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DLN: 93492200002096

OMB No 1545-1150

Form **990-EZ** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Short Form

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service		•	F Information about Form 990-EZ and its instructions is at <u>www.irs.gov/form990</u> .				Inspection	
			r year, or tax year beginning 04-01-2015 , and ending 03-31-2016	<u> </u>				
В	Check	ıf applıcable	C Name of organization			D Employer identification number		
™Address change ™Name change ™Initial return Final return/terminated ™Amended return ™Application pending			SONS OF ITALY IN AMERICA			01-0673858 ETelephone number (518) 537-2373		
			% ANGELA RAPP Number and street (or P O box, if mail is not delivered to street address) Room/suite PO BOX 949					
			City or town, state or province, country, and ZIP or foreign postal code HUDSON, NY 125340949			Number ► 3610		
			н	Check 🕨	□ If the o	organ	ızatıon ıs not	
G A	ccour	nting Method	Cash ┌Accrual Other (specify) ► required t		to attach Schedule B 10, 990-EZ, or 990-PF)			
τw	ebsit	o b		(Form 99	0,990-E	Z, or	990-PF)	
			only one) -┌501(c)(3)┌ 501(c)(8) ◀(insert no)┌ 4947(a)(1) or ┌ 527					
K F	orm o	f organization	Corporation Trust TAssociation TOther					
			7b to line 9 to determine gross receipts If gross receipts are \$200,000 or	more, or if	total ass	ets (F	Part II , column	
		/) are \$500,000	0 or more, file Form 990 instead of Form 990-EZ		► \$32	2,326	5	
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions Check if the organization used Schedule O to respond to any question in this Part I						
	•		e organization used Schedule O to respond to any question in this Part I . , gifts, grants, and similar amounts received				<u></u>	
Revenue	1		, gitts, grants, and similar amounts received		F	1	8,795	
	2					2		
	3	•	lues and assessments		F	3	4,145	
	4	Investment in				4	53	
	5a		t from sale of assets other than inventory					
	b		other basis and sales expenses		0	5c		
	C						0	
	6	Gaming and fundraising events Cross upcome from gaming (attach Schodule Cuf greater than #15,000)						
	а	Gross Income	from gaming (attach Schedule G if greater than \$15,000) • 6a					
	b	Gross income from fundraising events (not including \$of contributions						
			m fundraising events reported on line 1) (attach Schedule G if the b n of such gross income and contributions exceeds \$15,000) 6b 1					
		_	· · · · · · · · · · · · · · · · · · ·		15,808 3,852			
	с		expenses from gaming and fundraising events 6c	-+ l.n. CV			11.056	
	d _		r (loss) from gaming and fundraising events (add lines 6a and 6b and subtra	ct line 6c)		6d	11,956	
	7a		finventory, less returns and allowances					
	b	Less cost of	-		0			
	C		r (loss) from sales of inventory (Subtract line 7b from line 7a)		· · ·	7c	0	
	8		e (describe in Schedule O)			8	1,000	
	9		. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		-	9	28,474	
Expenses	10		milar amounts paid (list in Schedule O)		• • •	10		
	11		to or for members		• •	11		
	12	·	r compensation, and employee benefits		• •	12	0	
	13	Professional fees and other payments to independent contractors				13		
	14		ent, utilities, and maintenance		• •	14	6,690	
	15		cations, postage, and shipping			15	541	
	16		es (describe in Schedule O)		٠.٠	16	17,600	
	17	Total expense	es. Add lines 10 through 16		▶	17	24,831	
Net Assets	18	Excess or (de	ficit) for the year (Subtract line 17 from line 9)		[18	3,643	
	19	Net assets or	fund balances at beginning of year (from line 27, column (A)) (must agree v	vith				
		end-of-year fi	gure reported on prior year's return)		[19	111,729	
	20	O ther change	s in net assets or fund balances (explain in Schedule O)		[20		
	21	Net assets or	fund balances at end of year Combine lines 18 through 20		. ▶	21	115,372	