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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), \$27, or 4947(a)(1) of the Internal Revenue Code (except black

lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2011

Open to Public Inspection

A	For t	he 2011	calendar year, or tax year beginning	OCT 01				SEP 3	
В	Check of application		C Name of organization CLARENDON FIRE	ASSOCIA	NOITA	IN D Em	ployer ic	dentification	number
П		change	Doing Business As				03-	600908	3
	Name c	hange	Number and street (or P O box if mail is not delivered to street addres	is)	Room/Suite	E Tel	lephone n	umber	
П	Initial re	tum	PO BOX 168				802	-773-2	425
П	Termina	ited	City or town, state or country, and ZIP + 4			G Gro		\$	91359.
Н	Amende	ed return	NORTH CLARENDON VT 05759				•	group return	
Н	Applicat	ion		JAKUBOW	ISKT	— ····"	for affilia		Yes 🗓 No
Ш	pending	!	PO BOX 168 NORTH CLAREN			НЬ		lates included?	
_	Tav-av	empt sta	<u> </u>	4947(a)(1)	· 1		If "No", atta	ach a list	☐ Yes ☐ No
_		•	103 301(c)(3) 23 301(c)(2) (ilisett 110)	4947(a)(1) (Or 32		(see instru	· ·	∐ Yes ∐ No
	Websi		W					mption number	▶
		organization			L Year	of formation	1963	M State of leg	al domicile VT
	art I		nmary	_					
	1		lescribe the organization's mission or most significant acti		TIT DI	DECOL	<u> </u>	DOUTET	NO DIDE
ė			INANCE TRAINING AND EQUIPMEN						NG FIRE
Activities & Governance			ECTION TO THE TOWN OF CLAREN	DON RES	P DENT	S AND	THE	SURROU	NDING
Ē		AREA							
Š	2	Check t	his box ▶ ∐if the organization discontinued its operation	ons or dispose	ed of more	than 25% o	of its net a	essets	
<u>ن</u>	3	Number	of voting members of the governing body (Part VI, line 1	a)				3	17
Š	4	Number	of independent voting members of the governing body (F	Part VI, line 1b	o) .			4	17
ij	5	Total nu	ımber of ındıvıduals employed ın calendar year 2011 (Part	t V, line 2a)				5	
듅	6	Total nu	imber of volunteers (estimate if necessary)		_			6	30
∢	7a	Total ur	related business revenue from Part VIII, column (C), line	12 .				7a	
			elated business taxable income from Form 990-T, line 34					7b	
			, , , , , , , , , , , , , , , , , , , ,			Pric	or Year	Cı	ırrent Year
•	8	Contribi	utions and grants (Part VIII, line 1h)				10551		78541.
Revenue	9		n service revenue (Part VIII, line 2g)		•	- 			, 00111
Ş.	10	•	ent income (Part VIII, column (A), lines 3, 4, and 7d)				61	7	697.
8	1						758	I	7311.
	11		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and	•	۵۱		$\frac{730}{11371}$		86549.
	12		venue - add lines 8 through 11 (must equal Part VIII, colui	mn (A), line 12	2) .		113/1	0.	00349.
	13		and similar amounts paid (Part IX, column (A), lines 1-3)	• •					
	14		s paid to or for members (Part IX, column (A), line 4)						
es	15		, other compensation, employee benefits (Part IX, column		10) .				
ens			onal fundraising fees (Part IX, column (A), line 11e)			FE		months of the same	
Expenses	b	Total fu	ndraising expenses, (Part IX, column (D), line 25)▶						CHARACT.
ш	17	Other e	xpenses (Part IX, column (A), lines 11a-11d, 11f-24e) .	DEVENT	(C.D	7	7518		93297.
	18	Total ex	penses Add lines 13-17 (must equal Part IX, column (A),	JUPE 52)CIA	<u> </u>	<u> </u>	7518	I	93297.
	19	Revenu	e less expenses Subtract line 18 from line 12 [].			3	3853	2.	-6748.
, e	3		84 F	FEB 11;	2013	Beginnin	g of Curi ear	rent Er	nd of Year
ets (20	Total as	sets (Part X, line 16)		[6	2	28215	0.	260489.
Ass	21	Total lia	bilities (Part X, line 26)	\	_	=	386	0.	
Net Assets or Fund Balances	22	Net ass	ets or fund balances Subtract line 21 from line 20	GDEN,	ַ װַ		27829	0.	260489.
	art II	Sig	nature Block					•	
Und	ler penal	ties of penu	ry, I declare that I have examined this return, including accompanying sched	fules and statemen	nts, and to the	best of my kno	wledge		
and	belief, it	is true, con	ect, and complete Declaration of preparer (other thap officer) is based on al	ll information of wh	nich preparer h	as any knowle	edge		
_	-		of les Vin 1 X HIV				<u> </u>		
Si	an	7	Signature of officer				Date	e ,	
	ere		STEPHEN HILL	PRF	ESIDEN	Т	240	2/3	5/13
			Type or print name and title	2112					<i>,</i> , , ,
- Po		Per			Data		Chook	le D	rini .
Pa			t /Type preparer's name Préparer's s REN W ABARE		ρ Date	7/10	Check		rin 0033699
	eparer			W WWW	<u>41/1</u>	1/12		` 	
US	e Only	<u> </u>	n's name ► 4 SEASONS ACCOUNTING				m's EIN▶	03-03	22103
		Fim	n's address ▶ 25 CURTIS AVENUE			I .	one no	E 2140	
_			RUTLAND VT 05701-	_		l g	02-11	5-3140	
Ma	y the I	RS discu	iss this return with the preparer shown above? (See instru	ctions)				X	Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

Form	1990 (2011) CLARENDON FIRE ASSOCIATION IN	03-6009083 Page 2
Pai	t III Statement of Program Service Accomplishments	
1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission TO PROVIDE FIRE PROTECTION TO THE TOWN OF CLARENDON SURROUNDING AREAS	RESIDENTS AND THE
	DOTTION TITLE	
2	Did the organization undertake any significant program services during the year which were not listed of the prior Form 990 or 990-EZ?	Yes 🛚 No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sei	rvices? . Tyes X No
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the an allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 1889. including grants of \$) (Revenue \$
	TO PROVIDE TRAINING AND EQUIPMENT FOR THE PURPOSE OF PROTECTION TO TO THE TOWN OF CLARENDON RESIDENTS AN AREA	
4b	(Code) (Expenses \$ 4344. including grants of \$	
	TO PROVIDE THE CLARENDON FIRE DEPARTMENT MEMBERS WI PROTECTION WHILE FIGHTING FIRES IN THE TOWN OF CLAR SURROUNDING AREA	
4c	(Code) (Expenses \$ including grants of \$	_) (Revenue \$
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$)(Revenue \$,
4e	Total program service expenses ► 6233.	
		Form 990 (2011)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in	Ť		
~	effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	<u> </u>		
5	or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			<u> </u>
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	·	6		Х
-	Schedule D, Part I			- ^
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			ĺ
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	١ ,		Х
	complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	1		X
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	west Parities	A
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		d-å	
	VII, VIII, IX, or X as applicable	\$7° (1.50)	Sec. But the	- 14 A
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		X	1
	Schedule D, Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		^
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more		}	X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		i	X
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		X
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		^_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		X
	Schedule D, Parts XI, XII, and XIII	12a	-	^
b	Was the organization included in consolidated, independent audited financial statement for the tax year? If "Yes," and if	40.		X
4.0	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{\Lambda}{X}$
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	fundraising, business, investment, and program service activities outside the United States, or aggregate	4.41-		X
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		X
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II and IV	15	ļ	_^_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		X
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III and IV	16	 	$\vdash $
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		X
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	_	<u>├</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		 ^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		Х
20-	If "Yes," complete Schedule G, Part III	19 20a		$\frac{\Lambda}{X}$
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	 	 ^
b	ii Tes to line zoa, uiu tile organization attacii a copy of its addited ilitatical statements to tilis feturi?	1200	1	<u> </u>

Form 990 (2011) CLARENDON FIRE ASSOCIATION IN
Part IV Checklist of Required Schedules (continued)

	•		_Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1º If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"			
	complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. 25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	. 25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	. 26		Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes", complete Schedule L, Part III	. 27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		·	
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	. 30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Χ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning			
	of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Χ
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Χ	
			<u>990</u>	(2011)

03-6009083 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable Χ gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, Χ a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If "Yes," enter the name of the foreign country See the instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **5a b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6h Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? ... 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans| 13c c Enter the amount of reserves on hand 14a 14a Did the organization receive any payments for indoor tanning services during the tax year?...

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

CLARENDON FIRE ASSOCIATION IN 03-6009083 Form 990 (2011) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 17 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 17 **b** Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct Χ supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ... X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Χ 7a X 7b b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8Ь b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Nο Yes Χ 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Χ 12a Did the organization have a written conflict of interest policy? If "No", go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy?. 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ 15a The organization's CEO, Executive Director, or top management official. X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Form **990** (2011)

NORTH CLAR VT 05759 802-775-5852

Own website Another's website Upon request

organization ►STEVE HILL

policy, and financial statements available to the public during the tax year

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest

39 GRANGE

State the name, physical address, and telephone number of the person who possesses the books and records of the

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

(C) Position (do not check more than one (A) (B) box, unless person is both an (D) (E) (F) Name and Title Average officer and a director/trustee) Reportable Reportable **Estimated** Individual or director Officer compensation compensation amount of hours per Highest compensated employee Former Key employee Institutional trustee week from from related other the organizations compensation (describe hours for organization (W-2/1099-MISC) trustee from the related (W-2/1099-MISC) organization organizations in and related Sch O organizations (1)STEVE HILL PRESIDENT 5 Χ 0 0 0 (2) JAMES TODD 5 V PRES X X 0 0 0 (3) DAVE HOGANAUER 5 SECRETARY Χ 0 0 0 (4)M JAKUBOWSKI TREASURER 5 Χ 0 0 0 X (5)NORM FLANDERS 5 CHIEF 0 0 0 (6)ROY BIXBY 5 1ST CAPT X 0 0 0 (7)BRIAN MORGAN ASST CHIEF 5 0 0 0 (8)R FLANDERS 5 0 0 0 $\overline{1}$ ST LT (9)S FLANDERS TRUSTEE 5 Χ 0 0 0 (10)C SHATTUCK 5 0 0 TRUSTEE X 0 (11)RICH TODD 5 0 TRUSTEE Χ 0 0 (12)(13)

(14)

Part VII Section A. Officers, Directors	, Trustees	, Key	Empl			and Hi	ghe	st Compensated E	nployees (continued)
(A) Name and title	box, unless person is both an			(F) Estimated						
	hours per week (describe hours for related organiza- tions in Sch O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15)		-	<u> </u>							Organizations
(16)						<u> </u>				
(17)		<u> </u>	_				_			
(18)										
(40)							_			
(19)				ļ						
(20)									,	
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total						<u></u>	•	0	0	0
c Total from continuation sheets to Part	VII, Sectio		•	••	•	••	>	0	0	0
d Total (add lines 1b and 1c) Total number of individuals (including but	not limited	to tho	se liste	ed a	bove	e) who	rec	0 eived more than \$10	0.000 of reportable of	compensation
from the organization								· 	· •	
 Did the organization list any former officer employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the sthe organization and related organizations 	schedule J sum of repo	for suc ortable	ch indi	vidu oens	al atıo	n and	 othe	 er compensation from		Yes No
ındıvıdual	-									4 X
5 Did any person listed on line 1a receive or services rendered to the organization? If "									vidual for	5 X
Section B. Independent Contractors										
 Complete this table for your five highest or compensation from the organization. Report 										vear
(A)						, ,		(B)		(C)
Name and busines	ss address							Description of	services	Compensation
2 Total number of independent contractors ((includina b	out not	lımıte	d to	thos	se liste	d at	pove) who received i	more than	
\$100,000 in compensation from the organ	_							,		F 000 :55
BCA			ι	JS990	\$\$8					Form 990 (2011

Form 990 (2011) CLARENDON FIRE ASSOCIATION IN

Form **990** (2011)

03-6009083

Page 9

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C) and (D)

	Check if Schedule O contains a response to				
Do r	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	Bb, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and org	•			
	anizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22 .				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				-
•	section 401(k) and 403(b) employer contributions) .				
9	Other employee benefits				_
10	Payroll taxes				•
11	Fees for services (non-employees)			· - · · · · ·	
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 1	7			
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	438.		438.	
14	Information technology				
15	Royalties				
16	Occupancy	6873.		6873.	
17	Travel				<u>.</u> .
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	38806.		38806.	
23	Insurance	12427.		12427.	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	FIRE GEAR	4344.	4344.		
b	EQUIP REP & EXPENSE	26929.		26929.	
c	COMMUNICATIONS & TRA	1889.	1889.		
d	MISCELLANEOUS EXPENS	1591.		1591.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	93297.	6233.	87064.	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
_	Check here if following SOP 98-2 (ASC 958-720)				
					F 000 (0044)

Pai	rt X	Balance Sheet					
					(A)		(B)
	,				Beginning of year		End of year
	1	Cash - non-interest-bearing			42608.	1	34110.
	2	Savings and temporary cash investments .		[124007.	2	137764.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, di	rectors	, trustees, key			
		employees, and highest compensated employee	s Cor	mplete Part II of Sch L		5	
	6	Receivables from other disqualified persons (as defined under sidescribed in section 4958(c)(3)(B) and contributing employers a of section 501(c)(9) voluntary employees' beneficiary organization.	nd spons	soring organizations		6	
इ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		[8	
ĕ	9	Prepaid expenses and deferred charges		[9	
	10a	Land, buildings, and equipment cost or other		1			· .
		basis Complete Part VI of Schedule D	10a	724246.			
	ь	Less accumulated depreciation	10b	635631.	115535.	10c	88615.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities See Part IV, line	11			12	
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			-	15	
	16	Total assets Add lines 1 through 15 (must equa	al line	34)	282150.	16	260489.
	17	Accounts payable and accrued expenses .			3860.	17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		h h			
ij		employees, highest compensated employees, a	-				
Ë		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ted the	rd parties		23	
	24	Unsecured notes and loans payable to unrelated		· -		24	
	25	Other liabilities (including federal income tax, pa		· F			
		parties, and other liabilities not included on lines	•				
		of Schedule D				25	
	26	Total liabilities Add lines 17 through 25			3860.	26	
		Organizations that follow SFAS 117, check h	ere▶	and			
ς.		complete lines 27 through 29, and lines 33 ar		_			
ည	27	Unrestricted net assets				27	
Net Assets or Fund Balances	28	Temporarily restricted net assets				28	
Õ	29	Permanently restricted net assets				29	
Š		Organizations that do not follow SFAS 117, o	· :heck l	here ▶ 🏻			
F		and complete lines 30 through 34.					
S C	30	Capital stock or trust principal, or current funds				30	
Se	31	Paid-in or capital surplus, or land, building, or ec	· IIIIDMA	ent fund	278290.	31	260489.
ľ Å	32	Retained earnings, endowment, accumulated in		-		32	
Š	33	Total net assets or fund balances .	501116,		278290.	33	260489.
	34	Total liabilities and net assets/fund balances	•••	· · · · · · · · ·	282150.	34	260489.
	34	Total habilities and het assets/fund balances			202100.	J4	200407

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12)) <u>3-6</u>	0090	83	Pag	ge 12
1 Total revenue (must equal Part VIII, column (A), line 12)	Part						
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990 S Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If the organization's financial statements audited by an independent accountant? If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits If the organization undergo the required audit or audits? If the organization did not undergo such audits	_	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	•••	<u> </u>	-	
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990 S Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If the organization's financial statements audited by an independent accountant? If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits If the organization undergo the required audit or audits? If the organization did not undergo such audits		Total revenue (must equal Port \/III column (A) line 12\	1.	. 1		865	.10
Revenue less expenses Subtract line 2 from line 1 3 -6748. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 278290. Other changes in net assets or fund balances (explain in Schedule O) 5 -11054. Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 260488. Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	•		!				
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_		<u> </u>				
Solumn (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements audited by an independent accountant? Ce If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits, explain undergo the required audit or audits, explain undergo the required audit or audits, explain undergo such audits State Accrual Other Yes No Yes No Yes No Yes No Yes No Independent accountant? 2a	-	·	` <u> </u> -				
Ret assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII	_			`-			
Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990 Cash Accrual Other	5	· · · · · · · · · · · · · · · · · · ·	Ľ	5		<u> </u>	<u>54.</u>
Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X	6				_	c 0 4	0.0
Check if Schedule O contains a response to any question in this Part XII				3		604	88.
Accounting method used to prepare the Form 990	Part	. 9					
Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant?		Check if Schedule O contains a response to any question in this Part XII		<u></u>			$\perp \perp \perp$
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant?						Yes	No
Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	1	Accounting method used to prepare the Form 990 🖾 Cash 🔲 Accrual 📋 Other					1
Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? c If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		If the organization changed its method of accounting from a prior year or checked "Other," explain in				40	
b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		Schedule O			L	·	
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audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	b	Were the organization's financial statements audited by an independent accountant?			2b		X
If the organization changed either its oversight process or selected process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	of the				
Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		If the organization changed either its oversight process or selected process during the tax year, explain in					
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Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were					
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		issued on a separate basis, consolidated basis, or both			-1,	\$1.7mg	
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		Separate basis Consolidated basis Both consolidated and separate basis				-1	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	3a						
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		the Single Audit Act and OMB Circular A-133?			3a		X
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	b						
	-				3b		
					Form	990	(2011)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

CLARENDON FIRE ASSOCIATION INC

Employer identification number 03-6009083

Schedule D (Form 990) 2011

Pa	ort I Organizations Maintaining Donor Ad	vised Funds or Othe	er Similar Fund	ls or Accounts.
	Complete if the organization answered "Yes" to I			
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year) .			
3	Aggregate grants from (during year) .	· - · - · ·		
4	Aggregate value at end of year		•	· · · · · · · · · · · · · · · · · · ·
5	Did the organization inform all donors and donor advisors	in writing that the assets	neld in donor advise	ed funds
6	are the organization's property, subject to the organization Did the organization inform all grantees, donors, and donor for charitable purposes and not for the benefit of the donormpermissible private benefit?	or advisors in writing that o	rant funds may be	used only onferring Yes No
Pa	rt I Conservation Easements. Complete if t	the organization answered	"Yes" to Form 990), Part IV, line 7
1	Purpose(s) of conservation easements held by the organi	zation (check all that apply	()	·
	Preservation of land for public use (e.g., recreation or	education)	Preservation	of an historically important land area
	Protection of natural habitat		Preservation	of certified historic structure
	Preservation of open space		_	
2	Complete lines 2a through 2d if the organization held a qu	ualified conservation contri	bution in the form o	of a conservation easement on the
	last day of the tax year			
		•		Held at the End of the Tax Y
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
	Number of conservation easements on a certified historic	structure included in (a)		2c
d	Number of conservation easements included in (c) acquire	ed after 8/17/06, and not o	n a historic	
	structure listed in the National Register			2d
3	Number of conservation easements modified, transferred	. released, extinguished, o	r terminated by the	organization during
	the tax year	, ,		
4	Number of states where property subject to conservation	easement is located >		
5	Does the organization have a written policy regarding the		ction, handling of vi	iolations.
_	and enforcement of the conservation easements it holds?	•	, 	∏ Yes ∏ No
6	Staff and volunteer hours devoted to monitoring, inspecting		tion easements dur	
7	Amount of expenses incurred in monitoring, inspecting, as	•		
8	Does each conservation easement reported on line 2(d) a	-	•	
·	and section 170(h)(4)(B)(μ)?	boro oddory the requirem	3/10/07/00/07/17/07/	
9	In Part XIV, describe how the organization reports conser	vation easements in its rev	enue and evnence	
9	include, if applicable, the text of the footnote to the organi		· ·	
	conservation easements	ization s ilitaticiai statemei	its triat describes tri	ie organization's accounting for
Pa	rt III Organizations Maintaining Collection	s of Art Historical	Fraguires or C	Ather Similar Assets
	Complete if the organization answered "Yes" to I	•	ricasarcs, or c	thei Ollinai Assets.
1.		*	o statement and he	lance shoot works of art, historical
' 6	If the organization elected, as permitted under SFAS 116 treasures, or other similar assets held for public exhibition			
	text of the footnote to its financial statements that describ		i luitileialice oi pub	nic service, provide, in Fait XIV, the
	text of the foothole to its illiancial statements that describ	es these items		
	olf the organization elected, as permitted under SFAS 116.	to report in its revenue et	atement and halans	so shoot works of art, historical trea
•	- · · · · · · · · · · · · · · · · · · ·	-		•
	sures, or other similar assets held for public exhibition, ed	iucation, or research in ful	illerance of public s	ervice, provide the following amounts
	relating to these items			► ¢
	(i) Revenues included in Form 990, Part VIII, line 1			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical		assets for financial	gain, provide the following amounts
	required to be reported under SFAS 116 relating to these			
	Revenues included in Form 990, Part VIII, line 1			. • \$
	Assets included in Form 990, Part X		··	▶ \$
For I	Paperwork Reduction Act Notice, see the instructions f	for Form 990.		Schedule D (Form 990) 2011

Pa		_	g Collections of Ar	t, Historical Treasu	ires, or Other Simi	ilar Assets	
	(continued						
3		's acquisition, accession	, and other records, che	ck any of the following th	at are a significant use of	of its collection	ı ıtems
	(check all that apply)						
а	Public exhibition			d Loan or exchang	ge programs		
b	Scholarly research			e U Other			
С	Preservation for fu	-				D- 4 VIV	
4				they further the organiza			
5				historical treasures, or of			П м-
D-				collection?		Yes	No.
Pal			•	lete if the organization a	nswered Yes" to Form	990, Part IV,	line 9,
4.		d an amount on Form 99			annets met implijded		
ıa	on Form 990, Part X?		•	or contributions or other a	issets flot illicitated	. Tyes	∏ No
_	•	rangement in Part XIV a		a table	••••	. <u> </u> 163	
b	ir res, explain the ar	rangement in Part XIV a	nd complete the followin	y table		Amou	ınt
•	Beginning balance .				1c	Aniou	
	Additions during the ye	 aar			1d		
		e year			1e		-
f	Ending balance	· · · · · · · · · · · · · · · · · · ·			1f		
2a	•	iclude an amount on For				Yes	X No
	If "Yes," explain the ar		666, 1 4,				ш -
			lete if the organization a	nswered ``Yes" to Form	990, Part IV, line 10		
_		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year						
	balance						
b	Contributions .						
С	Net investment earn-						
	ings, gains, and losses	\$					
d	Grants or scholarships						
е	Other expenditures						
	for facilities and						
	programs				<u>_</u>		
f	Administrative			İ			
	expenses						
g	End of year balance .			<u> </u>			
2		percentage of the year of	· •	d as			
а		uasi-endowment ►					
	Permanent endowmer		. % 				
С	Temporarily restricted	· · · · · · · · · · · · · · · · · · ·	00 %			ſ	
_		es 2a, 2b, and 2c should		L_L_L bald and adam.	d f th		V N-
3a		•	-	hat are held and adminis	tered for the organization	-	Yes No
	(i) unrelated organiza					3a(i)	
	, ,	ons				. 3a(ii)	
_		ne related organizations				3b	
4		he intended uses of the d Buildings, and Equi					
ıa	Description of		(a) Cost or other	(b) Cost or other	(c) Accumulated	(d) Boo	k value
	Description of	in vocanone	basis (investment)	basis (other)	Depreciation	(, 500	
	Land		222.2 (1	
	Buildings			75,401.	50,055.	25	,346.
	Leasehold improveme	ents		648,845.	585,576.		,269.
	Equipment						
	Other						
		1e (Column (d) must eq	ual Form 990, Part X, co	olumn (B), line 10(c)).		88	,615.
					Sche	dule D (Form	990) 2011

			009083	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Audited Financia			<u> </u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		,549.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		, 297.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	(6	,748.)
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		_
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net) Add lines 4 through 8	9	_	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	(6	,748.)
Pai	Reconciliation of Revenue per Audited Financial Statements With Revenue	pe	r Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		[2]	
– a	Net unrealized gains on investments		A23 2	
b	Donated services and use of facilities			
	Recoveries of prior year grants		恰 引	
C				
d	` '		20	
e	Add lines 2a through 2d	•	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)			
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12)		5	
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es	per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities		100	
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		13	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV)		122	
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		5	
	t XIV Supplemental Information		1 - 1	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line	s 1h	and 2h Part V	line 4
	X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide			
raii	A, tille 2, Part At, lille 6, Part Att, lilles 20 and 40, and Part Att, lilles 20 and 40 Also Complete tills part to provide	e an	y additional illioi	mation
			<u></u>	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

▶ Attach to Form 990 or 990-EZ.

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Employer identification number Name of the organization 03-6009083 CLARENDON FIRE ASSOCIATION INC CHANGES IN FUND BALANCES PART XI LINE 5 3860. ACCOUNTS PAYABLE PAID IN 2012 REDUCTION IN EQUIPMENT TO RECORD ACTUAL AT 9/30/2012 7194 11054 TOTAL ADJUSTMENT

Name of the organization CLARENDON FIRE ASSOCIATION INC	Employer identification number 03-6009083
PART VI LINE 19	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENT AND FINA	NCIAL STATEMENTS
AVAILABLE UPON REQUEST.	
	···
·	
<u> </u>	
	-
	

Form 4562.

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment Sequence No 179

See separate instructions. ▶ Attach to your tax return. Business or activity to which this form relates

Identifying number กรี-6กกจกคร

CL	ARENDON FIRE ASS	OCIATION	INCFIRE DEP	ARTMENT				03-6009083
			ty Under Section 179		-		'	
		/ listed property,	complete Part V before	you complete Par	rt I			
1	Maximum amount (see instruction						1	500,000.
2	Total cost of section 179 proper	ty placed in servi	ce (see instructions)				2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)					[3	2,000,000.
4	Reduction in limitation Subtrac	t line 3 from line 2	2 If zero or less, enter -	-0		[4	
5	Dollar limitation for tax year Su	btract line 4 from	line 1 If zero or less, e	enter -0- If marrie	ed			
	filing separately, see instructions	s	<u> </u>				5	
6	(a) Description of pro	perty	(b) Cost (bus	iness use only)	(c) Elec	cted cost		
								
	Listed property Enter the amou				<u>' </u>			
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7						8	
9	9 Tentative deduction Enter the smaller of line 5 or line 8						9	
	Carryover of disallowed deduction				••••		10	
	Business income limitation Ent		•	· ·	ine 5 (see ins	tructions)	11	
	Section 179 expense deduction				· · ·		12	
	Carryover of disallowed deduction				3			
	e: Do not use Part II or Part III t							
			Other Depreciation (D			(See instruc	tior	ns)
	Special depreciation allowance		erty (other than listed pro	operty) placed in	service			
	during the tax year (see instruct	•			• • • • • •	-	14	
	Property subject to section 168(••••	⊢	15	
	Other depreciation (including AC				····		16	
Г	Irt III MACRS Depreciation	n (Do not include	listed property) (See in					
	MAGDO deductions for contra	tarad in annual i	Section A				17	38,583.
17 MACRS deductions for assets placed in service in tax years beginning before 2011								30,303.
10		•	-			⊾П		
_	into one or more general asset a				General Der	reciation 9	Sve	tem
Section B-Assets Placed in Service During 2011 Tax Year Using the General Deprecia (b) Month and (c) Basis for depr (d) Recovery (e)						T COIGGOIT C	<i>.,</i> .	(g) Depreciation
(a) Classification of property		year placed in service	(business/investment use only - see instructions)	period	Convention	(f) Method		deduction
19a	3-year property	SCIVICE	Orly - see tristractions/					_
<u> </u>			820.	5	HY	200 DI	В	164.
d	 							
e								
f	20-year property		-					
g	0.5			25 yrs		S/L	_	
h	Residential rental			27 5 yrs	MM	S/L		
	property			27 5 yrs	ММ	S/L		
i	Nonresidential real	07/2012	9,116.	39 yrs	ММ	S/L		49.
	property	09/2012	9,117.	39.0	ММ	S/L		10.
	Section C-Asse	ets Placed in Sei	rvice During 2011 Tax	Year Using the	Alternative D	epreciation	ı Sy	/stem
20a	Class life		·			S/L		
b	12-year			12 yrs		S/L		
				40 yrs	MM	S/L		
Pa	art IV Summary (See instru	ictions)						
21	Listed property Enter amoun	t from line 28					21	
22	Total. Add amounts from line	e 12, lines 14 thro	ugh 17, lines 19 and 20	ın column (g), ar	id line 21			
	Enter here and on the approp		return Partnerships ar	nd S corporations	- see instruct	ions .	22	38,806.
	For assets shown above and placed in service during the current year, enter the							
23	For assets shown above and	placed in service	during the current year,	enter the				