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UNDER

EXTENSION

OMB No 1545 0047

2009

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 Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements , 2010 For the 2009 calendar year, or tax year beginning 7/01 2009, and ending D Employer Identification Number Check if applicable 23-0344015 IRS label or print or type See The American Legion Club of Gettysburg Address change PO Box 3386 E Telephone number Name change Gettysburg, PA 17325 (717) 334-4513 Initial return specific Instruc-Termination 3,409,466. Amended return G Gross receipts \$ F Name and address of principal officer H(a) Is this a group return for affiliates? Yes Application pending H(b) Are all affiliates included? Yes Same As C Above If 'No,' attach a list (see instructions) Tax-exempt status | X | 501(c) (7 4947(a)(1) or 527) ◄ (insert no) Website: ► H(c) Group exemption number 🏲 X L Year of Formation 1948 Form of organization M State of legal domicile PA Trust Association Other > Corporation Summary Briefly describe the organization's mission or most significant activities The American Legion Post 202 is a <u>non-profit_veterans'_organization_dedicated_to_our_veterans,_members,_active_</u> military and their families, and the community. They are devoted to providing a _ _ _ comfortable atmosphere for our members and offering assistance to those in need. Check this box ► I if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 36 Total number of employees (Part V, line 2a) 5 Total number of volunteers (estimate if necessary 6 <u>80</u> 7a Total gross unrelated business revenue from Part 7 a 0. 490 T. line 34 **b** Net unrelated business taxable income from Form 0. S FEB 1 4 2011 **Prior Year Current Year** Ŕ 2,848 Contributions and grants (Part VIII, line 1h) 2,651. 47,325. 9 Program service revenue (Part VIII, line 2g) 71,165. 1,745 10 Investment income (Part VIII, column (A), lines 3 4, a 1,030. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 674,496 561,838. 11 612,844. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 750,254 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 12,820 16,049. 14 Benefits paid to or for members (Part IX, column (A), line 4) 329,119 254,888. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 314,185 287,384. 656,124 558,321. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 94,130 Revenue less expenses Subtract line 18 from line 12 54,523. 8 **Beginning of Year End of Year** 20 Total assets (Part X, line 16) 1,336,752 1,304,809. 21 Total liabilities (Part X, line 26) 369,431 282,965. 967,321 1,021,844. Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of office PRESIDENT OF THE BUARD OF DIRECTURS Type or print name and title Date Preparer's identifying number (see instructions) Check if Paid employed Preparer's 2-2-11 Presignature Robert C Boehner PC CPA N/A parer's Robert C. Boehner, Firm's name (or Use yours if self-employed), address, and 369 York Street EIN ► N/A Only Phone no ► (717) Gettysburg, PA 17325-1931 334-7227 May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

TEEA0113L 12/29/09

Form 990 (2009)

	1 990 (2)			r region club c			23-0	344015		² age 2
Par				am Service Accor	nplishments					
		describe the		s mission						
	See S	<u>Schedule</u>	0							
								. 		
2	Did the	organization	undertake a	ny significant program	services during the ye	ear which were not liste	d on the prior		-	
		990 or 990-EZ			,		•	☐ Yes	X	No
	If 'Yes.	' describe the	se new serv	ices on Schedule O					لتتا	
3				ucting, or make signific	ant changes in how it	conducts any program	50540052	Yes	X	No
•				on Schedule O	ant changes in now it	conducts, any program	I Selvices.	les	Δ	140
			-					0 1	501 <i>(</i>)	(2)
4	and 50	be trie exempi 11(c)(4) organ	t purpose aci	hievements for each of section 4947(a)(1) trus	the organization's thre	ee largest program ser	vices by exper	ises Section	501(c)	(3) al
	expens	ses, and rever	nue, if any, fo	or each program service	e reported	ore the amount of grant	s and anocatio	ins to others,	tile tota	21
					•					
		Signatura Sala Galari								
4 a	(Code		(Expenses	\$	_ including grants of	\$) (Revenue	\$)
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41	(Code		(Expenses	\$	_ including grants of	\$	_) (Revenue	\$)
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40			ces (Descrit	e in Schedule O)						
	(Exper				ts of \$) (Revenu	e \$)	
46	Total p	rogram servi	ce expenses	.						

	•		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?	2		X
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		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
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		
6	Did the organization maintain any donor advised funds or any similar funds or 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_
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	EGAP SING O
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		X
12/	A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
12	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	المستمنا	X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
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		Х
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17_		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Х	
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u> </u>

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х 21 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 27 If 'Yes,' complete Schedule I, Parts I and III 22 Х 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 X 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, and 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 Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24h 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 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 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 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 Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 27 126 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Х 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Х 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х 32 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 Х 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 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 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 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 Х 37

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Form 990 (2009)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

Note. All Form 990 filers are required to complete Schedule O

otatements regarding other into rinings and rax compliance						
•		Yes	No			
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U SInformation Returns Enter -0- if not applicable1a						
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.						
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 2a 36						
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
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?						
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?	5a		X			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х			
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?						
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?						
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?						
7 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?						
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, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal 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 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?	8					
9 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						
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 2,400.						
11 Section 501(c)(12) organizations. Enter						
a Gross income from other members or shareholders						
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)						
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 12b						

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Form 990 (2009)

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing Body and Management					
					Yes	No	
1 a	Enter the	e number of voting members of the governing body	1a	G. 3	ê L		
b	Enter the	e number of voting members that are independent	1b 7				
2	Did any officer, d	officer, director, trustee, or key employee have a family relationship or a business rirector, trustee or key employee?	elationship with any other	2		X	
3	Did the o	organization delegate control over management duties customarily performed by or s, directors or trustees, or key employees to a management company or other pers	under the direct supervision on?	3		х	
4 Did the organization make any significant changes to its organizational documents							
	since the prior Form 990 was filed?						
5	5 Did the organization become aware during the year of a material diversion of the organization's assets?						
6		organization have members or stockholders?		6		X	
7 a	Does the	organization have members, stockholders, or other persons who may elect one or a body?	more members of the	7a		Х	
b	Are any	decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		X	
8	Did the o	organization contemporaneously document the meetings held or written actions undiving	ertaken during the year by				
a	The gove	erning body?		8a		X	
b	Each cor	nmittee with authority to act on behalf of the governing body?		8b		X	
9	Is there a	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	9		x	
Sec		Policies (This Section B requests information about policies not	required by the Internal				
Reve	nue Code	•					
					Yes	No	
10 a	Does the	organization have local chapters, branches, or affiliates?		10a		X	
	If 'Yes.'	does the organization have written policies and procedures governing the activities ches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	10b			
11		organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11		X	
		in Schedule O the process, if any, used by the organization to review this Form 99			15878		
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х		
		ers, directors or trustees, and key employees required to disclose annually interests	that could give rise	12b			
c	: Does the Schedule	organization regularly and consistently monitor and enforce compliance with the position of the second seco	olicy? If 'Yes,' describe in	12 c	х		
13	Does the	organization have a written whistleblower policy?		13		X	
14	Does the	organization have a written document retention and destruction policy?		14		X	
15	Did the p	process for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent		4		
		nization's CEO, Executive Director, or top management official		15a		Х	
		icers of key employees of the organization		15 b		Х	
	If 'Yes' to	o line 15a or 15b, describe the process in Schedule O (See instructions.)					
16 a	Did the c	organization invest in, contribute assets to, or participate in a joint venture or similaring the year?	r arrangement with a taxable	16a		X	
	ın joint v status wi	has the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	n to evaluate its participation d the organization's exempt	16 b			
Sec	tion C.	Disclosures					
17	List the s	states with which a copy of this Form 990 is required to be filed None					
18	Section (5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) a	/aılab	e for	public	
	Own	website Another's website X Upon request					
19	Describe statemer	in Schedule O whether (and if so, how) the organization makes its governing documents available to the public Upon Request	ments, conflict of interest pol	ıcy, ar	nd fina	anciai	
		e name, physical address, and telephone number of the person who possesses the er 528 East Middle Street Gettysburg PA 17325 (717)		anızat	ion		
							

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees
 See instructions for definition of 'key employees'
- 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

X Check this box if the organization did not compensate any current officer, director, or trustee

employees, and former such persons

(A)	(B)	(c) Position (check all that apply)					l. A	(D)	(E)	(F)	
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	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	
James Sutton											
Board Member	1							0.	0.	0.	
Richard Kelly						İ					
Vice President	2							0.	0.	0.	
Richard Baumgardner											
Secretary	2							0.	0.	0.	
Oscar Colon											
Treasurer	2							0.	0.	0.	
William Little											
Board Member	1							0.	0.	0.	
Richard Keefer											
Board Member	1							0.	0.	0.	
Philip Fazenbaker											
President	5							0.	0.	0.	
									-		

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ► 0

Pa	t VIII Statement of Revenue					
	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
25	1a Federated campaigns 1a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b					
S S	c Fundraising events. 1c					
FR	d Related organizations 1 d					
S, E	e Government grants (contributions) 1 e					
S S						
	f All other contributions, gifts, grants, and similar amounts not included above 1 f	2,651.				
₩ O	g Noncash contribus included in Ins 1a-1f \$					
SA	h Total. Add lines 1a-1f	.	2,651.			
	ii Totai: Add lines Ta-11	Business Code				
ES	2a Banquet Income	543,11033 6646	21,705.	21,705.		
ي	b Membership Dues & Assessments		9,968.	9,968.		
핑	c Staff Amusements		6,112.	6,112.		
<u>~</u>	d Crab Feeds		3,049.	3,049.		
S E						
<u>¥</u>	e Bus Trips		2,593.	2,593.	·wr.	
PROGRAM SERVICE REVENUE	f All other program service revenue		3,898.	3,898.		
-	g Total. Add lines 2a-2f		47,325.			
	3 Investment income (including dividends, other similar amounts)	interest and	1,030.			1,030.
	4 Income from investment of tax-exempt b	and proceeds	1,030.			1,030.
	•	oria proceeds				
	5 Royalties (1) Real	(ii) Personal				
	6a Gross Rents	(ii) Fersonal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	() 0"				
	7a Gross amount from sales of assets other than inventory	(ii) Other				
	assets other than inventory					[
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	, , ,					1
ENUE	8a Gross income from fundraising events (not including \$		į			
OTHER REVENU	of contributions reported on line 1c)	7 047		ļ		
2	See Part IV, line 18	7,247.				
1	b Less direct expenses b	3,814.	2 422	2 422		
	c Net income or (loss) from fundraising ev	ents	3,433.	3,433.		
	9a Gross income from gaming activities See Part IV, line 19 a	2 056 722				
	· · · · · · · · · · · · · · · · · · ·	2,956,722.				
	b Less direct expenses b	2,502,742.	452.000	452.000		
	c Net income or (loss) from gaming activit	ies	453,980.	453,980.		
	10a Gross sales of inventory, less returns	205 051				ļ
	and allowances a	385,051.]
	b Less cost of goods sold b	290,066.	04.005			_
	c Net income or (loss) from sales of inven		94,985.	94,985.		
	Miscellaneous Revenue	Business Code	7 045		- 	
	11a Tips		7,315.	7,315.		-
	b Miscellaneous		1,775.	1,775.	-	1
	c Gift Certificate		350.	350.		
	d All other revenue	-				ļ
	e Total. Add lines 11a-11d	>	9,440.			<u> </u>
	12 Total revenue. See instructions	<u> </u>	612,844.	609,163.	0.	1,030.

Partix 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).

Do i	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		16,049.	<u>oxponed</u>	general expenses	Name of the second
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	10,049.			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	-			
4	Benefits paid to or for members		·		
5	Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages.	232,574.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	_			
9	Other employee benefits	450.	,-		
10	Payroll taxes	21,864.			
11	Fees for services (non-employees)				
	Management				
	Legal	2,636.			
	Accounting	8,320.	-	· · · · · · · · · · · · · · · · · · ·	
	Lobbying		n november of the state of the		
	Prof fundraising svcs See Part IV, In 17				<u></u>
	Investment management fees			<u> </u>	
-	g Other Advertising and promotion	13,338.			
13	Office expenses	7,867.			
14	Information technology	115.			
15	Royalties		**		
16	Occupancy	94,140.			<u>. </u>
17	Travel	74,140.			
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	9,200.			
22		33,508.		·	
	Insurance	22,358.			
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).				
ā	Program Miscellaneous	25,878.			
ŀ	Repairs & Maintenance	18,036.			
(Cleaning Services	17,744.			
	Entertainment Expense	14,243.			
	Program Serv Expenses	9,096.			
	All other expenses	10,905.			
	Total functional expenses Add lines 1 through 24f	558,321.			
25	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

	•				(A) Beginning of year		(B) End of year
Т	1	Cash – non-interest-bearing			112,715.	1	32,405
	2	Savings and temporary cash investments			64,955.	2	141,164
		Pledges and grants receivable, net			01, 333.	3	
	4	Accounts receivable, net		ŀ		4	
	-	•					
	•	Receivables from current and former officers, director and highest compensated employees. Complete Part	II of S	chedule L		5	
	6	Receivables from other disqualified persons (as defin-					
		and persons described in section 4958(c)(3)(B) Com		6			
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			10,761.	8	9,147
	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment cost or other basis	10a	1,292,065.			
Ì		Complete Part VI of Schedule D					
ŀ	b	Less accumulated depreciation	10 ь	169,972.	1,148,321.	10 c	1,122,093
	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).		1,336,752.	16	1,304,809
	17	Accounts payable and accrued expenses		12,813.	17	14,338	
	18	Grants payable			18		
	19	Deferred revenue		<u> </u>	19		
-	20	Tax-exempt bond liabilities			-	20	
3	21	Escrow or custodial account liability Complete Part	V of S	chedule D		21	
-	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified pe	stees,	key employees, Complete Part II			
-		of Schedule L	30113	complete rare ii		22	
	23		nird na	rties	351,216.	23	264,430
- 1		Unsecured notes and loans payable to unrelated third	-	ľ	301,210.	24	
- 1	25	Other liabilities Complete Part X of Schedule D	, pa. 110	•	5,402.	25	4,197
- 1	26	Total liabilities. Add lines 17 through 25.			369,431.	26	282,965
_		Organizations that follow SFAS 117, check here ►	an	d complete lines			
1		27 through 29 and lines 33 and 34.					
3	27	Unrestricted net assets			•	27	
	28	Temporarily restricted net assets				28	•
	29	Permanently restricted net assets				29	
₹		Organizations that do not follow SFAS 117, check he					
F		lines 30 through 34.					
֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	30	Capital stock or trust principal, or current funds			30		
- 1	31	Paid-in or capital surplus, or land, building, and equip	ment	fund		31	
	32	Retained earnings, endowment, accumulated income			967,321.	32	1,021,844
14 14 14 14 14 14 14 14 14 14 14 14 14 1	33	Total net assets or fund balances			967,321.	33	1,021,844
E	34	Total liabilities and net assets/fund balances			1,336,752.	34	1,304,809

•		Yes	No
1 Accounting method used to prepare the Form 990 \square Cash $ \overline{X} $ Accrual \square 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?	2a		Χ
b Were the organization's financial statements audited by an independent accountant?	2b		X
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?	2c		
If the organization changed either its oversight process or selection 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 for the year were issued on a consolidated basis, separate 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?	3a		Х
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	3ь		

BAA

Form 990 (2009)

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, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer Identification number

The	e American Legion Club of Gett	tysburg			02 0244015	
					23-0344015	
Par	Organizations Maintaining Dono the organization answered 'Yes' to	o r Advised Funds or Oth to Form 990, Part IV, line	er Similar Funds e 6.	or Acc	ounts Complete	e if
		(a) Donor advised	funds	(b) F	unds and other acc	counts
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 do funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	e assets held in donc e legal control?	or advised	Yes	☐ No
6	Did the organization inform all grantees, donc used only for charitable purposes and not for purpose conferring impermissible private ben	the benefit of the donor or don	ng that grant funds nor advisor or for an	may be y other	Yes	□No
Dái	Conservation Easements Comple		swored 'Ves' to	Form 00		
				FOIII 9:	30, Part IV, line	/.
1		• •	_ `` **			
	Preservation of land for public use (e g , i	recreation or pleasure)	\vdash		ally important land	area
	Protection of natural habitat		Preservation of c	ertified hi	storic structure	
_	Preservation of open space					
2	Complete lines 2a through 2d if the organization last day of the tax year	ion held a qualified conservation	on contribution in the	e form of	a conservation easi	ement on the
	ider day of the tax year			Jan 20	Held at the End o	f the Year
a	Total number of conservation easements			2a	Tiela at the Life o	Tale real
	Total acreage restricted by conservation ease	ements		2 b		-
	Number of conservation easements on a certi		lun (a)	2 c		
	Number of conservation easements included		i iii (a)	2d		
	Number of conservation easements modified,		ished or terminated		raanization during th	no tov
J	year >	transierred, released, extingu	isiled, or terminated	by the or	garnzation during ti	ie iax
4	Number of states where property subject to co	onservation easement is locate	ed >			
5	Does the organization have a written policy re and enforcement of the conservation easeme	nt it holds?			ations, Yes	☐ No
6	Staff and volunteer hours devoted to monitori during the year >	ng, inspecting, and enforcing	conservation easem	ents		
7	Amount of expenses incurred in monitoring, is during the year	nspecting, and enforcing cons	ervation easements	\$ _		_
8	Does each conservation easement reported o 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the re	equirements of section	on	Yes	☐ No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	to the organization's financial	statements that des	cribes the	organization's acc	and ounting for
Pai	Organizations Maintaining Collection Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or O , Part IV, line 8.	ther Sin	nilar Assets	
1 a	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statemi	olic exhibition, education, or re	search in furtheranc	and bala e of public	nce sheet works of c service, provide, i	art, historical n Part XIV,
t	 If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items 	er SFAS 116, to report in its re plic exhibition, education, or re	venue statement and search in furtheranc	d balance e of public	sheet works of art, c service, provide th	historical ne following
	(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 a amounts required to be reported under SFAS	art, historical treasures, or othe 116 relating to these items	er sımılar assets for	financial (gain, provide the fo	llowing
ä	a Revenues included in Form 990, Part VIII, line	e 1			► \$	
	Assets included in Form 990, Part X				► \$	_

Schedule D (Form 990) 2009 The				23-034		Page 2	
Parallil Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)							
3 'Using the organization's acquisit items (check all that apply)	on accession and o	ther records, che	ck any of the following th	hat are a significant us	e of its colle	ection	
a Public exhibition		d Loan	or exchange programs				
b Scholarly research	b Scholarly research e Other						
	— · · · · · · · · · · · · · · · · · · ·						
Part XIV							
5 During the year, did the organiza assets to be sold to raise funds in	ition solicit or receiv ather than to be ma	e donations of ar aintained as part	t, historical treasures, or of the organization's coll	r other similar ection?	Yes	□No	
Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21							
1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No							
b If 'Yes,' explain the arrangement	in Part XIV and coa	mplete the follow	ing table				
_					Amount		
c Beginning balance				1c			
d Additions during the year				1 d			
e Distributions during the year				1e			
f Ending balance	000) Dark V I 213	.	1f			
2a Did the organization include an a b If 'Yes,' explain the arrangement		, Part X, line 21	,	1	Yes	∐ No	
Part V Endowment Funds Co		zation answer	ed 'Voc' to Form 99	0 Part IV Juna 10			
Endownient Funds Co	(a) Current year	(b) Prior yea		(d) Three years back	(a) Four	years back	
1 a Beginning of year balance	(a) burrent your	(B) The year	(c) Two Jeans Back	(u) Three years back	(e) Tour	Jears Dack	
b Contributions							
c Net Investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentag	e of the year end ba	lance held as					
a Board designated or quasi-endov	vment ►	%					
b Permanent endowment ►	<u> </u>						
c Term endowment ►	8						
3a Are there endowment funds not	n the possession of	the organization	that are held and admir	stered for the			
organization by					Ye	s No	
(i) unrelated organizations				•	3a(i)		
(ii) related organizations			-b1 1- D2		3a(ii)		
b If 'Yes' to 3a(ii), are the related of4 Describe in Part XIV the intender	-	-			3b		
Part VI Investments—Land, B				line 10			
Description of investment		st or other basis	(b) Cost or other	(c) Accumulated	(d) Book		
		investment)	basis (other)	Depreciation	(4) 5001		
1a Land	<u> • </u>		243,627.			43,627.	
b Buildings	<u> </u>		974,197.	116,073.	85	58,12 <u>4.</u>	
c Leasehold improvements			1,250.	57.		1,193.	
d Equipment			44,484.	31,098.		13,386.	
e Other		000 5 111	28,507.	22,744.		5,763.	
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	rm 990, Part X, c	column (B), line 10(c))			22,093.	
BAA				Sched	lule D (Form	990) 2009	

Schedule D (Form 990) 2009 The American Legic	on Club of Gettysburg	23-0344015 Page 3
Part VII Investments—Other Securities See Fo	rm 990, Part X, line 12.	N/A
. (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
~		
	<u> </u>	
	- 11	
		· · · · · · · · · · · · · · · · · · ·
Total (Column (b) must equal Form 990 Part X, col (B) line 12)	000 5 1 1 10	
Part VIII Investments—Program Related (See F		N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
 		oost of end of year market value
	7.	
Total (Column (b) must equal Form 990, Part X, Col (B) line 13.)		
Part IX Other Assets (See Form 990, Part X,	ine 15) N/A	
(a) De	scription	(b) Book value
T.1. (0.1 (1) (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5		
Total. (Column (b) must equal Form 990, Part X, col (B), In		>
Part X Other Liabilities (See Form 990, Part		····
(a) Description of Liability Federal Income Taxes	(b) Amount	i
	3 010	İ
Payroll Taxes Payable Sales Tax	3,919.	
Sales lax	278.	
	 	
	 	
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)	4,197.	
2 FIN 49 Feetrate in Best VIV around the text of the feet	<u> </u>	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Sche	edule D (Form 990) 2009 The American Legion Club of Gettysburg	23-034	14015_	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	,Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25).			
3	Excess or (deficit) for the year Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8	İ		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
	Total revenue, gains, and other support per audited financial statements	1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	Net unrealized gains on investments			
	Donated services and use of facilities 2b	⊣ '		
	Recoveries of prior year grants			
	d Other (Describe in Part XIV)			
	e Add lines 2a through 2d	2e	1	
_	Subtract line 2e from line 1	3		
3) I	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	a Investments expenses not included on Form 990, Part VIII, line 7b	⊣ ì '		
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5) / A	
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Kett	irn N/A	
1	Total expenses and losses per audited financial statements	1		
	Amounts included on line 1 but not on Form 990, Part IX, line 25		į	
	a Donated services and use of facilities 2a			
	Prior year adjustments 2b			
	Other losses 2c			
	d Other (Describe in Part XIV)		ļ	
•	e 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:			
	a Investments expenses not included on Form 990, Part VIII, line 7b			
ŀ	Other (Describe in Part XIV)			
(c Add lines 4a and 4b	4c		
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		
Pai	t XIV Supplemental Information			
line	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this mation	IV, lines part to p	1b and 2b, P provide any ac	art V, Iditional
		- 		

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Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 The American Legion Club of Gettysburg PartXIV Supplemental Information (continued)	23-0344015	Page 5
Supplemental Information (continued)		
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. SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2009

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number									
The American Legion Club		23-0344015							
Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17 Form 990E2 filers are not required to complete this part									
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply									
Mail solicitations				Solicitation of non-	governn	nent grants			
Internet and email solicitations	,			Solicitation of gove	_	_			
Phone solicitations				Special fundraising		-			
In-person solicitations					CVCIIIS				
2a Did the organization have written of	or oral agreeme	ent with an	v individu	al (including officers, di	rectors	trustees or key	1		
employees listed in Form 990, Par	t VII) or entity	in connect	ion with p	rofessional fundraising	services	57	Yes X No		
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dıvıduals or en ne organızatıon	tities (fund	lraisers) p	ursuant to agreements	under w	hich the fundra	iser is to be		
					(v) Ar	nount paid to			
(i) Name of individual	(ii) Activity		fundraiser	(iv) Gross receipts	(or i	retained by)	(vi) Amount paid to		
or entity (fundraiser)		of contr	dy or control butions?	from activity	Turiara	aiser listed in col (i)	(or retained by) organization		
		Yes	No						
		_ res_	NO		į				
					Ì				
				· · ·		· · · · · · · · · · · · · · · · · · ·			
	,								
					1				
		İ							
		ļ							
				-		-			
			ĺ						
	-	-							
		J							
Takal			_						
Total 3 List all states in which the organiz	ation is registe	rod or lico	ncod to se	hot funds or has been	notified	it is evenuet fro	0.		
or licensing	ation is registe	red or lice	nseu to sc	nicit iunus or nas been	nomea	it is exempt in	in registration		
<u> </u>									
	_	_							

Sche	dule	G (Form 990 or 990-EZ) 2009 The Ame	erican Legion C	lub of Gettysbu	irg 23-034	44015 Page 2				
Par	: W	Fundraising Events. Complete if reported more than \$15,000 on F	the organization ai orm 990-EZ, line 6	nswered 'Yes' to Fo a List events with	orm 990, Part IV, II gross receipts grea	ne 18, or ater than \$5,000				
R			(a) Event #1 Golf Tourn (event type)	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))				
E			(event type)	(event type)	(total flumber)					
MCZM <m3< td=""><td>1</td><td>Gross receipts</td><td>5,122.</td><td></td><td></td><td>5,122.</td></m3<>	1	Gross receipts	5,122.			5,122.				
E	2	Less Charitable contributions								
	3_	5,122.								
	4	Cash prizes								
	5	Noncash prizes			<u>.</u>					
D-RECT	6	Rent/facility costs								
	7	Food and beverages								
EXPESSES	8	Entertainment								
2 S E S	9	Other direct expenses	2,934.	2,934.						
	10									
	11 Net income summary Combine lines 3, column (d) and line 10 Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or repo									
<u>Par</u>	<u>(Ш</u>)	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	s' to Form 990, Pa	rt IV, line 19, or rep	ported more than				
MCZM<			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))				
Ē	1	Gross revenue	103,990.	2,852,732.		2,956,722.				
D X	2	Cash prizes	67,301.	2,326,602.		2,393,903.				
DIRECT	3	Non-cash prizes		6,928.		6,928.				
Š	4	Rent/facility costs	2,400.			2,400.				
	5	Other direct expenses	35,021.	64,490.		99,511.				
	6	Volunteer labor	X Yes 100 % No	Yes 0 %	Yes 0 % X No					
	7 Direct expense summary Add lines 2 through 5 in column (d)									
	8	Net gaming income summary Combine I	ines 1, column (d) and	line 7	•	453,980.				
						YES NO				
		er the state(s) in which the organization op ne organization licensed to operate gaming				9a X				
		o,' explain	g activities in each of the	ese states.		94 A				
10 =		e any of the organization's gaming license	es revoked suspended	or terminated during th		10a X				
		e any of the organization's gaining license es,' explain	s revoked, suspended							
11	 Doe	s the organization operate gaming activities	es with nonmembers?			11 X				
12	ls th	ne organization a grantor, beneficiary or tro	ustee of a trust or a me	mber of a partnership of	or other entity formed to					
	adm	ninister charitable gaming?				12 X				

•			
Schedule G (Form 990 or 990-EZ) 2009 The American Legion Club of Gettysburg	23-0344015		age 3
		YES	NO
13 .Indicate the percentage of gaming activity operated in	100.00		
a The organization's facility	100.0%		
b An outside facility	%		
14 Enter the name and address of the person who prepares the organization's gaming/special events book	s and records		
Name ► Kymberlee A Ketterman			
Address ► 2558 Old Route 30, Orrtanna, PA 17353			
15a Does the organization have a contact with a third party from whom the organization receives gaming rev	venue? 15	а	Х
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and	the amount		
of gaming revenue retained by the third party \$	l		
c If 'Yes,' enter name and address of the third party			
Name			
Address			
16 Gaming manager information			
Name ► Karen_Baumgardner			
Gaming manager compensation ► \$			
Describes of services recorded to Wolumbook who managed Ringo only			
Description of services provided Volunteer who manages Bingo only	·		
Director/officer Employee Independent contractor			
	Y		i
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds t state gaming license?	to retain the	a X	
b Enter the amount of distributions required under state law to be distributed to other exempt organization	is or spent in the		
organization's own exempt activities during the tax year ►\$ 16,049. See Supple	mental		
BAA TEEA3703L 02/05/10 Sche	dule G (Form 990 or	990-EZ)	2009

SCHEDULE I

Department of the Treasury Internal Revenue Service

Governments and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545-0047

Open to Public Inspection

× ê □ (h) Purpose of grant or assistance Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form X Yes **Employer identification number** 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 23-0344015 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) See Part IV (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 2 Enter total number of section 501(c)(3) and government organizations Part I General Information on Grants and Assistance The American Legion Club of Gettysburg (b) EIN Enter total number of other organizations 1 1 1 (a) Name and address of organization or government I i 1 Name of the organization 1 1 1 1 1 1

The American Legion Club of Gettysburg Schedule I (Form 990) 2009

Page 2

23-0344015

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

[Perf []]

(f) Description of non-cash assistance					and any other additional information.						 			† 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(e) Method of valuation (book, FMV, appraisal, other)					l, line 2,	1					1	 			
(d) Amount of non-cash assistance					provide the information required in Part			 	 		1 1 1 1 1 1 1 1 1	 			
(c) Amount of cash grant					rovide the informal	<u>:s_are_Used</u>		 							
(b) Number of recipients	1				lete this part to p	<u>on of How Grants</u>		 	, , , , , ,		; ; ; ; ; ;				
(a) Type of grant or assistance	Medical expense assistance				Part W Supplemental Information. Complete this part to	Part I, Line 2 Grantmaker's Description of How Grant	Need_determined_by_committee								.

BAA

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

The American Legion Club of Gettysburg	Employer identification number 23-0344015
Form 990, Part III, Line 1 - Organization Mission	
The American Legion Post 202 is a non-profit veterans' organiza	ation_dedicated_to_our
veterans, members, active military and their families, and the	community. They are
devoted_to_providing_a_comfortable_atmosphere_for_our_members_a	and offering
assistance_to_those_in_need.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
No_review_was_or_will_be_conducted.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Cor	oflicts
Conflicts are monitored and enforced by committee as needed.	

Schedule O (Form 990) 2009 Name of the organization	Page 2
	Employer identification number
The American Legion Club of Gettysburg	23-0344015
ı	
,	

2009

Schedule G - Supplemental Information

Page 4

Client 364

The American Legion Club of Gettysburg

23-0344015

2/03/11

01 34PM

Part III, Line 17b Distributions Required Under State Law

Total \$ 16,049.

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

► File a separate application for each return

memai revenue	Service	- 1 - 2 - Sopulate application for each retain					
• If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and check this box			► X		
If you are	e filing for an Additional (Not Auto	omatic) 3-Month Extension, complete only Part II (c	on page 2 of the	ıs form)			
-		dy been granted an automatic 3-month extension or					
Partil	Automatic 3-Month Extens	ion of Time. Only submit original (no copie	es needed).	· · · · · · · · · · · · · · · · · · ·			
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension — check	k this box and	complete Part I or	nly ►		
All other corp		, partnerships, REMICS, and trusts must use Form 2	7004 to reques	t an extension of i	time to file		
Electronic Fi returns noted the additiona Form 990-T	lling (e-file). Generally, you can eld below (6 months for a corporation of the corporati	ectronically file Form 8868 if you want a 3-month au on required to file Form 990-T) However, you canno on or (2) you file Forms 990-BL, 6069, or 8870, grou or completed and signed page 2 (Part II) of Form 886 -file for Charities & Nonprofits	it file Form 886 up returns, or a	68 electronically if a composite or cor	(1) you want nsolidated		
	Name of Exempt Organization			Employer identification	on number		
Type or							
print	The American Legion	Club of Gettysburg		23-0344015			
File by the	Number, street, and room or suite number			123 0311013			
due date for filing your	PO Box 3386						
return See instructions	City, town or post office, state, and ZIP cod	e For a foreign address, see instructions					
	Gettysburg, PA 17325						
Chack type o	of return to be filed (file a separat	o application for each return)					
X Form 990		~ · · ·	Form 472	20			
Form 990	<u> </u>	Form 990-T (corporation)	\vdash				
H	·	Form 990-T (section 401(a) or 408(a) trust)	Form 522				
Form 990	} -	Form 990-T (trust other than above)	Form 606				
Form 990	J-PF L	Form 1041-A	Form 887	//			
 If the org If this is the check this the extending 1 I requession 1 until	for a Group Return, enter the organs box F If it is for part of the ision will cover st an automatic 3-month (6 month)	or place of business in the United States, check this anization's four digit Group Exemption Number (GEN ne group, check this box and attach a list with a for a corporation required to file Form 990-T) extended the exempt organization return for the organization	th the names a				
	calendar year 20 or						
► <u>X</u>		, 20 <u>09</u> _, and ending <u>6/30</u> , 20	10_				
2 If this t	ax year is for less than 12 months	s, check reason	turn C	Change in account	ing period		
	application is for Form 990-BL, 99 undable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any	3a \$	0.		
b If this a made	application is for Form 990-PF or 9 Include any prior year overpayme	990-T, enter any refundable credits and estimated ta nt allowed as a credit	ax payments	3b \$	0.		
deposit	e Due. Subtract line 3b from line a with FTD coupon or, if required, structions	Ba Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment S	ed, ystem)	3c \$	0.		
Caution. If you		c fund withdrawal with this Form 8868, see Form 84	153-EO and For	rm 8879-EO for			
BAA For Pri	vacy Act and Paperwork Reducti	on Act Notice, see instructions.		Form 8868	(Rev 4-2009)		