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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)

OMB No 1545-0047 2008

Department of the Treasury

Dep Inte	artment rnal Rev	of the Treasury enue Service		► The organization may have to use a cop	y of this return to sati	sfy state r	reporting r	equirem	nents	0	pen to Public	Inspe	ction		
	For th	ne 2008 calen	dar year,	or tax year beginning Jul 1	, 2008	3, and e	nding	Jun	30		, 2009				
В	Check	f applicable		C Name of organization					D Employ	er ide	entification Numb	er			
	Ac	idress change	Please use IRS label	VETERANS OF FOREIGN WA	ARS POST 14	9			06-	076	6421				
	Na	ime change	or print or type.	Number and street (or P O box if mail is	not delivered to street a	nddr) Ro	om/suite	E Telephone number			ımber				
	In	tial return	See specific	5 BYRON STREET					(203) 792-6332						
	Те	rmination	Instruc- tions.	City, town or country	State	ZIP cod	le + 4								
	L Ar	nended return		DANBURY	CT	0683			G Gross r						
	∐ Ap	plication pending	F Name a	and address of principal officer			1		group retur				X No		
_				NKLER 7 PATRICIA LANE DA		<u>T 068:</u>	10		affiliates inc attach a list			Yes	No		
<u>L</u>		-exempt statu		(c) (19) ◄ (insert no)	4947(a)(1) or	527					_				
<u>J</u>		bsite: ► N/							exemption ni	_					
K		of organization	X Corpor	ation Trust Association Other	er► L	Year of Fo	ormation	1919	<u> </u>	State	of legal domicile	CT			
P	art I	Summa													
	1	Briefly descri	be the or	ganization's mission or most signific	cant activities: st	PPORTI	NG WILI	TARY	VETERANS	ANI	COMMUNITY	ACTIVI	ITIES		
ဦ															
na.															
ove	2	Check this bo	ox ► [[if the organization discontinued its	operations or disp	posed o	f more t	han 2	5% of its	– – asse	ets				
Ğ	3	Number of vo	oting men	nbers of the governing body (Part V	'l, line 1a)					3	417				
88	4		-	nt voting members of the governing	body (Part VI, lin	e 1b)				4					
Activities & Governance	5			oyees (Part V, line 2a)						5 6	0				
Act	0 7a			teers (estimate if necessary) business revenue from Part VIII, lin	e 12 column (C)					7			0.		
		_		s taxable income from Form 990-T,						7		_			
				,				Р	rior Year		Curre	nt Yea			
7011B	8	Contributions	and gran	nts (Part VIII, line 1h)				<u>.</u>	218,9			58,4			
N II @ Revenue	9			ue (Part VIII, line 2g)											
⊣ %	10	Investment in	ncome (P	art VIII, column (A), lines 3, 4, and						9	02.				
- 	11			(III. column (A), lines 5, 6d, 8c, 9c,	<u> </u>										
Z —	12			nes 8 through (1) (must equal Part		line 12)			218,920.		•	59,3	84.		
3	13	Grants and s	imilañad	ounts paid (Part-IX, column (A), lin	-										
<u>آ</u>	1	14 Benefits paid to or for members (Parti X, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									<u> </u>				
, s	15	Salaries, oth	eccompe		· 										
	16a			g fees (Part IX, column (A), line 1			_			·	<u> </u>				
SCAINING DE EXPENSES	Ь	Total fundrag	sıng expe	nses (Part IX, column (D), line 25)	-										
_	17	•	•	IX, column (A), lines 11a-11d, 11f-2	· · · · · · · · · · · · · · · · · · ·		<u> </u>		85,3			45,8			
	18	-		nes 13-17 (must equal Part IX, colu	umn (A), line 25).				85,3			45,8			
_	19	Revenue less	s expense	s Subtract line 18 from line 12		_			133,5	91		13,5	64.		
6								Begir	nning of `			of Year			
9 G	20	Total assets					_		139,0	30	. 1	.48,1	<u>.92.</u>		
Net Assets or Find Beloncos	21	Total liabilitie	•	•			-				 	_			
	1 22			ances Subtract line 21 from line 20		139,0	30	. 1	.48 <u>,</u> 1	<u>.92.</u>					
P	art II		ure Blo	··· /		-									
		Under penaltic true, correct,	es of perjury,	I declare that I have examined this return, incli Declaration of preparer (other than officer) is	uding accompanying sch based on all information	hedules an n of which	nd statemer preparer h	nts, and nas any l	to the best of knowledge	of my	knowledge and b	elief, it is	š		
c:	gn		inth	11/100				١,	3 / NO Y .	16					
H	ere	Signature	of office					Da	ite			_			
•••		- Tim	othick	Winklex QUART	terMASTER	,									
		Type or p	rint name an	d title	00 13.070										
_						Date		C	heck if		Preparer's ident (see instructions	fying nur	mber		
Pa	aid	0						se	elf- nployed ►		(SCC IIISII GCIIOIII	,			
	e-	Preparer's signature	► Pet	er J. LaForte CPA		03/10	0/10	_							
pa Us	rer's	Firm's name (or LAF	ORTE FINANCIAL SERVICE											
	nly	yours if self- employed),	▶ 112	7 HIGH RIDGE RD STE 10	13			EI	IN ►						
_		address, and ZIP + 4	STA	MFORD	CT 069	05-12	03	Pi	hone no	(2	03) 386-	0297			
Ma	y the	IRS discuss th	ns return	with the preparer shown above? (se	ee instructions)						X Yes		No		
B/	A Fo	Privacy Act	and Pape	rwork Reduction Act Notice, see th	ne separate instru	ctions.			TEEA0101	04	/23/09 For	n 990 ((2008)		

Form	990 (2008)									06-0	76642	1		Page 2
Par	t III` S	tatement of	Prograi	m Service	e Accom	plishme	nts (see	instruct	ions)					
1	-	cribe the organ												
	SUPPORT	ING WILIT	ARY_VE	TERANS	AND COM	MUNITY	_ACTIVI	TIES			_ 			
						-								
						-				 _				
	0.115		4-1											
2	_	anization unde	rtake any	significant	program se	ervices du	ring the yea	ar which v	were not liste	ed on the prior		.	<u></u>	
	Form 990 c			a aa Cabaad					•	•	Ш	Yes	X	No
3		scribe these ne anization cease				nt change	r in how it i	conducts	any program	a conucoe?		Yes	x	Na
3	_	scribe these ch		_	_	it changes	S III HOW IL C	conducts,	any program	i services:	لــا	res	[V]	No
4	•		•			ne organiz	ation's thre	e larnest	nrogram ser	vices by expense	s Secti	იი 501	(c)(3)	
•	and 501(c)	(4) organization	ns and se	ction 4947(a)(1) trusts	are requi	red to repor	rt the amo	ount of grant	s and allocations	to othe	rs, the	total	
	expenses,	and revenue, if	any, for	each progra	am service	reported.								
								_	. –				_	
4 a	(Code) (Exp	enses \$	3		ıncludınç	g grants of	\$) (Revenue	\$)
	PATRIOI	CIC_OBSERV	ANCES	THRU PA	RADES,	FUNERA	LS AND	HOSPI	TAL VISI	rs				
	ALSO EL	UCATIONAL	SCHOL	ARSHIPS	<u>. </u>									
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4 b	(Code:) (Exp	enses \$	·		- ıncludınç	g grants of	\$) (Revenue	\$)
				 -										
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	· (Cod-	\ /F	````	,		سام ماریط		÷) (Davis				
40	(Code) (Ext	penses \$	P		_ including	g grants of	ې) (Revenue	ې)
										-				
														
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										_				
4 d	Other prog	ram services. (Describe	ın Schedule	e O.)									
	(Expenses				uding grant) (Rever)	
4e	Total prog	ram service ex	penses	▶ \$			(Must equa	I Part IX,	Line 25, col	umn (B).)				

Form **990** (2008) VETERANS OF FOREIGN WARS POST 149 06-0766421 Page 3 **Checklist of Required Schedules** 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 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? Х 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 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part. 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 5 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 X 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' complete Schedule D, Part III 8 X 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 x 10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V. X Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11 X 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 Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 х 14a Did the organization maintain an office, employees, or agents outside of the US? 14a X **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 X 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 X 16 X 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I 17 X 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 X 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H. 20 X 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 X 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 Х Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c 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 25 a 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 b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I 25b 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 X

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 Itl

Yes No 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee: a 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 X b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L. Part IV 28b X **c** 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 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes.' complete Schedule N. Part I 31 X 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 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 X Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 X 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 Х 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 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

BAA Form 990 (2008)

12a

Form 990 (2008)

12b

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 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c Х 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 0 2a 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 3ь 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 account)? 4a х **b** If 'Yes,' enter the name of the foreign country: **>** See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5**b** X c 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 6a Did the organization solicit any contributions that were not tax deductible? 6a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b ¥ 7 Organizations that may receive deductible contributions under section 170(c). 7 a a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? x 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? 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. 7e X 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. x g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . 7g h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 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 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make any distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 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 11 Section 501(c)(12) organizations. Enter: Ì a Gross income from other members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against 11 b amounts due or received from them)

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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

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

Sec	tion A.	Governing Body and Management								
	For each processe	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, s, or changes in Schedule O. See instructions.	describe the circumstances,	ļ	Yes	No				
1 a	Enter the	number of voting members of the governing body .	1a 417							
t	Enter the	number of voting members that are independent	16 417							
2	Did any o officer, di	officer, director, trustee, or key employee have a family relationship or a business re irector, trustee or key employee?	elationship with any other	2						
3	Did the o	rganization delegate control over management duties customarily performed by or us, directors or trustees, or key employees to a management company or other perso	under the direct supervision on?	3		x				
4	Did the o	rganization make any significant changes to its organizational documents		4		х				
	since the prior Form 990 was filed?									
5		rganization become aware during the year of a material diversion of the organizatio	n's assets? .	5		_X				
6	Does the	organization have members or stockholders?	•	6		_X_				
	governing	•		7a		<u>x</u>				
t	Are any o	decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		X				
8	Did the or the follow	rganization contemporaneously document the meetings held or written actions unde ving:	ertaken during the year by							
	•	rning body?	•	8a		X				
		nmittee with authority to act on behalf of the governing body?		8ь		X				
		organization have local chapters, branches, or affiliates?		9a		X				
		does the organization have written policies and procedures governing the activities of the organization?		9 b						
		ppy of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990		10		x				
		any officer, director or trustee, or key employee listed in Part VII, Section A, who cation's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		x				
Sec	tion B.	Policies								
	.				Yes	No				
		organization have a written conflict of interest policy? If 'No,' go to line 13.		12a		X				
	to conflic			12b						
	Schedule	organization regularly and consistently monitor and enforce compliance with the position of the position of the control of the	olicy? If 'Yes,' describe in	12c						
		organization have a written whistleblower policy?	•	13		Х				
		organization have a written document retention and destruction policy?	• • • • • • •	14		X				
15	persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision:							
	_	nization's CEO, Executive Director, or top management official?	•	15a		X				
t	_	icers of key employees of the organization?		15b		X				
		the process in Schedule O. (see instructions)								
16 a		rganization invest in, contribute assets to, or participate in a joint venture or similar ring the year?	arrangement with a taxable	16a		Х				
ł	in joint ve	nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard th respect to such arrangements?	n to evaluate its participation I the organization's exempt	16b						
Sec		Disclosures								
		tates with which a copy of this Form 990 is required to be filed	·							
	Section 6	i104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	nd 990-T (501(c)(3)s only) a	vaılabi	e for	public				
	_	website Another's website X Upon request								
19	Describe statemen	in Schedule O whether (and if so, how) the organization makes its governing docur ts available to the public.	ments, conflict of interest pol	ıcy, ar	nd fina	incial				
20	State the	name, physical address, and telephone number of the person who possesses the b	books and records of the org	anizat	ion:					
٠	TIM WI	INKLER 7 PARTRICIA LANE DANBURY C	T 06811-4624 (2	03)_7	92-0	5 <u>332</u>				
BAA	<u> </u>	· · · · · · · · · · · · · · · · · · ·		Form	990	(2008)				

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Form 990 (2008)

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) or 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 no		sate a	ny (directo	or, tr			
(A)	(B)	n-	4.=-	() 	-			(D)	(E)	(F)
Name and Title	Average hours per week	l	_		_	that app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	adividi el frastee or director	Former Highest comprehabled employee Key employee Officer anchuloscal foutbee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations			
CLEO JOSEPH										
CMM DIRECTOR	4.00		-							
TIM WINKLERQTR MASTER	8.00									
PAUL O. SCHLEMMER BOARD MEMBER	3.00									
FRED JONES										
BOARD MEMBER	3.00									_
										-
		_								

TEEA0107 04/24/09

Total number of independent contractors (including those in 1) who received more than \$100,000 in

compensation from the organization >

Pa	rt V	/III Statement of R	evenue						
	. 8	à ,		, «		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
<u></u>	* .	<u> </u>		. }} '	1 2 2 2		revenue	Tevenue	512, 513, or 514
2₹	1 a	a Federated campaigns		1 a			, · . * *		\$
\$ E	ŀ	b Membership dues		1 b	2,193.			1 \$3	, v
S,S	(c Fundraising events .		1c	2,480.		\$ \$ \$.		· .
ËÆ	(d Related organizations		1d					
S.E.	•	e Government grants (contribu	tions)	1 e					
52	•	f All other contributions gifts	grants and						
哥里	'	 All other contributions, gifts, similar amounts not included 	d above .	1f	53,809.			`` '	
FO		g Noncash contribns included		\$				₹.	
PROGRAM SERVICE REVENUE ONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		h Total. Add lines 1a-1f		-	•	58,482.		J 4 M.	
H					Business Code	1	14 (1	1 2 2 1	V. 75.
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JCE.	(-						
Ĕ								-	
Σ	•	 e							
S.	f	f All other program serv	ice revenu	e					
<u>R</u>		g Total. Add lines 2a-2f			>		,	***	V W Ys
	3	Investment income (in	cludina div	idends	interest and				
	_	other similar amounts))		>	902.	902.	0.	0.
	4	Income from investme	xempt bond proceeds						
	5	Royalties			<u> </u>				
			(i) Re	eal	(II) Personal				
		a Gross Rents							
		b Less: rental expenses	•						
		c Rental income or (loss)							
	•	d Net rental income or (<u> </u>		W. n. 100 A 100		
	7 a	a Gross amount from sales of	(i) Secu	rities	(ii) Other				
		assets other than inventory							
	ŀ	b Less: cost or other basis					**		
		and sales expenses	ļ		.		* .		
		Gain or (loss)							
	C	d Net gain or (loss)							ļ
ш	8 a	Gross income from fur	ndraising e	vents					4 × 4
EN		(not including \$							
Ê		of contributions reported See Part IV, line 18	ea on line				* * * *		
OTHER REVENU		•		í		***		`	` * * ` \$
Ē		b Less: direct expenses c Net income or (loss) fr	om fundra	I Supa o	Vonto 🕨		<u> </u>	<u> </u>	
					vents	* ***	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	***************************************	
	9 a	Gross income from gain See Part IV, line 19	ming activi	ties					
		Less direct expenses		ŀ					
		Net income or (loss) fr	om damino	_	'L				
				_		% / : % & x		1	
	100	 Gross sales of invento and allowances 	ry, iess rec	urris a				¥ ,	
	b	Less: cost of goods so	ld	ŀ					
		Net income or (loss) fr		of inve	ntory •	town with two or a sealing shifter a shifter a side and	mentana a para para para para para para para	**************************************	<u> </u>
		Miscellaneous Reve			Business Code	* *	11111		
	11 a	·		[
	b			[
	c	:		[
	d	All other revenue		_ [
	e	Total. Add lines 11a-1	1d	_	>				
	12	Total Revenue. Add In	nes 1h, 2a.	3, 4, 5	5, 6d, 7d, 8c. 9c.				
		10c, and 11e			, , , , , , , , , , , , , , , , , , ,	59,384.	902.	0.	0.

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).									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1									
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members 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 contributions (include section 401(k) and section 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees)								
ä	a Management								
	Legal								
	Accounting .								
	1 Lobbying								
	Prof fundraising svcs. See Part IV, In 17		. 1	() ~ % % **					
	Investment management fees								
	Other								
'	Advertising and promotion .	75.		<u>. </u>					
13		83.							
14	Information technology .								
15	Royalties .								
16	0								
	Travel								
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								
23	Insurance	10,538.							
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	*	* * *	` *	*				
	•	735.		<u> </u>	*				
	PICINIC TICKETS & FOOD	45.							
	PER CAPITA TAX	99.							
	POOL TABLE	675.							
	POPPY EXPENSES	331.							
	All other expenses	33,239.							
	Total functional expenses. Add lines 1 through 24f	45,820.							
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 fundraising solicitation.								
	parameter and controlled		<u> </u>						

Pa	<u>irt X</u>	Balance Sheet							
			(A) Beginning of year		(B) End of year				
	1	Cash – non-interest-bearing	19,030.	1	28,192.				
	2	Savings and temporary cash investments	120,000.	2	120,000.				
	3	Pledges and grants receivable, net		3					
	4	Accounts receivable, net		4					
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5					
	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					
A	7	Notes and loans receivable, net		7					
ASSETS	8	Inventories for sale or use		8					
T S	9	Prepaid expenses and deferred charges .	-	9					
	10a	Land, buildings, and equipment: cost basis 10a							
	ı	Less: accumulated depreciation. Complete Part VI of							
	İ	Schedule D		10 c					
	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 equal line 34)	139,030.	16	148,192.				
	17	Accounts payable and accrued expenses		17					
	18	Grants payable .		18					
	19	Deferred revenue		19					
Ļ	20	Tax-exempt bond liabilities		20					
À	21	Escrow account liability Complete Part IV of Schedule D		21					
A B I L I T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	,		* * * *				
- 1		of Schedule L		22					
E S	23	Secured mortgages and notes payable to unrelated third parties .		23					
	24	Unsecured notes and loans payable .		24	•				
	25	Other liabilities. Complete Part X of Schedule D		25					
	26	Total liabilities. Add lines 17 through 25	0.	26	0.				
Й		Organizations that follow SFAS 117, check here ► and complete lines		*	* * * .				
Ĕ		27 through 29 and lines 33 and 34.		* *	* * *				
ASS	27	Unrestricted net assets		27					
Ē	28	Temporarily restricted net assets		28					
	29	Permanently restricted net assets		29					
R		Organizations that do not follow SFAS 117, check here > X and complete							
E		lines 30 through 34.							
FUND	30	Capital stock or trust principal, or current funds .		30_					
В	31	Paid-in or capital surplus, or land, building, and equipment fund		31					
BALAZCES	32	Retained earnings, endowment, accumulated income, or other funds	139,030.	32	148,192.				
Č	33	Total net assets or fund balances.	139,030.	33	148,192.				
	34	Total liabilities and net assets/fund balances	139,030.	34	148,192.				
Pa	art X	Financial Statements and Reporting							
		counting method used to prepare the Form 990. X Cash Accrual ere the organization's financial statements compiled or reviewed by an independent	Other		Yes No				
-		ere the organization's financial statements compiled or reviewed by an independent accountant?	accountaill!		2a X				
		Yes' to 2a or 2b, does the organization have a committee that assumes responsibilit	v for oversight of the a		· **				
5	rev	new, or compilation of its financial statements and selection of an independent acco	untant?		2c				
3	a AS Au	a result of a federal award, was the organization required to undergo an audit or audit Act and OMB Circular A-133?	uits as set forth in the	Single	3a X				
		Yes,' did the organization undergo the required audit or audits?			. 3b				
BA					Form 990 (2008				