

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

**Short Form
Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except 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 \$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

OMB No 1545-1150

2009

Open to Public Inspection

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

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
**BREVARD COUNTY SHERIFF'S OFFICE
 POLICE ATHLETIC LEAGUE INC.**

D Employer identification number
59-3441257

E Telephone number
321-264-7752

F Group Exemption Number ▶ _____

G Accounting method Cash Accrual
 Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **WWW.BCSOPAL.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 ▶ \$ **136,014**

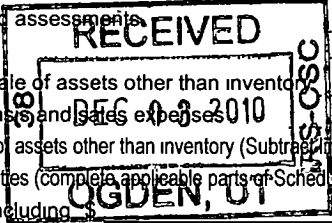
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)		
1	Contributions, gifts, grants, and similar amounts received	105,235
2	Program service revenue including government fees and contracts	2,186
3	Membership dues and assessments	
4	Investment income	1,168
5a	Gross amount from sale of assets other than inventory	24,160
5b	Less: cost or other basis and sales expenses	24,160
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	SEE STMT 1
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)	1,176
6b	Less: direct expenses other than fundraising expenses	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	1,176
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 2)	2,089
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	111,854
10	Grants and similar amounts paid (attach schedule)	
11	Benefits paid to or for members	
12	Salaries, other compensation, and employee benefits	32,500
13	Professional fees and other payments to independent contractors	10,132
14	Occupancy, rent, utilities, and maintenance	42,825
15	Printing, publications, postage, and shipping	
16	Other expenses (describe ▶ SEE STATEMENT 3)	48,818
17	Total expenses. Add lines 10 through 16	134,275
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	-22,421
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)	144,404
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	121,983

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	132,392
23	Land and buildings	67,844
24	Other assets (describe ▶ SEE STATEMENT 4)	39,957
25	Total assets	121,983
26	Total liabilities (describe ▶ _____)	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	121,983

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

Form **990-EZ** (2009)

SCANNED Revenue 7 2010



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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? <u>SEE STATEMENT 5</u>				
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 SEE STATEMENT 6				
(Grants \$ _____)	If this amount includes foreign grants, check here <input type="checkbox"/>	28a	7,627	
29 SEE STATEMENT 7				
(Grants \$ _____)	If this amount includes foreign grants, check here <input type="checkbox"/>	29a	8,298	
30 SEE STATEMENT 8				
(Grants \$ _____)	If this amount includes foreign grants, check here <input type="checkbox"/>	30a	61,409	
31 Other program services (attach schedule)				
(Grants \$ _____)	If this amount includes foreign grants, check here <input type="checkbox"/>	31a		
32 Total program service expenses (add lines 28a through 31a)			32	77,334

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 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	
DAN DOOLEY P. O. BOX 40	SHARPES FL 32959-0040	EXEC DIR 40.00	32,500	0	0
RON CHABOT P. O. BOX 40	SHARPES FL 32959-0040	PRESIDENT 2.00	0	0	0
GLENDA BROWN P. O. BOX 40	SHARPES FL 32959-0040	VICEPRES 2.00	0	0	0
BUZZ PETROS P. O. BOX 40	SHARPES FL 32959-0040	VICEPRES 2.00	0	0	0
LT. PAUL RING P. O. BOX 40	SHARPES FL 32959-0040	SECRETARY 2.00	0	0	0
JEFFREY THOMPSON P. O. BOX 40	SHARPES FL 32959-0040	TREASURER 2.00	0	0	0
CHARLENE NEUTERMAN P. O. BOX 40	SHARPES FL 32959-0040	DIRECTOR 2.00	0	0	0

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		
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
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 ▶ 37a		
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
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) 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
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 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. ▶ NONE		
42a	The organization's books are in care of ▶ BREVARD COUNTY SHERIFF Telephone no ▶ 321-264-7752 POST OFFICE BOX 40 Located at ▶ SHARPES, FL ZIP + 4 ▶ 32959		
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.	Yes	No
			X
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: ▶ _____		X
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		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.

	Yes	No
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		X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If "Yes," was the related organization a section 527 organization?		
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, if any, and believe it is true, correct, and complete. Declaration of preparer (other than officer) if self-employed, or partner, or proprietor, or sole owner of a corporation, or partner in a partnership, or owner of a trust or estate.

[Signature]
 Signature of officer

RONALD CHARBY PRESIDENT
 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
MARY LOUISE E. HOU
1353 N COURTENAY P
MERRITT ISLAND, FL

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization **BREVARD COUNTY SHERIFF'S OFFICE
POLICE ATHLETIC LEAGUE INC.**

Employer identification number
59-3441257

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 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).
- 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)

	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									

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

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.")	15,174	13,381	55,037	75,668	45,612	204,872
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					61,808	61,808
4 Total. Add lines 1 through 3	15,174	13,381	55,037	75,668	107,420	266,680
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)						13,916
6 Public support. Subtract line 5 from line 4						252,764

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	15,174	13,381	55,037	75,668	107,420	266,680
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,667	3,646	3,057	3,021	1,168	13,559
9 Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					3,385	3,385
11 Total support. Add lines 7 through 10						283,624
12 Gross receipts from related activities, etc. (see instructions)					12	54,642
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	89.12 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	87.00 %
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 checked="" 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.")						
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						
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						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

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						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

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	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

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.

Form **4562**

Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment Sequence No **67**

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

Name(s) shown on return BREVARD COUNTY SHERIFF'S OFFICE POLICE ATHLETIC LEAGUE INC.	Identifying number 59-3441257
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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	1	250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	

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)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	2,824

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	17	0
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	<input type="checkbox"/>	

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	
			27.5 yrs.	MM	S/L	
i Nonresidential real property	12/23/09	40,000	39 yrs.	MM	S/L	43
				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	21	
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	22	2,867
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2009)

59-3441257

Federal Statements

FYE: 12/31/2009

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -
Securities**

Description		Date	Date	Sale	Cost &	Depreciation	Gain /
How	Whom	Acquired	Sold	Price	Expense		Loss
Received	Sold						
1980 FORD PINTO 0X10A167729 DONATION		1/10/09	1/17/09	\$ 500	\$ 500	\$	\$
1988 PONRTIAC BONNEVILLE 1G2HX54C4JW DONATION		1/10/09	1/17/09	200	200		
1990 CHEVY CAVALIER 1G1JC14G9L718095 DONATION		1/10/09	1/17/09	175	175		
1994 LEXUS ES300 JT8GK13T4R0032806 DONATION		1/10/09	1/17/09	1,100	1,100		
1995 BUICK RIVERIA 1G4GD221254729967 DONATION		1/10/09	1/17/09	275	275		
1995 MERCURY SABLE STATION WAGON 1ME DONATION		1/10/09	1/17/09	600	600		
1996 BUICK STATION WAGON 1G4BR82P6TR DONATION		1/10/09	1/17/09	350	350		
1996 FORD RANGER 1FTCR10X5TPB61543 DONATION		1/10/09	1/17/09	1,200	1,200		
1998 CHEVY CAVALIER 1G1JC5244W733097 DONATION		1/10/09	1/17/09	600	600		
1998 DODGE VAN CARAVAN 2B4FP25BOWR66 DONATION		1/10/09	1/17/09	1,050	1,050		
1998 FORD TARUS 1FAFP52U9WA206316 DONATION		1/10/09	1/17/09	1,100	1,100		
2001 CHEVY MALIBU 1G1NE52J616189321 DONATION		1/10/09	1/17/09	2,050	2,050		
1988 HONDA CIVIC 2HGED7365MH541325 DONATION		2/14/09	2/21/09	1,100	1,100		
1996 CHRYSLER-DODGE INTREPID 2C3HH56 DONATION		2/14/09	2/21/09	650	650		
1996 MERCURY SABLE STATION WAGON 1ME DONATION		2/14/09	2/21/09	1,700	1,700		
1994 FORD EXPLORER 1FMDU34X5RUD48702 DONATION		3/14/09	3/21/09	1,800	1,800		
1995 DODGE CARAVAN 2B4GH2533SR208675 DONATION		3/14/09	3/21/09	125	125		

Federal Statements

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -
 Securities (continued)**

Description							
<u>How Received</u>	<u>Whom Sold</u>	<u>Date Acquired</u>	<u>Date Sold</u>	<u>Sale Price</u>	<u>Cost & Expense</u>	<u>Depreciation</u>	<u>Gain / Loss</u>
1997 CHEVY S-10 TRUCK 1GCCS14X6V8149 DONATION		3/14/09	3/21/09	\$ 1,400	\$ 1,400	\$	\$
1998 VOLKWAGON PASSAT WVWMA63B1WE342 DONATION		3/14/09	3/21/09	3,000	3,000		
1991 HONDO CIVIC JHMED6343JS005631 DONATION		5/09/09	5/16/09	1,100	1,100		
1993 OLDS CUTLASS CIERA 1G3AG54N3P63 DONATION		5/09/09	5/16/09	150	150		
1996 CHEVY LUMINA 2G1WL52M2T9208656 DONATION		5/09/09	5/16/09	300	300		
14' JON ALUMINUM BOAT FLZN0633D170 DONATION		6/09/09	6/16/09	110	110		
1978 LINCOLN CONTINENTAL 8Y82S927663 DONATION		6/30/09	7/07/09	250	250		
1990 CHEVY CELEBRITY WAGON 2G1AW84TO DONATION		6/30/09	7/07/09	325	325		
1995 FORD RANGER 1FTCR10A5SSUC00966 DONATION		6/30/09	7/07/09	600	600		
1992 CHEVY S-10 TRUCK 1GCCS14R6N8156 DONATION		7/07/09	7/14/09	600	600		
1994 FORD EXPLORER 1FMCU22X1RUC34348 DONATION		7/28/09	8/04/09	375	375		
1996 POLARIS SLT 700 PLE25599B696 DONATION		8/04/09	8/11/09	350	350		
1987 HONDA 750 FOUR MOTORCYCLE CB750 DONATION		8/25/09	9/01/09	275	275		
1993 FORD RANGER 1FTCR10U3PTA32817 DONATION		9/08/09	9/15/09	350	350		
1994 BUICK LASABRE 1G4HR52L2RH453768 DONATION		9/08/09	9/15/09	150	150		
1996 CHEVY CAVALIER 1G1JF5242T718342 DONATION		9/08/09	9/15/09	250	250		

Federal Statements

**Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -
Securities (continued)**

How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
TOTAL				\$ 24,160	\$ 24,160	\$ 0	\$ 0

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Federal Statements

FYE: 12/31/2009

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

<u>Description</u>	<u>Amount</u>
SALES OF MERCHANDISE	\$ 2,089
TOTAL	\$ <u>2,089</u>

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
KARATS FOR KIDS EVENT RECEPTION/MEETING	\$ 4,193
BASKETBALL TOURNAMENT TOURNMNT REFS & TROPHIES	3,112
EXPENSES	
OFFICE SUPPLIES AND BANK CHRG	1,387
POSTAGE AND PRINTING	302
DUES AND SUBSCRIPTIONS	551
LICENSES	135
TELEPHONE	614
INTERNET SERVICE	660
MEALS	17
TRAINING	4,610
LIABILITY INSURANCE	2,639
PARTICIPANT INJURY	31
CAMP CHANCE SUPPLIES	6,960
CAMP CHANCE FIELD TRIPS	1,409
CAMP CHANCE REPAIRS	869
CAMP CHANCE MEALS	3,144
CAMP CHANCE PROG OTHER	4,963
TEEN CENTER PROGRAM OTHER	1,562
WINTER BREAK CAMP	946
ATHLETIC PROGRAM SHIRTS	242
ATHLETIC PROGRAM SUPPLIES	492
ATHLETIC CAMP OTHER	140
ATHLETIC CAMP @ MICCO	363
COMMUNITY PROG SHOP W/DEP	3,800
EXPLORER PROGRAM UNIFORMS	2,037
EXPLORER ACADEMY	200
EXPLORER PROG OTHER	315
ADMINISTRATIVE OTHER	72
SURF CAMP FEES	1,000
GOLF TOURNAMENT EXP	890
FUNDRAISING OTHER	818
STATE PAL EVENTS	345
TOTAL	\$ <u>48,818</u>

Federal Statements**Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
SPORTS EQUIPMENT	\$ 8,233	\$ 20,709
LESS ACCUMULATED DEPRECIATION	4,610	7,255
COMPUTER	1,249	1,249
LESS ACCUMULATED DEPRECIATION	342	521
DONATED VEHICLES HELD FOR SALE	7,482	
	<u>12,012</u>	<u>14,182</u>

Federal Statements**Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose**Description

TO MAKE ATHLETIC AND EDUCATIONAL ACTIVITIES AVAILABLE TO CHILDREN BETWEEN THE AGES OF 8 AND 21.

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

PAL OFFERS A VARIETY OF ATHLETIC PROGRAMS INCLUDING BASKET BALL AND TRACK. PAL GROUPS INDIVIDUAL YOUTHS WHO POSSESS A CERTAIN LEVEL OF SKILL AND PLACES THEM ON TEAMS WITH YOUTH OF EQUAL SKILL WHEN POSSIBLE. WE STRESS THE BASICS OF EACH GAME AND BUILDING CONFIDENCE IN YOUTH RATHER THAN IN WINS OR LOSSES.

Statement 7 - Form 990-EZ, Part III, Line 29 - Statement of Program Service AccomplishmentsDescription

PAL PERFORMS A NUMBER OF COMMUNITY SERVICE ACTIVITIES FOR LOCAL YOUTH INCLUDING PARADES AND OTHER HOLIDAY EVENTS. THE LAW ENFORCEMENT EXPLORER PROGRAM PROVIDES YOUTH THE OPPORTUNITY TO VIEW LAW ENFORCEMENT AS A POSSIBLE CAREER. THEY RECEIVE BASIC LAW ENFORCEMENT TRAINING, PARTICIPATE IN A VARIETY OF COMMUNITY SERVICE PROJECTS, AND ARE ACTIVE IN LAW ENFORCEMENT OPERATIONS.

Statement 8 - Form 990-EZ, Part III, Line 30 - Statement of Program Service AccomplishmentsDescription

CAMP CHANCE IS DESIGNED TO TEACH RESPECT, TEAM BUILDING, I INCREASE SELF ESTEEM, PROMOTE DRUG AND ALCOHOL FREE LIVING AND MOST IMPORTANTLY SHOW THEM THERE ARE PEOPLE WHO CARE AND PLACES TO TURN WHEN LIFE IS NOT QUITE WHAT IT SHOULD BE.