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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)

Open to Public

Interr	al Rever	The organization may have to use a copy of this return to satisfy state			Inspection
<u>A</u>	For th	ne 2008 calendar year, or tax year beginning TOO , , 2008, and end		3[, 20 08
B (heck if a	applicable Please C Name of organization Veterans of Foreign Wars of the	united	D Employe	er identification number
	ddress	s change label or Doing Business As Stodes Post No. 4703		22_	16663614
_	lame ci	pnnt or Number and street (or P O box if mail is not delivered to street address) Room/s	suite	•	ne number
_	nitial re	1 200 IEU IVIaniaka NC		(732)	<i>138-6</i> 077
_		Specific Characteristics and ZID 4		()	
	ermına	tions. Tarkenin Art 18527		G Gross rec	ounts &
		ed return	, 		
L_J A	pplication	on pending Cope	. ' '	•	for affiliates? Yes No
		William Maguire 54 Magnolla Dr. Jackson, w	H(b) Are a	ll affiliates in	cluded? LYes LNo
		empt status 👿 501(c) () ◀ (insert no) 🗌 4947(a)(1) or 📗 527			ist (see instructions)
	Websi			xemption num	
		organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ► ☐ L Year of forma	ation 1945	M State of	legal domicile
Pa	rt I	Summary			
	1	Briefly describe the organization's mission or most significant activities: . \(\mathcal{L} \text{Q} \)	terans	009	anization
_	3	Providing for its members and other Jeterans	5.019an	izatio	sas and
ဦ		community activities			
Ē			0		
Governance	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more the	an 25% of its as	sets.	•••••••
		Number of voting members of the governing body (Part VI, line 1a)	Car.	3	Ø
න් ගු		Number of independent voting members of the governing body (Fart VI, line	1100	4	K
ı t ie		Total number of employees (Part V, line 2a).	15-10	5	18
Activities		Total number of volunteers (estimate if necessary)	(· <i>v</i> · · · ·	6	15
⋖				7a	9,55
		Total gross unrelated business revenue from Part VIII, line 12, column (C)		7b	Ø
		Net unrelated business taxable income from Form 92005, line 34	Prior Ye		Current Year
		Contributions and grants (Part VIII, line 1911)	18138,		·
ē	8	Contributions and grants (Part VIII, life 1741).	101201	17	24597.51
Ę	9	Program service revenue (Part VIII, lihe 2g)	<i>B</i>		<u>&</u>
Revenue	10	Investment income (Part VIII, column (A), Mes 3,04, and 7d) . /	<u>Ø</u>		B
_			733 22		34658.15
	12	Total revenue—add line's 8 through 11 (hust equal Part VIII, column (A), line 12)	91460.		59255.66
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8669.	00	<u>5948.07</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)	Ø		
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	Ø		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	Ø		
Ä	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶	L	on itse, the	THE THE THE WAS
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	69210	36	46149.64
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		7.36	51397.71
	19	Revenue less expenses. Subtract line 18 from line 12	13581	.31	7857.95
ts or			Beginning of	of Year	End of Year
sets	20	Total assets (Part X, line 16)	162749	7.39	152721,77
A B	21	Total liabilities (Part X, line 26)	Ø		Ø
Met Assets Fund Balanc	22	Net assets or fund balances. Subtract line 21 from line 20	162749.	39	152721,77
	rt II	Signature Block			
Z		Under penalties of perjury, I declare that I have examined this return, including accompanying sche			
Z		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based of	on all information	of whigh pre	parer has any knowledge
2 2 3 3 3 1 3	ın	Lesera Chines		5/17	110
-He	re	Signature of officer	Date		
Fle Fle	. •	Teresa Ching Commander			
□		Type or print name and title			
-	-	Date	Check if	Preparer's id	entifying number
ఴ		Preparers	self	(see instructi	
Bic			employed ▶ ∐		
	oarer's	Firm's name (or yours	- I		
Use	Only	ıf self-employed),	EIN	1	`
<u> </u>		address, and ZIP + 4	Phone no	D P ()
wa	y tne	IRS discuss this return with the preparer shown above? (see instructions) .			. ∐ Yes No

Form **990** (2008)

P au	Statement of Frogram Service Accomplishments (see instructions)
1,	Briefly describe the organization's mission: Veterans organization providing for its members and other veterans organizations and community activities
	veterans organizations and rommunity activities
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 5248.07 including grants of \$) (Revenue \$ \$
	(Code:) (Expenses \$ 5348,07 including grants of \$) (Revenue \$ \$) Donations to veterans and veterans families and other veterans organizations and community activities
	······································
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses • \$ (Must equal Part IX Line 25, column (R))

Par	t IV Checklist of Required Schedules			<u> </u>
			Yes	No
។	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		/
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		V
3	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	3		V
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		V
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		V
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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 X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		V
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		V
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	V	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		/
14a		14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		V
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		/
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		V
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		V
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	-	V
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		/
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 questions 24b–24d and complete Schedule K. If "No," go to question 25.	24a		/
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	24c		/
d	to defease any tax-exempt bonds?	24d		1
	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		V
b		25b		1
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		V
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		V

Part IV	Checklist of	Required Schedules (continued)	Ī

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		/
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		/
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		/
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		/
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		V
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		/
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		/
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		V
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		/

Form **990** (2008)

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	.		ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	.		Ì
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		-/	-
	gaming (gambling) winnings to prize winners?	1c	V	
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	.		
h	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
J	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			1
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	<u> </u>		<u> </u>
	this return?	3a		<u> </u>
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, a financial account in a foreign country (such as a bank account, securities account, or other financial	40		1/
h	account)?	4a		
Ų	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	~	*	
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	_		
	Regarding Prohibited Tax Shelter Transaction?	5c		
	Did the 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?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	7a		/
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			/
	required to file Form 8282?	7c		ν
	Tres, indicate the number of Forms 5252 filed during the year	×		,
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section		ž	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		-/
9	organization, have excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			<u> </u>
a	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		j	İ
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a	aross mosmo from monitoris of shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a		<u></u>

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			i
1a	Enter the number of voting members of the governing body	, -		
b	Enter the number of voting members that are independent	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	n		
	any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct			,
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		/
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		V
6	Does the organization have members or stockholders?	6	1/	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	1/	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1/	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		4	
	the year by the following:	22		
а	The governing body?	8a	1/	
b	Each committee with authority to act on behalf of the governing body?	8b	ν	
9a	Does the organization have local chapters, branches, or affiliates?	9a		\checkmark
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		\mathcal{L}
11	Is there any officer, director or 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	11		<u>/</u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u>/</u>
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	V	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			_
	describe in Schedule O how this is done	12c		V
13	Does the organization have a written whistleblower policy?	13		V
14	Does the organization have a written document retention and destruction policy?	14	<i>V</i>	
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:			
а	The organization's CEO, Executive Director, or top management official?	15a		
b	Other officers or key employees of the organization?	15b		
	Describe the process in Schedule O. (see instructions)			į
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		- -	راً إ
	with a taxable entity during the year?	16a		~
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		>	'
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			-
	the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ∠ ∠ ≤	-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.			
	·			
20	State the name, physical address, and telephone number of the person who possesses the books and reconganization: William Maguire 54 Magnotia Dr. Jackson, WIO8597	rds o	f the	_~~\~~-

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 the organization did not co	mpensate	any o	offic	er,	dıre	ctor,	trus	tee, or key em	ployee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per	Positi			_	that ap		Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations

Part VII Section A. Officers, Directors, Tru		Line	noy.			u my	1163			1 — · · · · · · · · · · · · · · · · · ·
(A)	(B)	l <u>.</u> .		•	C)			(D)	(E)	(F)
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		-								
									·	
		<u></u>								
					ļ					· <u> </u>
1b Total							•			<u> </u>
2 Total number of individuals (including those organization ►	e in 1a) wh	no rec	eive	ed r	nor	e thar	า \$1	00,000 in repo	rtable compens	
3 Did the organization list any former office employee on line 1a? If "Yes," complete So						•	-	e, or highest c	•	Yes No
4 For any individual listed on line 1a, is the state organization and related organizations individual.	greater tha	ın \$15	50,0	00?	? If '	"Yes,"	' cor	mplete Schedu		4
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	compolete	pen: Sch	sati edu	on ile J	from I for s	any such	unrelated org	anization for	5
Section B. Independent Contractors		–								
Complete this table for your five highest co- compensation from the organization.	ompensate	d ind	ере	ende	ent o	contra	acto	rs that receive	d more than \$1	00,000 of
(A) Name and business add	fress							(B) Description of s	ervices	(C) Compensation
							-			
	-						-			
										
2 Total number of independent contractors compensation from the organization ▶	(including t	those	in	1) v	vho	recei	ved	more than \$10	00,000 in	ರ್ಷಾಭಾಷೆಯ ಅವರು

Part	VIII	Statement of Re	venue									
					(A) Total reve	nue	(B) Related exemp function revenue	ot on	(C) Unrelated business revenue	;	(D) Revenue excluded from to under section 512, 513, or 51	s
Contributions, gifts, grants and other similar amounts	b d e f	Government grants (contri All other contributions, gifts, g and similar amounts not inclu-	rants, ded above 1f	0 1699,57 6937,00 8 8 11960,99	2459 7	.5)			,		ŧ	
Program Service Revenue	2a b c d e f	All other program service Total. Add lines 2a–2f		Business Code	Ø		*		7	On Product Mary and	3	*
	3 4 5	Investment income (incother similar amounts) Income from investment of Royalties		d proceeds	Ø Ø							
	b	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (lo	Ø Ø Ø	Ø Ø Ø •	* <i>O</i> S	· ·			& ,		,	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other	Ž. ,	*	* *	×	,	.\$)	. 3	
		Less: cost or other basis and sales expenses .	Ø	Ø Ø			* *	± ≯= ,	1	*	-	* :
	d	Gain or (loss) Net gain or (loss)	· · · ·	•	Ø						*	
Other Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18		Ø	<u>*</u>		ં હૈ	`. }		` `	***************************************	? :
Othe	b	Less: direct expenses Net income or (loss) fro	b m fundraising e	5372,77 events ▶	(5372.	77>	· 2					
	ь	Gross income from gam See Part IV, line 19 Less: direct expenses. Net income or (loss) from	a		5982	50			,	**	5982.5	5 5
	b	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from Miscellaneous Reve	a ld b n sales of invent		14317		1431.	2. UD				
	11a b c d	Interest Popples	ons	9,55 8071,85 1/5/5 9732.69			9735	2,69	9,59	5	8071.85 /1515	5
		Total. Add lines 11a-1 Total Revenue. Add lines 10c, 10c, and 11e		•	19736. 59255				9.55		25569.	_ 36

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)

			or required to com	piete eciaiinio (D),	(O), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5248.67	5248,07		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	Ø			
3	Grants and other assistance to governments, organizations, and individuals outside the	(*	, ,		
	U.S. See Part IV, lines 15 and 16	Ø			
4	Benefits paid to or for members	Ø		*	.*
5	Compensation of current officers, directors, trustees, and key employees	Ø			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	Ø			
7	Other salaries and wages	Ø			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	Ø			
9	Other employee benefits	Ø			
10	Payroll taxes	Ø			
11	Fees for services (non-employees):	/ Angle			
	Management	Ø			
	Legal	Ø			
	Accounting	B			
	Lobbying	Ø	, <u>}</u>		
f	Investment management fees	Ø			
g	Other	9904.15		9904,15	
12	Advertising and promotion	Ø			<u> </u>
13	Office expenses	7125.17		7125.17	
14	Information technology	Ø			
15	Royalties	12324,07		13324.07	
16 17	Occupancy	Ø		19504,01	
18	Payments of travel or entertainment expenses	<u> </u>			
10	for any federal, state, or local public officials	Ø			
19	Conferences, conventions, and meetings .	22		27	
20	Interest	Ø			
21	Payments to affiliates	Ø		_	
22	Depreciation, depletion, and amortization.	8		1600-100	
23	Insurance	10855.15		10855.15	
24	Other expenses ltemize expenses not		2.92 W		
	covered above. (Expenses grouped together and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)	*	, , ,		
а	Phone	767.85		767.85	
b	Postaga Taxes + Licensing Miscellaneous	212,40		212,40	
С	laxes + Licersing	4360.85		4360.85	
d	11)1scellaneous	606		600_	
e	All also assessed			<u> </u>	
f 25	All other expenses	51419.71	5248,07	46171.64	8
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	J. 7, 11	3340101	101 11.09	
	fundraising solicitation		<u> </u>	<u> </u>	

Par	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
1	4	Cash—non-interest-bearing	27220,45	1	19884,28
	2	Savings and temporary cash investments	6816.94	2	4125,49
	3	Pledges and grants receivable, net	Ø	3	Ø
	4	Accounts receivable, net	Ø	4	Ø
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.	Ø	5	Ø
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	Ø
Assets	7	Notes and loans receivable, net	P	7	Ø
SSI	8	Inventories for sale or use	~	8	78
•	9	Prepaid expenses and deferred charges	<i>Ø</i>	9	Ø
	10a	Land, buildings, and equipment: cost basis 10a 1987/2	, , , , , , , , , , , , , , , , , , ,		x 2
	b		128712	10c	128712
	11	Investments—publicly traded securities	<u> </u>	11	<u></u>
ı	12	Investments—other securities. See Part IV, line 11	<u>Ø</u>	12	Ø
	13	Investments—program-related. See Part IV, line 11	<u>Ø</u>	13	Ø
	14	Intangible assets	<u>Ø</u>	14	<i>D</i>
	15	Other assets. See Part IV, line 11	1/ 27/10 70	15	100001 77
	16		162749.39	16	152721.77
	17	Accounts payable and accrued expenses	Ø	17	Ø
	18	Grants payable	Ø	18 19	Ø
	19	Deferred revenue	Ø	20	Ø
	20	Tax-exempt bond liabilities	8	21	Ø
ë.	21	Escrow account liability. Complete Part IV of Schedule D		21	<u></u>
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	, 4%" .	22	
- !	00	persons. Complete Part II of Schedule L	ĕ	23	Ø
	23	Secured mortgages and notes payable to unrelated third parties	Ø	24	8
- 1	24 25	Unsecured notes and loans payable	Ø	25	05
	26 26	Total liabilities. Add lines 17 through 25	Ø	26	Ø
Ses		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets	Ø	27	8
Bal	28	Temporarily restricted net assets	Ø	28	Ø
ᅙ	29	Permanently restricted net assets	Ø	29	Ø
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	O CONTRACTOR OF THE CONTRACTOR		* * * * * * * * * * * * * * * * * * *
ţ	30	Capital stock or trust principal, or current funds	Ø	30	Ø
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	Ø	31	B
۲	32	Retained earnings, endowment, accumulated income, or other funds	Ø	32	Ø
Ş	33	Total net assets or fund balances	Ø	33	Ø
	34	Total liabilities and net assets/fund balances	Ø	34	
Pai	rt XI	Financial Statements and Reporting			
					Yes No
1		ounting method used to prepare the Form 990: Cash Cash Accrus			00
		re the organization's financial statements compiled or reviewed by an in		t? ,	
		re the organization's financial statements audited by an independent according to the control of			. 2b
	the	'es" to lines 2a or 2b, does the organization have a committee that assume audit, review, or compilation of its financial statements and selection of an i	ndependent accountan	t? .	. 2c
3a	As a	a result of a federal award, was the organization required to undergo ar Single Audit Act and OMB Circular A-133?	audit or audits as se	t fortl	n in
b		Yes," did the organization undergo the required audit or audits?			