	0	0	31,058
Less contributions	0	0	0	0	0
Gross revenue	16,997	14,061	0	0	31,058
Less direct expenses	8,591	9,470	0	0	18,061
Net income (loss)	8,406	4,591	0	0	12,997

Description: (A) Golf Tournament

(B) Policeman's Ball

(C) _____

Others _____

EXPRESS EVALUATION

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
Forfeiture funds	\$ 30,000
Total	\$ 30,000

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

Description	Amount
Resale Shop Supplies	\$ 6,599
Expenses	
Conferences and meetings	20,869
Janitorial maintenance	1,550
Dues	1,523
Insurance	5,150
Bank Service Charges	25
Taxes	508
Program expense	17,483
Sponsorships	4,000
Utilities	14,087
Volunteer recognition	2,138
Facility/Use Rental	1,012
Telephone	2,037
Printing & Reproduction	3
Postage and Delivery	613
Total	\$ 117,680

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

Description	Beginning of Year	End of Year
Prepaid Expenses and Deferred Charges	\$ 1,855	\$ 2,196
Assets	332,413	335,613
Less Accumulated Depreciation	84,883	99,356
	249,385	238,453

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

Description	Beginning of Year	End of Year
Payroll Tax Liabilities	\$ 250	\$ 4
	250	4

59-3238965

Federal Asset Report

FYE: 12/31/2009

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
19	Computer	9/14/01	1,241		X	869	5 HY S/L	1,241	0
20	Bleachers	9/26/01	1,823		X	1,276	5 HY S/L	1,823	0
22	Wall Pads for Gibson Gym	8/14/01	536			536	5 HY S/L	536	0
44	Gillig Bus 1987	4/05/06	6,100			6,100	5 HY 200	4,343	703
			<u>9,700</u>			<u>8,781</u>		<u>7,943</u>	<u>703</u>
Other Depreciation:									
5	Lighting Upgrade	11/19/98	2,366			2,366	5 MO S/L	2,366	0
6	HP Laser Printer	10/05/98	456			456	5 MO S/L	456	0
7	Fax Machine	12/07/98	200			200	5 MO S/L	200	0
10	Bleachers	10/12/99	1,617			1,617	5 MO S/L	1,617	0
12	Gym Floor	2/11/99	7,900			7,900	5 MO S/L	7,900	0
15	Lighting Upgrade	3/12/99	2,000			2,000	5 MO S/L	2,000	0
16	Bus -James LaCoy	1/19/99	3,000			3,000	5 MO S/L	3,000	0
25	Gibson Gym Renovations	2/27/02	150,585			150,585	39 MO S/L	26,385	3,861
27	TV Cabinet	3/24/03	329			329	5 MO S/L	329	0
28	Chairs	4/28/03	1,664			1,664	5 MO S/L	1,664	0
29	Tables	3/24/03	2,132			2,132	5 MO S/L	2,132	0
30	Final Gibson Gym Renovations	5/20/03	114,184			114,184	39 MO S/L	16,347	2,928
31	Computer Counters	4/28/03	111			111	5 MO S/L	111	0
33	Chairs	1/28/04	694			694	5 MO S/L	682	12
34	Television for Summer Camp	6/10/05	95			95	5 MO S/L	68	19
35	Display Case-Gibson Gym	2/17/05	465			465	5 MO S/L	356	93
36	Display Case and Overhead Admin	1/11/05	400			400	5 MO S/L	320	80
37	Konica 7033 Copier	6/01/05	400			400	5 MO S/L	287	80
38	Banners for Gym	9/20/05	300			500	5 MO S/L	325	100
39	AED-Gym	9/22/05	731			1,731	5 MO S/L	1,125	346
40	Backborad Replacement	1/06/05	1,258			1,258	5 MO S/L	1,006	252
41	Outdoor Sign	9/15/06	1,297			1,297	5 MO S/L	605	259
45	Gym Floor Refinishing and Painting	9/01/06	4,850			4,850	5 MO S/L	2,263	970
46	Quickbooks Software	4/20/06	361			361	3 MO S/L	321	40
47	Chairs, Shredder & Fax	9/05/06	352			352	5 MO S/L	164	71
48	Dell Computer	7/18/06	874			874	5 MO S/L	422	175
50	Gym Floor Repair	3/30/07	1,190			1,190	5 MO S/L	417	238
51	Full Size Cargo Container	12/12/07	500			500	5 MO S/L	108	100
52	NFocus Software KidTrax	3/07/07	3,747			3,747	5 MO S/L	1,374	749
53	Science on Patrol Supplies	8/15/07	648			648	5 MO S/L	173	129
54	Science on Patrol Supplies	6/30/07	3,141			3,141	5 MO S/L	942	628
56	Gym Banners	3/7/07	309			309	5 MO S/L	113	62
57	Refrigerator	1/31/07	150			150	5 MO S/L	58	30
58	Resale Shop shelving	5/17/08	8,077			8,077	5 MO S/L	808	1,615
59	AC Unit	1/7/08	380			380	5 MO S/L	44	76
60	Outside Sign	4/30/08	4,750			4,750	7 MO S/L	452	679
61	Scoreboard	2/16/09	3,200			3,200	15 MO S/L	0	178
	Total Other Depreciation		<u>325,913</u>			<u>325,913</u>		<u>76,940</u>	<u>13,770</u>
	Total ACRS and Other Depreciation		<u>325,913</u>			<u>325,913</u>		<u>76,940</u>	<u>13,770</u>
	Grand Totals		<u>335,613</u>			<u>334,694</u>		<u>84,883</u>	<u>14,473</u>
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up Org Expense		0			0		0	0
	Net Grand Totals		<u>335,613</u>			<u>334,694</u>		<u>84,883</u>	<u>14,473</u>

EVALUATION: Compressor Add-on

59-3238965

FL Asset Report

FYE: 12/31/2009

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	FL Prior	FL Current	Federal Current	Difference Fed - FL
Prior MACRS:								
19	Computer	9/14/01	1,241	869	1,241	0	0	0
20	Bleachers	9/26/01	1,823	1,276	1,823	0	0	0
22	Wall Pads for Gibson Gym	8/14/01	536	536	536	0	0	0
			<u>3,600</u>	<u>2,681</u>	<u>3,600</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other Depreciation:								
5	Lighting Upgrade	11/19/98	2,366	2,366	2,366	0	0	0
6	HP Laser Printer	10/05/98	456	456	456	0	0	0
7	Fax Machine	12/07/98	200	200	200	0	0	0
10	Bleachers	10/12/99	1,617	1,617	1,617	0	0	0
12	Gym Floor	2/11/99	7,900	7,900	7,900	0	0	0
15	Lighting Upgrade	3/12/99	2,000	2,000	2,000	0	0	0
16	Bus -James LaCoy	1/19/99	3,000	3,000	3,000	0	0	0
25	Gibson Gym Renovations	2/27/02	150,585	150,585	26,385	3,861	3,861	0
27	TV Cabinet	3/24/03	329	329	329	0	0	0
28	Chairs	4/28/03	1,664	1,664	1,664	0	0	0
29	Tables	3/24/03	2,132	2,132	2,132	0	0	0
30	Final Gibson Gym Renovations	5/20/03	114,184	114,184	18,347	2,928	2,928	0
31	Computer Counters	4/28/03	111	111	111	0	0	0
33	Chairs	1/28/04	694	694	682	12	12	0
34	Television for Summer Camp	6/10/05	95	95	68	19	19	0
35	Display Case-Gibson Gym	2/17/05	465	465	356	93	93	0
36	Display Case and Overhead Admin	1/11/05	400	400	320	80	80	0
37	Konica 7033 Copier	6/01/05	400	400	287	80	80	0
38	Banners for Gym	9/20/05	500	500	325	100	100	0
39	AED-Gym	9/22/05	1,311	1,311	1,125	346	346	0
40	Backbord Replacement	1/06/05	1,258	1,258	1,006	252	252	0
41	Outdoor Sign	9/15/06	1,297	1,297	605	259	259	0
44	Gillig Bus 1987	4/05/06	0	0	0	0	703	703
45	Gym Floor Refinishing and Painting	9/01/06	4,850	4,850	2,263	970	970	0
46	Quickbooks Software	4/20/06	361	361	321	40	40	0
47	Chairs, Shredder & Fax	9/05/06	352	352	164	71	71	0
48	Dell Computer	7/18/06	874	874	422	175	175	0
50	Gym Floor Repair	3/30/07	1,190	1,190	417	238	238	0
51	Full Size Cargo Container	12/12/07	500	500	108	100	100	0
52	NFocus Software KidTrax	3/07/07	3,747	3,747	1,374	749	749	0
53	Science on Patrol Supplies	8/15/07	648	648	173	129	129	0
54	Science on Patrol Supplies	6/30/07	3,141	3,141	942	628	628	0
56	Gym Banners	3/7/07	309	309	113	62	62	0
57	Refrigerator	1/31/07	150	150	58	30	30	0
58	Resale Shop shelving	3/17/08	8,077	8,077	808	1,615	1,615	0
59	AC Unit	3/7/08	380	380	44	76	76	0
60	Outside Sign	4/30/08	4,750	4,750	452	679	679	0
61	Scoreboard	2/16/09	3,200	3,200	0	178	178	0
	Total Other Depreciation		<u>325,913</u>	<u>325,913</u>	<u>76,940</u>	<u>13,770</u>	<u>14,473</u>	<u>703</u>
	Total ACRS and Other Depreciation		<u>325,913</u>	<u>325,913</u>	<u>76,940</u>	<u>13,770</u>	<u>14,473</u>	<u>703</u>
	Grand Totals		<u>329,513</u>	<u>328,594</u>	<u>80,540</u>	<u>13,770</u>	<u>14,473</u>	<u>703</u>
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>329,513</u>	<u>328,594</u>	<u>80,540</u>	<u>13,770</u>	<u>14,473</u>	<u>703</u>

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
5	Lighting Upgrade	11/19/98	0	0	0	0	0 HY	0	0
6	HP Laser Printer	10/05/98	0	0	0	0	0 HY	0	0
7	Fax Machine	12/07/98	0	0	0	0	0 HY	0	0
10	Bleachers	10/12/99	0	0	0	0	0 HY	0	0
12	Gym Floor	2/11/99	0	0	0	0	0 HY	0	0
15	Lighting Upgrade	3/12/99	0	0	0	0	0 HY	0	0
16	Bus -James LaCoy	1/19/99	0	0	0	0	0 HY	0	0
19	Computer	9/14/01	0	0	5	0	0 HY	0	0
20	Bleachers	9/26/01	0	0	0	0	0 HY	0	0
22	Wall Pads for Gibson Gym	8/14/01	0	0	0	0	0 HY	0	0
25	Gibson Gym Renovations	2/27/02	0	0	0	0	0 HY	0	0
27	TV Cabinet	3/24/03	0	0	0	0	0 HY	0	0
28	Chairs	4/28/03	0	0	0	0	0 HY	0	0
29	Tables	3/24/03	0	0	0	0	0 HY	0	0
30	Final Gibson Gym Renovations	5/20/03	0	0	0	0	0 HY	0	0
31	Computer Counters	4/28/03	0	0	0	0	0 HY	0	0
33	Chairs	1/28/04	0	0	0	0	0 HY	0	0
34	Television for Summer Camp	6/10/05	0	0	0	0	0 HY	0	0
35	Display Case-Gibson Gym	2/17/05	0	0	0	0	0 HY	0	0
36	Display Case and Overhead Admin	1/11/05	0	0	0	0	0 HY	0	0
37	Konica 7033 Copier	6/01/05	0	0	0	0	0 HY	0	0
38	Banners for Gym	9/20/05	0	0	0	0	0 HY	0	0
39	AED-Gym	9/22/05	0	0	0	0	0 HY	0	0
40	Backbord Replacement	1/06/05	0	0	0	0	0 HY	0	0
41	Outdoor Sign	9/15/06	0	0	0	0	0 HY	0	0
44	Gillig Bus 1987	4/05/06	0	0	0	0	0 HY	0	0
45	Gym Floor Refinishing and Painting	9/01/06	0	0	15	0	0 HY	0	0
46	Quickbooks Software	4/20/06	0	0	0	0	0 HY	0	0
47	Chairs, Shreder & Fax	9/05/06	0	0	0	0	0 HY	0	0
48	Dell Computer	7/18/06	0	0	0	0	0 HY	0	0
50	Gym Floor Repair	3/30/07	0	0	0	0	0 HY	0	0
51	Full Size Cargo Container	12/12/07	0	0	0	0	0 HY	0	0
52	NFocus Software KidTrax	3/07/07	0	0	0	0	0 HY	0	0
53	Science on Patrol Supplies	8/16/07	0	0	0	0	0 HY	0	0
54	Science on Patrol Supplies	6/30/07	0	0	0	0	0 HY	0	0
56	Gym Banners	3/07/07	0	0	0	0	0 HY	0	0
57	Refrigerator	1/31/07	0	0	0	0	0 HY	0	0
58	Resale Shop shelving	6/1/08	8,077	0	0	8,077	5 MO S/L	808	1,615
59	AC Unit	6/0/08	0	0	0	0	0 HY	0	0
60	Outside Sign	4/30/08	0	0	0	0	0 HY	0	0
61	Scoreboard	2/7/09	3,200	0	0	3,200	15 MO S/L	0	178
Total Other Depreciation			<u>11,277</u>			<u>11,277</u>		<u>808</u>	<u>1,793</u>
Total ACRS and Other Depreciation			<u>11,277</u>			<u>11,277</u>		<u>808</u>	<u>1,793</u>
Grand Totals			11,277			11,277		808	1,793
Less: Disposition and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>11,277</u>			<u>11,277</u>		<u>808</u>	<u>1,793</u>

EXPRESS EVALUATION

EVALUATION: Compressor Add-on

Bonus Depreciation Report

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
19	Computer	9/14/01	1,241		0	0	372	869
20	Bleachers	9/26/01	1,823		0	0	547	1,276
	Form 990, Page 1		<u>3,064</u>		<u>0</u>	<u>0</u>	<u>919</u>	<u>2,145</u>
	Grand Total		<u>3,064</u>		<u>0</u>	<u>0</u>	<u>919</u>	<u>2,145</u>

Express Evaluation

Depreciation Adjustment Report

All Business Activities

AMT
Adjustments/
Preferences

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>
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There are no assets that meet the criteria of this report

Express Evaluation

Federal Statements**Schedule A, Part III, Line 7b - Excess Gross Receipts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$	\$
2008	134,879	129,879
2007	95,116	90,116
2006	74,500	69,500
2005	102,165	97,165
Total	<u>\$ 406,660</u>	<u>\$ 386,660</u>

Express Evaluation

Federal Statements**Special Events Direct Expenses**

<u>Description</u>	<u>Amount</u>
Column A	\$
Policeman's Ball Supplies	9,470
SubTotal	<u>9,470</u>
Column Others	
Golf Tournament Supplies	8,591
SubTotal	<u>8,591</u>
SubTotal (Others)	<u>8,591</u>
Total	<u><u>18,061</u></u>

Direct expenses other than fundraising expenses
reported on Form 990-EZ, page 1, line 6b.

Express Evaluation